



## **Cabinet**

**Date**      **Wednesday 16 June 2021**  
**Time**      **9.30 am**  
**Venue**     **Council Chamber, County Hall, Durham**

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### **Business**

#### **Part A**

##### **Items which are open to the public and press**

1. Public Questions
2. Minutes of the meeting held on Wednesday 21 April 2021  
(Pages 3 - 6)
3. Declarations of interest

##### **Key Decision:**

4. Levelling Up Fund - Joint Report of Corporate Director of Regeneration, Economy and Growth and Interim Corporate Director of Resources [Key Decision No. REG/03/21]  
(Pages 7 - 26)

##### **Ordinary Decisions:**

5. COVID-19 Commissioning of Designated Settings - Report of Corporate Director of Adult and Health Services (Pages 27 - 34)
6. Safe Durham Partnership Plan 2021 - 2025 - Report of Corporate Director of Neighbourhoods and Climate Change  
(Pages 35 - 136)
7. Joint Health and Wellbeing Strategy 2021 - 2025 - Joint Report of Corporate Director of Neighbourhoods and Climate Change, Corporate Director of Adult and Health Services, Corporate Director of Children and Young People's Services and Director of Public Health (Pages 137 - 212)
8. Area Action Partnerships and Member Neighbourhood Budgets - Proposed Operating Arrangements 2021/22 - Report of Corporate Director of Neighbourhoods and Climate Change  
(Pages 213 - 234)

9. Review of DLI Collection Archive and the Future of the DLI Building and Grounds - Joint Report of Corporate Director of Regeneration, Economy and Growth and Interim Corporate Director of Resources (Pages 235 - 240)
10. Review of Durham County Council Headquarters - Joint Report of Corporate Director of Regeneration, Economy and Growth and Interim Corporate Director of Resources (Pages 241 - 246)
11. Such other business as, in the opinion of the Chair of the meeting, is of sufficient urgency to warrant consideration.
12. Any resolution relating to the exclusion of the public during the discussion of items containing exempt information.

### **Part B**

#### **Items during which it is considered the meeting will not be open to the public (consideration of exempt or confidential information)**

13. Such other business as, in the opinion of the Chair of the meeting, is of sufficient urgency to warrant consideration.

**Helen Lynch**

Head of Legal and Democratic Services

County Hall  
Durham  
8 June 2021

To: **The Members of the Cabinet**

Councillors A Hopgood and R Bell (Leader and Deputy Leader of the Council) together with Councillors T Henderson, S McDonnell, J Rowlandson, E Scott, P Sexton, A Shield, J Shuttleworth and M Wilkes

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**Contact: Ros Layfield**

**Tel: 03000 269708**

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## DURHAM COUNTY COUNCIL

### CABINET

At a Meeting of **Cabinet** held on **Wednesday 21 April 2021** at **9.30 am** via Microsoft Teams

**Present:**

**Councillor S Henig, Leader of the Council (Chair)**

**Cabinet Members:**

Councillors J Allen, O Gunn, L Hovvels, C Marshall, A Napier, A Patterson, K Shaw, B Stephens and A Surtees

Prior to the commencement of business, as a mark of respect to His Royal Highness, The Duke of Edinburgh who died on 9th April 2021, one minute's silence was observed.

#### **1 Public Questions**

There were no public questions.

#### **2 Minutes**

The minutes of the meeting held on 17 March 2021 were confirmed as a correct record to be signed by the Chair.

#### **3 Declarations of Interest**

There were no declarations of interest.

#### **4 Proposal to amalgamate Ox Close Primary and Oxclose Nursery Schools into one primary school in a replacement new build on the Durham Road site of the former Tudhoe Grange Comprehensive School from 1 September 2024 [Key Decision: CYPs/03/2021]**

The Cabinet considered a report of the Corporate Director of Children and Young People's Services which sought approval to amalgamate Ox Close Primary and Oxclose Nursery Schools into one primary school in a replacement new build on the Durham Road site of the former Tudhoe Grange Comprehensive School from 1 September 2024 (for copy see file of minutes).

Moving the report, Councillor Gunn, Portfolio Holder for Children and Young People's Services, spoke of the increased pressure on primary school places in the Spennymoor area, saying the proposal for the new build school underlines the Council's priority to invest in education and meet the demand for school places. She highlighted that the majority of those who responded to the statutory notice were in support of the proposal.

The Portfolio Holder for Adult and Health Services, Councillor Hovvels, seconded the report, commenting that the new facilities will not only create a unique learning environment but will also be of benefit to the wider community.

**Resolved:**

That the recommendations in the report be approved.

## **5 High Needs Block Funding for SEND and Inclusion Support**

The Cabinet considered a joint report of the Corporate Director of Children and Young People's Services and the Interim Corporate Director of Resources which provided an update on spend and pressures on the High Needs Block (HNB) of the Dedicated Schools Grant (DSG), which supports Special Educational Needs and Disability (SEND) and inclusion support services for children and young people (for copy see file of minutes).

Councillor Gunn stated the Council had increased resources in recognition of the growing demand on the service and whilst she welcomed the additional government funding into the HNB, she pointed out that the long term position remains unclear and the delay in the government's review into special educational needs, added to the uncertainty. Having written to the Secretary of State for Education on a number of occasions to express her views with regard to SEND services; school funding and the special educational needs review, she hoped her concerns would be addressed.

Councillor Gunn paid tribute to education providers and staff who had worked tirelessly to support young people and families throughout the COVID-19 pandemic and expressed a strong wish to ensure the government grants due consideration to the likelihood that additional support will continue to be required in the future, which will further impact resources.

Seconding the report, Councillor Napier, Deputy Leader and Portfolio Holder for Finance credited officers for the comprehensive report which outlined the vast amount of work ongoing in this area despite the financial challenges. Whilst he too was pleased to see increased investment into the SEND service to address the rising demand and the increasingly complex caseload, he expressed concern that the current shortfall in funding will lead to the

challenge of recovering the shortfall through planned underspending against future grant allocations.

**Resolved:**

That the recommendations in the report be approved.

## **6 Health Protection Assurance Annual Report**

The Cabinet considered a report of the Director of Public Health which provided an update on health protection assurance arrangements in County Durham (for copy see file of minutes).

Members were pleased to see the increased uptake in flu vaccinations across all cohorts and that County Durham's performance in the childhood immunisation programmes generally exceed national averages. Councillor Gunn welcomed the fact that the in-house team of Infection Prevention and Control nurses had been extended to schools for children with special educational needs.

**Resolved:**

That the recommendations in the report be approved.

## **7 Workforce Strategy 2021-23**

The Cabinet considered a report of the Interim Corporate Director of Resources which sought approval for the adoption of the Council's new Workforce Strategy for the period 2021 - 2023.

Councillor Patterson, Portfolio Holder for Corporate Services and Rural Issues, thanked the Interim Corporate Director of Resources and his team for the hard work undertaken to present the report to Cabinet, noting this had been delayed due to the COVID-19 pandemic. However, the delay had been opportune, as it had enabled learning from the pandemic to inform the strategy.

Councillor Patterson commended officers for the ambitious plans for a workforce suitable for the future. She spoke of the workforce being the Council's greatest asset and she paid tribute to the hard work, dedication and adaptability of staff which had never been demonstrated so clearly as it had been over the past year.

Central to the strategy, Councillor Patterson said, is the partnership agreement between officers, trade union representatives and elected members and she added that support from the trade unions had assisted the

Council to face the many challenges that had presented over the past decade. She acknowledged the role of Councillors Napier and Stephens in employee relations, saying their wisdom and guidance had proved invaluable and she thanked them for leaving the Council in a strong position.

In moving the report, Councillor Patterson said she particularly welcomed the rural impact assessment and the positive contribution it will make to this predominantly rural county.

Seconding the report, Councillor Hovvels highlighted the focus on wellbeing, with the physical and mental wellbeing of the workforce being at the heart of the plans. Councillor Allen, Portfolio Holder for Transformation, Culture and Tourism, spoke of the Council's foresight in developing a programme of flexible working, improving work-life balance and facilitating remote working which had proved essential to business continuity throughout the pandemic.

Portfolio Holder for Social Inclusion, Councillor Surtees, referred to the advantages of having a wide and diverse workforce and welcomed the adoption of the strategy which embraces diversity and promotes Durham County Council as an equal opportunities employer.

**Resolved:**

That the recommendation in the report be approved.

**8 Any other business**

At the conclusion of the meeting the Chair remarked that the meeting was the final Cabinet meeting for a number of members who will stand down at the local election in May. He acknowledged the contributions made by Councillor Napier and Councillor Stephens, both of whom led authorities prior to unification in 2009, and the contribution of Councillor Allen. On behalf of the Cabinet, he expressed gratitude for their years of dedication and commitment and wished them well for the future. He hoped they would reflect on their time at the Council with great pride.

**Cabinet**

**16 June 2021**

**Levelling Up Fund**

**Key Decision No: REG/03/21**



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**Report of Corporate Management Team**

**Amy Harhoff, Corporate Director of Regeneration, Economy and Growth**

**Paul Darby, Interim Corporate Director of Resources**

**Councillor Elizabeth Scott, Cabinet Portfolio Holder for Economy and Partnerships**

**Councillor Richard Bell, Cabinet Portfolio Holder for Finance**

**Councillor James Rowlandson, Cabinet Portfolio Holder for Resources, Investment and Assets**

**Electoral division(s) affected:**

Countywide

**Purpose of the Report**

- 1 To provide Cabinet with an overview of the guidance and bidding requirements for access to the Levelling Up Fund and to seek approval of the ongoing process for the Council to develop and prioritise potential proposals across County Durham.
- 2 This report seeks approval for the submission of one first round levelling up bid for the Bishop Auckland Parliamentary Constituency, covering projects for the South West Durham area.
- 3 The report outlines the proposed approach to submissions for Round One and identifies a £4.78 million match funding requirement to lever an initial £20 million Levelling Up Fund investment towards the proposed South West Durham scheme.

## Executive summary

- 4 In the 2021 Budget, Central Government announced the new Levelling Up Fund (LUF), to provide investment in regeneration and growth in places with low productivity and poor connectivity.
- 5 County Durham has been identified as one of the areas of greatest need of levelling up in the UK and has been classified as a Tier 1 area by Central Government.
- 6 Beyond the announcement of the LUF, the Government White Paper on levelling up is expected in the Autumn and is due to set out a more comprehensive position on what levelling up will mean nationally. For County Durham, it's clear that levelling up will require a blend of investments that create different outcomes for communities. This will include place-based regeneration that improves the quality of our city, towns and villages, alongside broader investments to unlock sites for housing and employment and support the labour market.
- 7 Further guidance for the Round One levelling up bids was released in March and April 2021. The LUF is a competitive fund totalling £4 billion for England, with £600 million made available for Round One bids (refer to Appendix 2 for key headlines). Further guidance on future bidding rounds will be set out in the Government's Levelling Up White Paper, which is expected in Autumn 2021.
- 8 Each parliamentary constituency within the local authority area can submit one bid. Local authorities can only have one successful bid for each of their parliamentary constituencies over the lifecycle of the Fund, which is expected to run over three phases or bidding rounds. County Durham, with six parliamentary constituencies, would be in a position to be able to submit six bids up to the value of £120 million. The Government guidance suggests that a minimum of 10 percent match funding is recommended in support of each bid but this is not stated as a mandatory requirement.
- 9 Local authorities are the accountable body for all bids and the guidance is clear that engagement with, and the support of, the local Member of Parliament for each area is required.
- 10 There is also an opportunity for a wider regional transport bid of up to £50 million, which would need to be supported by the seven local authorities that constitute the Joint Transport Committee for the wider region.
- 11 Bids of up to £20 million per parliamentary constituency can include a maximum of three cohesively connected projects and must be delivered

with financial completion by March 2024. Business cases must demonstrate need, deliverability, strategic fit and value for money. Round One criteria highlight three priority areas for scheme investment:

- Transport;
- Regeneration and town centres;
- Cultural investment.

- 12 The Government has specified that projects should target improvements in pockets of deprivation and contribute towards carbon net zero targets. The deadline for submitting a Round One proposal for 2021/22 funding awards is **18 June 2021**, and priority will be given to projects that can commence capital spend on the ground in 2021/22. Successful bids will be announced in the Autumn.
- 13 Government has been very clear that projects must be ready to deliver and have an advanced business case for this deadline, which realistically means that only those projects that were already at an advanced stage and “shovel ready” at the March 2021 announcement could reasonably be submitted for the 18 June 2021 deadline.
- 14 Government has stated that there will be future opportunities to bid in subsequent rounds for delivery up to 31 March 2024, or exceptionally into 2024/25 for larger schemes. Further details of this and wider priorities will be outlined in a Levelling Up White Paper.
- 15 Local authorities, as Responsible Bodies for developing the bids, have received £125,000 capacity funding to support the development of future bids, however, it is expected that the development costs of a full programme of levelling up proposals will be substantially higher overall. An earmarked reserve of £1 million has been created to accommodate the estimated cost of developing robust bids for future bidding rounds.
- 16 It is expected that substantial master planning will be required for proposals across the six Parliamentary Constituency areas, where community and business engagement is a key priority and bid requirement. The Council will also be seeking a range of appropriate investments across County Durham to support transport connectivity, culture, heritage and regeneration in the city, town centres and villages. Schemes put forward will be based on the needs of each community.
- 17 The Council is committed over the three phases of the levelling up funding to seek investment for each of our six Parliamentary Constituencies of up to £120 million Levelling Up Funding in total across all the bids. It is clear that whilst there is still considerable work to do to

deliver robust and fully ready business cases, the need, opportunity and ambition is there across the county.

- 18 Given the tight timescales for Round One, gateway criteria within the LUF requirements and the quantifiable economic benefits that need to be demonstrated, one bid is sufficiently developed and capable of submission by the 18 June 2021 deadline. This proposal addresses socio-economic needs, transport barriers and cultural ambitions within its locality. A summary of the Bishop Constituency Parliamentary area bid, a Rural Connectivity and a Cultural Programme is outlined as follows:

*South West Durham (Bishop Auckland Constituency) Rural Connectivity and Cultural Programme:*

- 19 A £20 million Levelling Up ask is being sought to contribute to the delivery of three schemes that will collectively connect rural communities to services and opportunities in South West Durham, Newton Aycliffe and Barnard Castle by providing localised interventions. The schemes all provide quality of life benefits and support economic development through heritage, transport and cultural led regeneration. The schemes proposed are (see location plan in appendix 3):
- (a) Re-opening Whorlton Bridge to vehicular traffic and non-motorised users;
  - (b) Re-routing of A68 to bypass Toft Hill; and
  - (c) Enabling of Locomotion Building 2 in Shildon including car parking expansion, rail structural restoration and improved walking and cycling links.
- 20 As part of the Locomotion project, a complimentary 18km walking and cycling route will follow the alignment of the railway. The corridor will also allow an active mode route connecting rural communities along the corridor to the employment and education settlements of Bishop Auckland and Newton Aycliffe. Rural communities will include Witton Park, St. Helen Auckland, West Auckland, Shildon, Middridge and School Aycliffe. Connections will be provided from the main route to these communities, including West Auckland as the first phase of the Barnard Castle to Bishop Auckland Corridor.
- 21 The extension of the route to Barnard Castle will be one of the priorities for the next round of Active Mode funding which is expected to be announced this summer. Thus it is envisaged that a walking and cycle route will link the cultural and heritage attractions at Locomotion (Shildon), Auckland Castle (Bishop Auckland) and Bowes Museum and Castle (Barnard Castle), and provide an active mode route connecting

rural communities along the corridor. When Whorlton Bridge is reopened, this will open up further walking and cycling opportunities from Barnard Castle.

- 22 The total forecast cost of the three linked investments is £30.93 million, inclusive of 15 percent quantified risk assessment value (consistent with project development stage). There is an existing £2.25 million match funding available to the Locomotion element of the programme through the Science Museum Group and £3.9 million across the existing County Council capital programme. Whilst the 10 percent recommended match funding requirement for the LUF has already been achieved, there is a funding gap across the three linked schemes that will require further capital contributions from the Council to deliver these schemes should the LUF bid be successful. This report seeks approval for £4.78 million of additional capital investment in support of these proposals, which can be accommodated from the current capital contingency.
- 23 Final costings and economic impact assessments are being refined as part of the business case development process ahead of the LUF submission deadline. In order to meet the tight delivery timescales and spend requirements within 2021/22, additional development costs will be incurred at risk to secure planning, acquire land and procure delivery arrangements in advance of notification of whether the bid has been successful.
- 24 The Council will, with this and all future levelling up proposals, be required to continue to develop projects at risk whilst the funding bids are assessed by Central Government. If the Council does not commit to this continued investment at risk then it may mean that the overall programme of projects is not then deliverable to the Government's timetable for implementation. The costs of developing projects will be met from the earmarked reserve that has been established at year end 2020/21.
- 25 It is proposed that ambitious bids for the remaining five parliamentary constituencies are developed in line with anticipated timelines for Rounds Two and Three, with robust business cases that will meet local priorities and satisfy national guidelines for Levelling Up. Any match funding requirements for these bids would need to be considered as part of the capital bidding process for MTFP(12).

## Recommendation(s)

26 Cabinet is recommended to:

- (a) agree draft outline approach for the Levelling Up submission for Round One and support a first round submission for investment across South West Durham within the identified Bishop Auckland Constituency;
- (b) agree the total scheme costs estimated at £30.93 million and a LUF ask of the maximum of £20 million towards the cost of the proposed scheme;
- (c) agree to fund an additional £4.78 million of capital investment from Council capital contingencies to meet the funding gap that exists with regards to these proposals;
- (d) note that additional capacity funds will be required alongside the £125,000 received from Government to develop robust Green Book Business Cases for Future Rounds that will meet LUF requirements. This funding is committed to support the development of business cases across the County and will be funded from a £1 million earmarked reserve established at year end 2020/21;
- (e) delegate authority to the Corporate Director for Regeneration, Economy and Growth and Corporate Director of Resources, in consultation with the Cabinet Portfolio Holder for Economy and Partnerships and the Cabinet Portfolio Holder for Resources Investments and Assets and Deputy Leader and Cabinet Portfolio Holder for Finance to take all such decisions necessary to progress and finalise Levelling Up proposals for Round One;
- (f) note that further reports will be presented to Cabinet in the Autumn on the further bidding phases, which will seek ambitious Levelling Up proposals for the remaining five Parliamentary constituencies;
- (g) to agree that the overall commitment of the Council is to bid for and secure an ambitious programme across all parliamentary constituencies in the county from this fund and to seek to maximise funding with strong proposals for every eligible area in future bidding rounds;
- (h) to note that the match funding requirements for future bids will need to form part of the capital bidding process for MTFP(12).

## Background

- 27 In the 2021 Budget, the Chancellor announced details of the new LUF to provide investment in regeneration and growth in places with low productivity and connectivity. The LUF will supersede existing local growth funding streams such as Local Growth Fund, Pinch Points Fund and future rounds of Towns Fund. County Durham is identified as one of the areas of greatest need in the UK (a Tier 1 area) and this should illustrate a priority for funding. The deadline for submitting proposals for 2021/22 funding awards is 18 June 2021, and priority will be given to projects that can deliver spend on the ground prior to March 2022. There will be future opportunities to bid in subsequent rounds for delivery up to 31 March 2024, or exceptionally into 2024/25 for larger schemes. More details on this are anticipated within the Autumn Statement, with further guidance on future bidding rounds will be set out in the Government's Levelling Up White Paper, which is expected in Autumn 2021.
- 28 The fund for England is £4 billion in total, with £600 million made available for Round One bids. There can be one bid submitted for each parliamentary constituency within the local authority in the bidding round, with up to £20 million or exceptionally, up to £50 million available for major transport schemes. Local authorities can only have one successful bid for each of their parliamentary constituencies over the lifecycle of the LUF. There are three main priority areas outlined for the scheme investments:
- (a) **Transport** - public transport, active travel, bridge repairs, bus priority lanes, local road improvements, major structural maintenance, and accessibility improvements;
  - (b) **Regeneration and town centre** - upgrade eyesore buildings and dated infrastructure, acquire and regenerate brownfield sites, invest in secure community infrastructure and crime reduction, and bring public services and safe community spaces into town and city centres; and
  - (c) **Cultural** - regenerating, or creatively repurposing museums, galleries, visitor attractions (and associated green spaces) and heritage assets as well as creating new community-owned spaces to support the arts and serve as cultural spaces.
- 29 The bids need to be backed by local MPs, supported by local stakeholders, target pockets of deprivation and contribute to net zero carbon output. Local authorities, as Responsible Bodies have received £125,000 capacity funding to help support the development of business

cases and future bids. This funding is not sufficient to cover the anticipated costs of developing bids to the required standard in Durham.

## **Developing a Levelling Up Pipeline**

- 30 A desk top review of potential projects and schemes that could be considered for a LUF bid has been undertaken, taking into account known priorities across the county in line with parliamentary constituency areas and the funding criteria to determine strategic fit and deliverability position of potential proposals to assess the best opportunity to try and secure Levelling Up funding.
- 31 The potential projects that meet the criteria are at varying development stages from initial scoping to outline business case. In order to develop LUF proposals consideration of development position, sequencing within constituencies, demonstrable economic impact and best fit with LUF criteria needs to be considered.
- 32 Substantial master planning will be required for all proposals, where community and business engagement is a key priority. The Council will also be seeking a range of appropriate investments across County Durham to support transport connectivity, culture, heritage and regeneration in the city, town centres and villages. Schemes put forward will be based on the needs of each community.

## **Round One: Pipeline Shortlist**

- 33 It is important to consider the right bids in the right places and at the right time to give them the best chance of success and to deliver local levelling up priorities. Government has strongly guided against submitting bids that are not substantially developed or rushing proposals. Whilst not specifically exempted, the expectation from Government is that schemes that are not successful are not resubmitted in later bidding rounds unless the specific shortfalls that were identified in the consideration of that bid (reasons for failing to secure the LUF award) are fully addressed.
- 34 Within the time constraints set by the Round One funding process and the need to submit robust and quality bids, it is considered that only one funding bid will be ready for the deadline of 18 June 2021. This submission meets gateway criteria and has demonstrable and quantifiable benefits that address the socio-economic needs, transport barriers and cultural ambitions within its locality. A summary of the Bishop Auckland Parliamentary Constituency area bid, which focuses on Rural Connectivity and a Cultural Programme and benefits are outlined within the table below:

**South West County Durham (Bishop Auckland Constituency) - Rural Connectivity and Cultural Programme**

RCCP Schemes	Levelling Up Ask	Need	Benefits
Reopening of Whorlton Bridge to vehicular traffic and non-motorised users	£20m	Quality of life impacted by current A68 route in Toft Hill including high volumes of traffic and disproportionate percentage of HGVs.	Improved connectivity for rural communities to access employment and education opportunities, including via active mode measures.
Realignment of A68 to bypass Toft Hill		High level of road user accidents.  Severed vehicular and active mode routes in rural communities, including closed Whorlton Bridge.	Quality of life improvements for local communities.  Air quality improvements contributing to net zero carbon output targets
Enhancement for Locomotion in Shildon including parking, structural restoration, public Realm and Walking/cycling route improvements.		Need to improve active mode routes to employment and education.  Promote and maintain transport heritage assets in the area, acting as a catalyst to drive forward heritage led regeneration	Enhanced visitor offer and heritage transport assets  Increased GVA, visitors and visitor spend, aligning with other tourism strategies in the constituency

35 The total forecast cost of the three investments is £30.93 million, based on preliminary design and bill of quantities inclusive of 15 percent quantified risk assessment value (consistent with project development stage). There is an existing £2.25 million match funding available to

Locomotion through the Science Museum Group and £3.9 million across the existing capital programme.

- 36 The proposal currently presents a funding gap of £4.78 million. In the LUF guidance, the Government suggests that a minimum of 10 percent match funding is recommended in support of the bid but this is not articulated as a mandatory requirement. This requirement is already achieved. Whilst the schemes outlined are already priorities for the Council with local stakeholder support, a further £4.78 million match funding is required to secure a full funding package, which can be accommodated from the capital contingencies. The table below outlines the funding profile and match funding requirements:

### Rural Connectivity and Cultural Programme Funding Profile

RCCP Scheme	DCC	Science Museum Group	Levelling Up	Total
Whorlton Bridge	£1.25m* (38%)	-	£2m (62%)	£3.25m
Toft Hill Bypass	£1.2m (10%)	-	£10.8m (90%)	£12m
Enhancement for Locomotion in Shildon including parking, structural restoration, public Realm and Walking/cycling route improvements	£2.65m* (17%) £3.58m (23%)	£2.25m* (14%)	£7.2m (46%)	£15.683m
<b>Total</b>	<b>£8.68m (28%)</b>	<b>£2.25m (7%)</b>	<b>£20m (65%)</b>	<b>£30.93m</b>

\* existing secured match funding

- 37 As part of the development of transport capacity improvement proposals, stakeholder and community consultation has taken place to consider local priorities, needs and potential improvements. The submission addresses socio-economic needs, transport barriers and cultural ambitions within the locality in line with the national levelling up agenda to boost growth.
- 38 Final costings and economic impact assessments are being refined as part of the business case development process ahead of the LUF submission deadline. In order to meet the tight delivery timescales and spend requirements within 2021/22, additional development costs will

be incurred at risk to secure planning, acquire land and procure delivery arrangements in advance of notification of whether the bid has been successful.

- 39 Following the submission of the bid, further consultation will be undertaken to embed proposals and to outline the next development phases. The Council does not own all of the land necessary to deliver the proposed project. Discussions with landowners are underway, however further negotiation is required. Anticipated costs and risks to deliver the Toft Hill Bypass scheme have been built into estimated project costs. These next project development stages prior to funding announcements are paramount in order to commence delivery prior to March 2022.

### **LUF Future Rounds**

- 40 The Government has announced that a Levelling Up White Paper is expected in the Autumn 2021. This is anticipated to detail further criteria in relation to future LUF rounds and wider expectations around a package of measures to level up opportunity across all parts of the UK through policy approaches, specific funds and interventions including Growth Deals, Freeports and UK Shared Prosperity.
- 41 It is proposed that the remaining potential shortlist priorities for the other five parliamentary constituencies are refined and developed for future rounds, with business cases being developed appropriately to ensure that the remaining five parliamentary constituencies have robust proposals for submission.
- 42 It must be recognised that potential proposals are at varying development stages and will require significant resourcing and support to be sufficiently developed to meet funding requirements for Rounds Two and Three. These proposals will be developed with stakeholders to tackle local priorities whilst being mindful of the funding criteria and the need to demonstrate quantifiable benefits that tackle economic needs and support the levelling up agenda.
- 43 Whilst the Council has received £125,000 capacity funding to support the development of future bids, it is expected that the development costs of a full programme of levelling up proposals will be substantially higher overall. An earmarked reserve of £1 million has been created to accommodate the estimated cost of developing robust bids for future bidding rounds.
- 44 Proposals will have due regard to existing strategies and plans as well as identified priorities by local Members and Members of Parliament. All proposals will be developed with communities wherever possible and

there will be focused work on master planning development, where community and business engagement will be a core focus.

- 45 The Council will work alongside its regional partners to explore and develop potential cross boundary transport proposals that could see an LUF investment ask of up to £50 million that would deliver benefit for residents and businesses within the county. This funding ask will be in addition to the five further constituency bids of up to £20 million (plus match funding).
- 46 Match funding requirements for future bids will need to form part of the capital bidding process for MTFP(12).

### **Next Steps**

- 47 The next steps are to finalise the South West Durham (Bishop Auckland Constituency) bid, undertake briefings with local councillors, local stakeholders, business representatives and further engagement with MPs to ensure the best possible case for the proposal is submitted ready for the Round One LUF funding deadline on 18 June 2021.
- 48 This report seeks delegated authority for the Corporate Director of Regeneration, Economy and Growth and Corporate Director of Resources, in consultation with the Cabinet Portfolio Holder for Economy and Partnerships and the Cabinet Portfolio Holder for Resources, Investments and Assets and Deputy Leader and Cabinet Portfolio Holder for Finance to take all such decisions necessary to progress and finalise the Levelling Up proposal for Round One in advance of the 18 June 2021 submission deadline.

### **Background papers**

- [www.gov.uk/government/publications/levelling-up-fund-prospectus](http://www.gov.uk/government/publications/levelling-up-fund-prospectus)  
<https://www.gov.uk/government/publications/levelling-up-fund-additional-documents>

### **Other useful documents**

- Levelling Up Prospectus and Technical Note
- Levelling Up Funding Application Forms

### **Authors**

Heather Orton	Tel: 03000 264715
Craig MacLennan	Tel: 03000 267103
Ray Brewis	Tel: 03000 264708

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## **Appendix 1: Implications**

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### **Legal Implications**

Specialist advice about the potential State Aid/Subsidy Control implications will be sought as required for individual Levelling Up proposals. Whilst the UK Government has not yet formalised the new Subsidy Control regime following Brexit, specialist advice is likely if proposals are working alongside private sector partners and is not providing open access infrastructure for the benefit of the public.

Durham County Council does not own all the land associated with potential LUF project proposals. Consideration for land acquisitions and/or development arrangements to work alongside partners will be considered as part of each specific project proposals. For the Round One submission, land ownership and acquisition will need to be considered, along with associated costs and risks to deliver desired ambition associated with the specific scheme of Toft Hill Bypass.

If negotiations to acquire land by agreement are unsuccessful then acquisition of land would need to be through Compulsory Purchase Powers.

### **Finance**

The business case development process, economic modelling and financial assessment is being undertaken to ensure a robust approach to detailed costings and justifying the benefit cost ratio for the scheme proposals. Round One proposals need to commence capital costs in 2021/22 in order to meet gateway criteria and achieve financial completion by March 2024.

The total project costs for the Bishop Auckland Constituency RCCP proposal is £30.93 million, inclusive of 15 percent quantified risk assessment value (consistent with project development stage) with £20 million sought through LUF and £10.93 million as match funding.

There is an existing £2.25 million match funding available to the Locomotion project through the Science Museum Group and £3.9 million is available through the existing capital programme, leaving a funding gap of £4.78 million to be bridged. The additional match funding can be accommodated but largely exhausts available capital contingencies in the current programme.

The match funding secured and proposed against this bid comfortably exceeds the 10 percent recommended (but not mandated) match funding criteria set out in the LUF guidance.

If the LUF grant is awarded, any overspend on the projects contained in this programme would have to be underwritten by the Council in line with other Government funded programmes. This represents a risk to the Council.

Whilst the Council has received £125,000 capacity funding to support the development of future bids, it is expected that the development costs of a full programme of Levelling Up proposals will be substantially higher overall. An earmarked reserve of £1 million has been created to accommodate the estimated cost of developing robust bids for future bidding rounds.

Match funding requirements for future bids will need to form part of the capital bidding process for MTFP(12).

## **Consultation**

As part of the Levelling Up Fund criteria all proposals must undergo effective consultation with the local community and stakeholders.

As part of the development of transport capacity improvement proposals including Whorlton Bridge improvement proposals and Toft Hill Bypass proposals, community consultation has taken place to consider local priorities, needs and potential improvements. Much support has also been gained for the Stockton to Darlington proposals from a variety of groups.

Stakeholder consultation has taken place through the Rail Heritage Board and Heritage Action Zone stakeholder groups to consider potential improvements and enhanced visitor experiences. This is supporting preparations for the Bicentenary celebrations of the Stockton & Darlington Railway in 2025. Additional public engagement is planned for July 2021 to showcase development ambitions for the Locomotion Museum.

## **Equality and Diversity / Public Sector Equality Duty**

The Council is committed to improving the quality of life for all. The Council will consider its Public Sector Equality Duty and how it is discharged on a proposal and project by project basis.

All design and works included will adhere to design standards and national policies for construction and highways. Consultation on proposals will seek to engage and represent a broad spectrum of stakeholders and the community.

## **Climate Change**

The Levelling Up Fund criteria prioritises the need to contribute towards net zero carbon output. All proposals will consider a quality built environment and seek to use clean technologies and approaches that minimise carbon emissions, encourage active travel and the reduction of non motorised vehicles.

## **Human Rights**

All tenants, land owners and existing site occupier rights will be considered in line with existing licence agreements, with appropriate consultation and notice periods provided as stipulated for each individual agreement/licence.

## **Crime and Disorder**

No issues have been raised to date. During the master planning stages associated with project development proposals and business case development, appropriate consultation and crime and disorder risks will be considered and designed out or mitigated in conjunction with Durham Constabulary where possible.

## **Staffing**

Project development and management resources will be provided by the Regeneration, Economy and Growth Service Grouping where possible. Associated design and management costs will be built into proposals where feasible and additional external expertise will be sought as needed to support settlement masterplans, economic modelling, specialist surveys and assessment to support both the development and delivery of proposals.

## **Accommodation**

None.

## **Risk**

A detailed project risk register will be developed for each individual Levelling Up proposal and is integral to each business case developed.

The main risks to consider for the Levelling Up approach and pipeline development are:

- (a) Financial risk to the Council if projects were to incur cost overruns. Estimates have been developed with all add on costs, including inflation and 15 percent quantified risk assessment value (consistent with project development stage) based on preliminary design and bill of quantities.
- (b) Potential delays and increased costs for Compulsory Purchase Orders for Toft Hill Bypass improvements, although the programme allows for this and discussions are already underway with the land owners.
- (c) Reputational risk should any LUF bid that is submitted be unsuccessful.
- (d) Reputational risk due to timing of submission of bids for individual areas linked to varying degrees of readiness to meet LUF bidding criteria and

capacity issues to develop bids to sufficient standards within the timescales laid out in the guidance.

- (e) The bid will amend existing rights of way which require authorisation and consents.

## **Procurement**

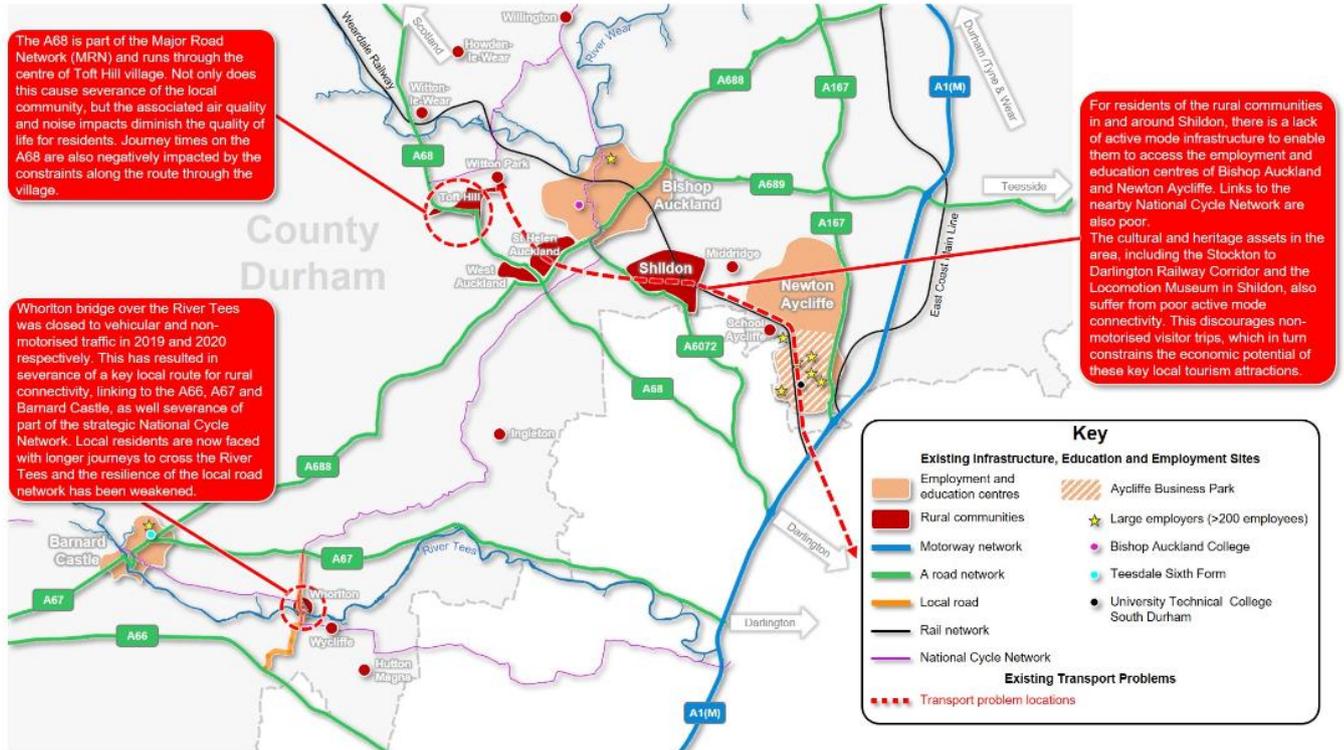
Design and delivery will be procured through either internal Council teams or established frameworks, aligned to funding timeframes and funding criteria.

## Appendix 2: Headline Levelling Up Funding Criteria

Criteria	Levelling-Up Fund
<b>Timescales</b>	Delivery to 31 March 2024. Exceptionally into 2024/25 for larger schemes
<b>Funding</b>	£4.8bn (£4bn for England)
<b>Size of bids</b>	Up to £20m. Transport projects can be above £20m and up to £50m Each local authority can submit proposal up to the number of MPs in the LA area.
<b>Bidding process</b>	Competitive; projects or packages. £125k capacity funding per area. LAs can only have one successful bid for each of their allocated number of bids over the lifecycle of the Fund
<b>Bid deadline</b>	<b>18 June 2021</b> (successful bids announced in Autumn 2021)
<b>Themes</b>	<ul style="list-style-type: none"> <li>• Local transport projects</li> <li>• Town centres / high streets</li> <li>• Cultural &amp; heritage assets</li> </ul>
<b>Assessment criteria</b>	<ul style="list-style-type: none"> <li>• Need (recovery, growth, connectivity, regeneration)</li> <li>• Deliverability</li> <li>• Strategic fit</li> <li>• Value for money</li> <li>• Leverage; at least 10% of costs</li> </ul>
<b>Lead department</b>	HM Treasury
<b>Responsible bodies</b>	Local authorities
<b>County Durham status</b>	Category 1 (highest need) of 3
<b>Spatial focus</b>	UK-wide

Criteria	Levelling-Up Fund
<b>Additional criteria</b>	<ul style="list-style-type: none"> <li>• For first round priority will be given to delivery on ground in 2021-22.</li> <li>• Government expects bids to be backed by local MPs.</li> <li>• Government encourages local authorities to submit joint projects</li> <li>• Bids needs to be supported by local stakeholders</li> <li>• Bids should target pockets of deprivation</li> <li>• Bids should contribute to net zero</li> </ul>
<b>More details</b>	<a href="https://www.gov.uk/government/publications/levelling-up-fund-prospectus">www.gov.uk/government/publications/levelling-up-fund-prospectus</a>

## Appendix 3: Bishop Auckland Constituency – Rural Connectivity and Cultural Programme Location Plan



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**Cabinet**

**16 June 2021**

**COVID-19 Commissioning of Designated Settings**



**Ordinary Decision**

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## **Report of Corporate Management Team**

**Jane Robinson, Corporate Director of Adult and Health Services**

**Councillor Paul Sexton, Cabinet Portfolio Holder for Adult and Health Services**

### **Electoral division(s) affected:**

Countywide

### **Purpose of the Report**

- 1 To update Cabinet on the commissioning of Designated Settings during the Covid-19 pandemic following the Government requirement for the Council, along with all Local Authorities (LA), to commission Designated Settings within care homes to provide a safe alternative for people who are temporarily unable to return to their usual place of residence due to their covid status.
- 2 To outline a delegated decision taken by the Corporate Director of Adult and Health Services (AHS), to commission such beds given the urgent timescales required by the pandemic and Government direction.

### **Executive Summary**

- 3 The report outlines updated Government guidance on hospital discharge during the covid pandemic and the requirement to commission unitised Designated Settings beds with dedicated staffing to support people who are unable to return to their usual place of residence due to COVID-19 positive status.
- 4 The report sets out the commissioning approach across County Durham and the instances when people may need to access this provision. Designated Setting Beds were jointly commissioned with County

Durham CCG (CDCCG). The units have dedicated staffing, entrances, and exits that can temporarily support people who are COVID positive.

- 5 Specific hospital discharge funding allocated to CDCCG covers the costs of the beds. The report describes how the requirement for beds may need to flex over time and how contracts have been developed to ensure that the number of beds commissioned can change in line with need.

## **Recommendation(s)**

- 6 Cabinet is recommended to note the delegated decision dated 17 November 2020 taken by the Corporate Director for Adult and Health Services in consultation with the Portfolio Holder for Adult and Health Services, in accordance with the Officer Scheme of Delegation, Part 3, Table 1, paragraph 12 of the Constitution.

## **Background**

- 7 On 13 March 2020, initial guidance from Public Health England (PHE) encouraged residential care homes to review their visiting policy, asking people not to visit if they were unwell and emphasising hygiene measures.
- 8 On 17 March 2020, NHS England and Improvement instructed trusts to urgently discharge all medically fit patients from hospital as soon as it was clinically safe to do so. This rapid implementation of the 'discharge to assess' model aimed to free up 15,000 acute beds by 27 March 2020 and maintain this model thereafter, so that hospitals would have capacity to care for the anticipated influx of patients who were seriously ill with COVID-19.
- 9 County Durham residents predominantly receive acute care at University Hospital of North Durham, Darlington Memorial Hospital, University Hospital Hartlepool, University Hospital North Tees Sunderland Royal Hospital and Gateshead Hospital.
- 10 Acute providers put processes in place during the pandemic to ensure that patients were tested, and results known / shared with care homes where applicable prior to discharge from hospital. This is an NHS responsibility.
- 11 Some community hospital sites have appropriate configuration to support isolation. In some community hospitals, additional wards were opened to provide cohorted provision, however there were significant challenges in staffing additional wards.
- 12 It is recognised best practice that patients who are medically fit do not remain in hospital for longer than is necessary due to the well

evidenced detrimental impact this can have on their health and recovery. It is therefore important that there are contingencies in place to ensure that patients can be discharged to the most appropriate setting for their needs although this may be on a temporary basis, until they can return to their usual place of residence (which may be a care home).

## **Designated Settings**

- 13 The Department of Health and Social Care (DHSC) published national Designated Settings guidance in the week commencing 12<sup>th</sup> October 2020 as a response to concerns about the risks of infection in care homes from COVID positive discharges. All LA's were asked to identify / commission designated settings for hospital discharge of COVID-19 positive patients as soon as possible.
- 14 Commissioners in AHS worked quickly to understand the Designated Setting guidelines and the implications locally in County Durham.
- 15 A series of conditions were attached to designated settings to promote effective infection control, in particular the need to have a dedicated entrance / exit in place, separate staff team and arrangements for separate laundry facilities etc. In effect, Designated Settings units are designed to be completely separate from the existing care home therefore ensuring mitigation of infection control risks.
- 16 The Care Quality Commission (CQC) was given the responsibility to inspect and authorise use of designated settings.
- 17 AHS commissioning carried out an Expressions of Interest exercise with first nursing care, then residential care providers in October and early November 2020. It was recognised that given the detailed requirements specified by DHSC, in order to incentivise the market a block booking arrangement was required to allow providers to make the investment needed to bring unitised spaces into use.
- 18 Two expressions of interest were received from care home providers. One for nursing care (Parklands, Seaham – 13 beds) and one for residential care (Abbotts Court, Wingate – 12 beds). Funding was agreed through CDCCG utilising specified hospital discharge funding provided to assist with the pandemic response.
- 19 Negotiations with providers were successful and the Corporate Director of Adult and Health Services agreed a Delegated Decision to enable services to be made operational as a matter of urgency, given the Government requirement to commission the beds as soon as possible.

Procurement rules allow for a variation to be made to existing contracts and arrangements were therefore made in respect of the two homes.

- 20 Block bed fee rates were agreed using the precedent set through the established commissioning model for block beds already in place for intermediate care as a starting position. Increased rates were required to cover additional staffing costs required in Designated Settings and to reflect that Parklands agreed to remove from use 3 bedrooms to allow for the unit to meet the required standards for separate services, i.e. staff changing spaces, cleaning, and hygiene stations etc. Costs are in line with other LA agreements regionally and nationally.
- 21 Both Designated Settings passed the required CQC inspections in November 2020 and were able to start receiving patients discharged from hospital quickly. This ensured that the Council were compliant with the DHSC requirement to ensure infection control risks were mitigated. All individuals in Durham requiring a designated setting placement since the care home beds were commissioned have been able to access one.
- 22 Pathways have been developed to aid patient / service user flow, particularly in terms of moving people from designated setting beds who require a further or long-term care home placement.
- 23 The majority of care homes are now confident and competent in appropriately managing patients with COVID-19 thanks to a robust program of training and support in infection prevention and control which is ongoing. Additional controls have also been put in place:
  - All patients are COVID-19 tested prior to moves from a designated setting to another care home
  - There is clear guidance on managing new admissions in a non-designated care home, and all patients are isolated for two weeks regardless of test results
  - Care home staff / residents are subject to regular testing in line with national guidance
  - Multi-disciplinary meetings are held with providers and partners across the health & social care system to ensure safe care

## **Current Position**

- 24 Occupancy and patient flow have continued to be monitored on an ongoing basis. During recent weeks, the number of individuals requiring a Designated Setting bed has diminished, mirroring the general declining trend in COVID-19 infections.
- 25 Consequently, a decision was taken to decommission the beds at Abbots Court in early April 2021. The nursing beds at Parklands are

currently retained to ensure that the Council / CDCCG remain compliant with the national guidance, though the position is kept under review.

- 26 A short timescale for giving notice to end block arrangements has been built into the commissioning model (14 days). This ensures flexibility in terms of the service and allows commissioners to react quickly to changes in demand.

## **Conclusion**

- 27 The COVID-19 pandemic has resulted in a number of significant challenges across the health and social care system. The measures outlined to commission Designated Setting beds in Durham, together with the full range of additional support arrangements that the Council and CCG have put in place have and continue to support delivery of safe and sustainable care.
- 28 It was critical that DCC was able to quickly support the national requirement to provide alternative placements for residents that cannot safely return to their usual care home. The Corporate Director of Adult and Health Services agreed a delegated decision to commission urgent block purchase care home Designated Setting beds jointly with CDCCG for this purpose.

## **Background papers**

- None

## **Other useful documents**

- None

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**Contact:** Neil Jarvis – Senior Portfolio Lead,  
Integrated Commissioning

Tel: 03000 265683

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## **Appendix 1: Implications**

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### **Legal Implications**

Under the Council's Constitution, Chief Officers are authorised to take urgent action where it is impracticable to obtain authorisation from the Council body with responsibility for the function (in this case the Cabinet) provided that such action is within legal powers and is necessary in the interests of the Council. Such action must be reported for information to the next convenient meeting of the relevant Council body.

### **Finance**

County Durham CCG is able to meet Designated Setting costs through specific funding provided to assist with efficient hospital discharge.

### **Consultation**

All existing residents / family members in care homes with a designated setting attached were informed of plans by providers, before opening of the specified beds.

### **Equality and Diversity / Public Sector Equality Duty**

Considered under arrangements for individual placements.

### **Climate change**

Not applicable.

### **Human Rights**

Considered under arrangements for individual placements.

### **Crime and Disorder**

Not applicable.

### **Staffing**

Providers that agreed to set up designated settings identified dedicated staffing for these units. This was essential to meeting the national DHSC criteria.

### **Accommodation**

As outlined in the body of the report

### **Risk**

There are a number of risks in relation to designated settings and delivery of safe and sustainable care during the pandemic. The approach set out is designed to support delivery of safe care in accordance with national Government policy.

## **Procurement**

An appropriate procurement approach was utilised to ensure that providers were selected for delivery of the unitised designated settings beds based on their ability to meet a range of criteria designed to deliver care in line with the latest Government requirements. DCC procurement regulations were complied with in full.

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**Cabinet**

**16 June 2021**

**Safe Durham Partnership Plan 2021-25**

**Ordinary Decision**



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**Report of Corporate Management Team**

**Alan Patrickson, Corporate Director of Neighbourhoods and Climate Change**

**Councillor John Shuttleworth, Cabinet Portfolio for Rural Communities and Highways**

**Electoral divisions affected:**

Countywide

**Purpose of the Report**

- 1 The purpose of this report is to present Cabinet with the Safe Durham Partnership Plan (SDPP) 2021-25 for endorsement, prior to final sign off by full Council. The plan is attached as Appendix 2.

**Executive summary**

- 2 Section 6 of the Crime and Disorder Act 1998 requires the responsible authorities (commonly referred to collectively as a Community Safety Partnership (CSP)) in a local government area to work together in formulating and implementing strategies to tackle local crime and disorder in the area. In County Durham this is the Safe Durham Partnership.
- 3 The 2007 Regulations set out the way in which the responsible authorities should carry out their functions as a CSP under Section 6 of the Act, and require the preparation of:
  - (a) a partnership plan for the local government area, setting out the CSP's priorities.
  - (b) a county level community safety agreement, setting out the ways the responsible authorities in the county might work more effectively to implement the identified priorities by joint working.

- 4 The SDPP 2021-25 has been aligned to the Durham Police, Crime and Victims Plan and the Cleveland and Durham Local Criminal Justice Partnership Plan.
- 5 Covid-19 has had a huge impact on how Durham County Council and its partners deliver services, especially health and social care services to ensure those who need to access vital services still receive them, whilst also supporting providers who run essential services. Many of the actions in the current strategy have supported our approach in these unprecedented times.
- 6 This SDPP 2021-25 also considers the impact Covid-19 has on our partners, communities and services and any Covid-19 related actions are included.
- 7 A range of consultation has been undertaken on the plan, details of which are provided in Appendix 3. The consultation feedback has been used to inform the SDPP 2021-25.
- 8 An Equality Impact Assessment (EIA) has been undertaken as part of the process for developing the SDPP, which is attached as Appendix 4.
- 9 The SDPP 2021-25 was agreed by the Safe Durham Partnership at its meeting on the 12 March 2021.

### **Recommendation**

- 10 Cabinet is recommended to:
  - (a) note the Safe Durham Partnership Plan 2021-25; and
  - (b) recommend the Safe Durham Partnership Plan for approval by Council.

## **Background**

- 11 The Safe Durham Partnership agreed the SDPP 2020-25 in March 2020, to provide a holding position for a year whilst further work was undertaken to ensure the Strategy takes account of the County Durham Vision 2035 and Covid-19.
- 12 The SDPP 2021-25 has been further aligned to the County Durham Vision 2035, which was written together with partner organisations and the public and sets out what we would want the county to look like in 15 years' time. This vision is structured around three ambitions which are:
  - (a) More and better jobs;
  - (b) People live long and independent lives;
  - (c) Connected communities.
- 13 The SDPP 2021-25 will take forward aspects of the vision that are focussed on community safety in County Durham and will contribute to other areas, working in partnership with other strategic partnership boards. For example:
  - (a) Future free from harm due to drug and alcohol misuse;
  - (b) Tackle crime and anti-social behaviour;
  - (c) Address the underlying causes of crime and community tensions.
- 14 In response to the coronavirus pandemic, a County Durham Covid-19 Health Impact Assessment was undertaken which took account of the impact of the first lockdown, which was supported by detailed forecasting and modelling work. This has given a helpful, system-wide picture of the potential impact of the pandemic on County Durham residents over the next four years and has been considered in the development of the SDPP 2021-25.

## **SDPP Consultation**

- 15 Consultation took place between 22 January 2021 and 21 February 2021 on the SDPP, which included public consultation via the Durham County Council website. Details of this consultation can be found in Appendix 3.
- 16 Partners were invited to take part in the consultation, including Safe Durham Partnership Partners, Area Action Partnerships, Town and Parish Councils, Durham Community Action, Better Together Forum,

VCS organisations, Armed Forces & Veterans Forum, Age UK, Young and Adult Carers, Patient Reference Groups, Poverty Action Steering Group, The People's Parliament, Disability Partnership, and County Durham Youth Council.

- 17 The Safer and Stronger Communities Overview and Scrutiny Committee noted the content of the plan at their meeting on 1 March 2021. Details of their comments can be found in Appendix 3.

### **Safe Durham Partnership Plan vision and strategic priorities**

- 18 The vision for the Safe Durham Partnership is agreed as ***'A county where every adult and child will feel and be safe'***

- 19 The strategic priorities for the SDPP 2021-25 are:

- (a) **Strategic priority 1: Promote being safe and feeling safe in your community by focusing on the following priorities:**

- Anti-social Behaviour
- Arson and Deliberate Fires
- Safer Homes
- Road Safety
- Hate Crime and Community Tensions

96% of respondents to the public consultation strongly agreed/agreed this should be a priority.

- (b) **Strategic priority 2: Support victims and protect vulnerable people from harm by focusing on the following priorities:**

- Domestic Abuse and Sexual Violence
- Organised Crime; County Lines
- Victims

100% of respondents to the public consultation agreed this should be a priority.

- (c) **Strategic priority 3: Prevent Strategy: Countering Terrorism, Radicalisation and Violent Extremism by focusing on the following priorities:**

- Prevent people being drawn into terrorism
- Support the work to strengthen our protection against terrorist attacks and mitigate the impact of such an attack

93% of respondents to the public consultation strongly agreed/agreed this should be a priority.

(d) **Strategic priority 4: Reduce Reoffending by focusing on the following priorities:**

- Prevent offending and inter-generational offending
- Prevent re-offending

81% of respondents to the public consultation strongly agreed/agreed this should be a priority.

(e) **Strategic priority 5: Alcohol and Substance misuse reduction by focusing on the following priorities:**

- Prevention and early intervention
- Providing specialist interventions to promote recovery
- Protecting children and vulnerable adults at risk
- Strengthening leadership, management and governance

85% of respondents to the public consultation strongly agreed/agreed this should be a priority.

(f) **Strategic priority 6: Tackle and prevent cyber enabled crime by focusing on the following priorities:**

- Raise awareness of the general population about staying safe online
- Reduce risk to the most vulnerable groups
- Build resilience of local businesses of the threat of cyber crime

83% of respondents to the public consultation strongly agreed/agreed this should be a priority.

## **Core Deliverables**

- 20 The SDPP includes a number of core deliverables that identify the key areas of work which the Safe Durham Partnership will focus on, linked to the priorities.

## **Equality Impact Assessment**

- 21 An Equality Impact Assessment (EIA) has been undertaken alongside the development of the strategy which is attached at Appendix 4.

## **Accessibility**

- 22 New legislation dictates how we can present information, to ensure it is accessible to all. As a consequence, the new version of the SDPP is in plain text format and does not contain infographics, tables and diagrams.

## **Conclusion**

- 23 The development of the Safe Durham Partnership Plan has been led by the Safe Durham Partnership, supported by a multi-agency working group. The plan has been informed by the Strategic Needs Assessment which provides the evidence base on which the priorities have been developed.
- 24 Consultation feedback has been used to inform the SDPP 2021-25.
- 25 The SDPP is aligned to the Durham Police, Crime and Victims Plan and the Cleveland and Durham Local Criminal Justice Partnership Plan.
- 26 The SDPP is also aligned to the County Durham Vision 2035 and will be the delivery mechanism for some of the objectives which support the overall ambitions.

## **Background papers**

- None

## **Author**

Gordon Elliott

Tel: 03000 263605

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## **Appendix 1: Implications**

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### **Legal Implications**

The Crime and Disorder Act 1998 requires Community Safety Partnerships (CSPs) to prepare a partnership plan, setting out the CSP's priorities.

### **Finance**

Ongoing pressure on the public services will challenge all agencies to consider how best to ensure effective services are delivered in the most efficient way. Action plans will be developed to support the delivery of the Partnership Plan.

### **Consultation**

Details of consultation are provided in the report.

### **Equality and Diversity / Public Sector Equality Duty**

A full Equality Impact Assessment has been carried out alongside the SDPP.

### **Climate Change**

There are no climate change implications.

### **Human Rights**

There are no adverse implications.

### **Crime and Disorder**

Crime and disorder is the main focus of the report under the Safe Durham Partnership.

### **Staffing**

There are no staffing implications.

### **Accommodation**

There are no accommodation implications.

### **Risk**

There are no risk implications.

## **Procurement**

Commissioners will take account of the SDPP when procuring services aligned to community safety.

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## **Appendix 2: Safe Durham Partnership Plan 2021 - 25**

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Attached as a separate document.

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## **Appendix 3: Safe Durham Partnership Plan Consultation Overview**

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Attached as a separate document.

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## **Appendix 4: Safe Durham Partnership Plan 2021-25 Equality Impact Assessment**

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Attached as a separate document.

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# Safe Durham Partnership Plan 2021 - 2025



**Better for everyone**

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## Foreword

Welcome to the Safe Durham Partnership Plan (SDPP) 2021-2025. We must acknowledge the global coronavirus pandemic, Covid-19 has impacted on all services across the County from early 2020. As promised, this year on refresh will take this into account to ensure we continue to deliver services and utilise resources effectively to make Durham a safer place to live, work and visit.

The Safe Durham Partnership was formed in 2009 and over the last twelve years we have had significant success in tackling crime and disorder through the underlying principles of working together.

The partnership has shared challenges and best practice regarding the issues faced with working in a Covid-19 environment. From this there are a number of cross cutting themes which supported the work of the Safe Durham Partnership:

- The importance of good communication and how this helps identify need, allocate resources, re-assure the public and improve the morale of staff.
- New ways of working have been developed that have not only helped deliver services in a different way during the pandemic but have shown better and more efficient and better ways of working that can be carried forward as best practice for the future.
- There have been some great examples of partnerships coming together to deliver the support needed in the community. It's essential we continue to do this to ensure we are ready to respond effectively in these uncertain times.
- We all have a responsibility to make sure that we continue to identify and support those who need extra help, support and advice over this period.

Over the last year we have had numerous successes, including:

- The Safer Streets Initiative, which supports victims of domestic burglary in one of our worst hit areas. Offering crime prevention advice and target hardening for them and the surrounding properties in order to prevent further incidents in the area.
- Moving training and awareness sessions for Prevent: Counter Terrorism onto an online platform in order to ensure staff are aware of how to protect and safeguard our children and most vulnerable from the risks of extremism and radicalisation.
- Using new technologies to ensure victims can still ensure their voice is heard by the courts whilst protecting them from the risks of Covid-19.
- During the Covid-19 pandemic, a Domestic Abuse Communications Plan has been developed working collectively with specialist provider, Harbour Support Services, in a multi-agency approach to supporting vulnerable families during lockdown.
- Pharmacies that are commissioned by the council to deliver pharmaceutical services for opioid drug users are to begin supplying naloxone from September 2020 to individuals currently, or with a history of, using opioids or carers, family members, or friends liable to be on hand in case of overdose.
- 
- A partnership approach has been used to manage COVID positive unplanned prison releases. A new process for housing the COVID positive individuals has been instigated by the prisons, Housing Solutions, police, Public Health

and Humankind. This process ensures ex-prisoners are given overnight support until they can be transported in a COVID secure environment back to their area of residence. This helps to reduce community transmission in County Durham.

- The Drug and Alcohol Recovery Service have maintained full service delivery during COVID using a blended approach of on-line support and COVID secure interventions for those with complex needs. There was no significant drop in service user retention for opiate clients and an increase in those accessing support for alcohol issues. Service users themselves reported feeling very supported and stable during the lock down periods.
- A Budget Prioritisation Process for Domestic Abuse was instigated by DASVEG in 2020 to review contacts commissioned across the DA system. The significant partnership working during the process has resulted in progressing pooled budget arrangements for the Domestic Abuse Awareness contract for perpetrators. This system wide approach will continue to ensure sustainability for all contracts as part of a Joint Commissioning Strategy for Domestic Abuse and reflect the pending outcomes of the Domestic Abuse Bill.

We will continue to work in partnership to address the issues that are most effecting those either working or living within County Durham. Those crimes that effect our most vulnerable will continue to be the focus of our partnership response such as Domestic Abuse, Hate Crime and the emerging issues around County Lines, where vulnerable individuals are preyed upon and groomed by organised criminal gangs in order to expand their reach and influence.

We need to react to the increasing use of technology to perpetrate crime by ensuring a better understanding of cybercrime. Raising awareness of how we can protect ourselves from the numerous ways that perpetrators can steal our identities, access our finances and disrupt our businesses is a continued area of work.

We are also strongly committed to supporting victims to cope and recover from their experience through a range of services customised to the specific needs of individuals.

We want to work jointly together, using the best skills and expertise in our different organisations to meet our shared priorities. We can only do this by working together and supporting our communities and voluntary sector organisations, charities and social enterprises to make County Durham a safer place.

We would like to thank everyone for their continued commitment to achieving our vision during these challenging times.

**Keith Wanley**

Chair of the Safe Durham Partnership  
Area Manager, County Durham and Darlington Fire and Rescue



**Cllr Lucy Hovvels MBE**

Vice Chair of the Safe Durham Partnership (up to May 2021)  
Portfolio Holder for Adult & Health Services, Durham County Council



## What is the Safe Durham Partnership?

The Crime and Disorder Act 1998 placed a statutory duty on local authorities to form a Community Safety Partnership (CSP) to tackle crime, disorder, anti-social behaviour, substance misuse, other behaviour adversely affecting the local environment and to reduce re-offending. In County Durham, the CSP is the Safe Durham Partnership.

The Safe Durham Partnership is required by statute to develop an annual strategic assessment. Its purpose is to enable the Safe Durham Partnership Board to:

- Identify its strategic priorities for the forthcoming year
- Identify key crime and disorder risks and threats to the community.

The Strategic Assessment includes restricted data and as such is only for use by members of the Safe Durham Partnership and its partner agencies, however, the contents of this strategic assessment has been used to refresh this Safe Durham Partnership Plan.

There are currently six 'responsible authorities' on the Safe Durham Partnership, who have a legal duty to work in partnership to tackle crime, disorder, substance misuse, anti-social behaviour and other behaviour adversely affecting the environment, and to reduce re-offending.

Membership of the Safe Durham Partnership is made up of the following partners:

### Responsible authorities:

- Durham County Council
- Durham Constabulary
- County Durham and Darlington Fire and Rescue Service
- National Probation Service \*
- Durham Tees Valley Community Rehabilitation Company \*
- County Durham Clinical Commissioning Group

### Additional members:

- Office of the Police, Crime & Victims' Commissioner
- Tees, Esk and Wear Valleys NHS Foundation Trust
- County Durham & Darlington NHS Foundation Trust
- HMP Durham
- Voluntary and Community Sector

### \*The National Probation Service and Durham and Tees Valley Community Rehabilitation Company.

By June 2021 the National Probation Service (NPS) will have responsibility for managing all offenders on a community sentence or licence following release from prison in England and Wales and will continue to deliver those services reserved to the public sector such as advice to court. There will be 11 probation areas across England and Wales. This will include the introduction of 10 new probation areas in England with existing arrangements remaining unchanged in Wales.

## **Covid-19 and our Response**

On a national basis, the Covid-19 pandemic has impacted crime and illicit economies such as organised crime, terrorism, street crime, online crime, illegal markets and smuggling, human and wildlife trafficking, slavery, robberies and burglaries.

The Global Initiative Against Transnational Organised Crime has stated that whilst the impact of pandemic in the short term indicates a decrease in some organized-criminal activities, especially during lockdown, it has provided new opportunities for crime in other areas, causing a change in the "organised-criminal economy" that may be more long term (GIATOC, 2020). During lockdown restrictions within the UK, there are fewer people on the streets, causing a decrease in street crime. With a larger population staying indoors at home, thefts and residential burglaries were reported to have decreased.

However, there have been increases in counterfeiting and fraud directly related to the Covid-19 pandemic and more reports of cybercrime, domestic abuse, and hate crimes. All aspects of crime increase the fear of crime within local communities, especially during times of crisis. National reports suggest increases in fraud especially targeting elderly vulnerable people (Action Fraud, 2020).

Lockdown restrictions can especially impact on women with existing vulnerabilities such as poverty, homelessness, poor mental health and past experiences of trauma, and who are victims of sexual abuse and sexual violence (Changing Lives, 2020).

This issue can be related to, but is often distinct from, domestic abuse – also a significant and pressing concern – affecting women including those who are being systematically targeted for sexual exploitation.

Work is currently being undertaken to address significant court backlogs, some through online means, and how local agencies can start to address the issues relating to social distancing to enable cases to continue through the courts. Prison releases have been delayed ensuring all individuals are suitably housed on returning to their local area. This action has helped reduce the numbers who are homeless and living on the streets.

Digital mechanisms are currently being utilised to engage those engaged by the National Probation Service. This may cause inequalities in some clients being able to access health and social care support due to a lack of access to suitable equipment.

In Durham, a rapid Health Impact Assessment (HIA) was an initiative to provide a 'snapshot' insight into the direct and indirect impact of Covid-19 lockdown on inequalities. The key priorities identified by the HIA also reflect Marmot's national review on inequalities, which suggest by reducing the impact of crime and anti-social behaviour within communities can increase levels of health and wellbeing.

The Safe Durham Partnership will also work closely with the Durham Safeguarding Children Partnership, in particular through the work of the Domestic Abuse and Sexual Violence Executive Group and the Alcohol and Drugs Harm Reduction Group to look at the importance of addressing Adverse Childhood Experiences.

## County Durham Vision 2035

The County Durham Vision 2035 is a document developed with partners to provide a shared understanding of what everyone wants our county to look like in 15 years' time.

The County Durham Vision 2035 was written together with partner organisations and the public and sets out what we would want to county to look like in 15 years' time. It provides strategic direction and enables us to work together more closely, removing organisational boundaries and co-delivering services for the benefit of our residents. This vision is structured around three ambitions which are:

- More and better jobs
- People live long and independent lives
- Connected communities

A new partnership structure framework was agreed by the County Durham Partnership (the overarching partnership in County Durham) in September 2020 which ensures the County Durham partnership structure aids delivery of the County Durham Vision 2035.

The new partnership structure underneath the County Durham Partnership is:

- **Safe Durham Partnership – Statutory**
- Health and Wellbeing Board (and Outbreak Engagement Board) – Statutory
- Economic Partnership
- Environment and Climate Change Partnership

In addition, the County Durham Together Partnership which will be responsible for countywide approaches.

The SDPP will form part of the delivery mechanism for the Vision, with a remit to deliver the following vision objectives and also work with other partnerships on shared priorities and cross-cutting issues. The Safe Durham Partnership along with its subgroups, will take the lead on delivering the following objectives contained within the vision:

- Future free from harm due to drug and alcohol misuse
- Support for victims to cope, recover and engage in the justice system
- Work with communities most affected by long term empty properties
- Tackle crime and anti-social behaviour
- Address the underlying causes of crime and community tensions
- Actively take steps to encourage community cohesion
- Provide a range of activities and opportunities to divert people away from crime and anti-social behaviour
- Approach to selective licensing of private landlords

In addition, they will work closely with the Durham Safeguarding Children Partnership who will deliver on the objective to make sure children and young people are safe.

As mentioned above, the Safe Durham Partnership will not just fulfil the objectives in the Vision but also has a duty to meet our statutory obligations under the Crime and Disorder Act 1998.

### **Approach to Wellbeing**

The County Durham Approach to Wellbeing has been adopted by the Safe Durham Partnership as a means of ensuring all organisations and services within the county consider wellbeing as a common currency; it includes everything that is important to people and their lives. It is designed to promote whole system change and to invoke a culture where the wellbeing of the County's residents is considered in every decision that is made whether this be regarding decisions about people or places or the systems designed to support them.

Our approach has six guiding principles which are all underpinned by a strong evidence base. These principles affirm the key role that communities can play in supporting their own residents and the significant improvements in health and wellbeing outcomes that can result from involving communities more in decisions that affect them. A community can be defined as a geographical community or a community of interest such as people living with dementia or asylum seekers.

Our approach has people and places at its heart. Working with communities, building on the assets of those communities, supporting the positive development of the neighbourhoods that people live in and fostering the resilience and empowerment of these communities through the support offered to everyone, and importantly to those who are most vulnerable.

Our approach highlights the importance of supporting systems – encouraging alignment of activities across agencies and sectors and ensuring that services are commissioned and delivered in a way that is collaborative and supportive. For those who require more formal interventions or treatment, our approach supports person-centred interventions that are empowering rather than stigmatising. Through commissioners and providers of services across the sectors the model helps to provide a framework against which we can address the needs of people, communities and neighbourhoods whilst working towards a cultural change. This means ensuring all services self-assess against the model using the structured framework that helps to reflect on current practice and will inform future decisions about how local work and activities can support the wellbeing of people living in communities.

Over time it is aimed that the model will be integrated into commissioning decisions, supporting providers to deliver services that place improving wellbeing at the centre of service delivery.

Finally, and most importantly, all our actions need to be informed by local conversations with people and communities – using and building on their knowledge and learning from their own experiences of knowing what they need, what is right and what works for them. In doing this we will also ensure that the model is dynamic, adapting, changing and that it is shaped and developed over time by County Durham residents.

## The Safe Durham Partnership Strategic Assessment and Durham Insight

The Safe Durham Partnership is required by statute to develop an annual strategic assessment. To provide current data and information for stakeholders which is easy to access, a series of web-based factsheets has been developed which is part of Durham Insight which is a shared intelligence, research and knowledge base for County Durham, informing strategic planning across Durham County Council and its partners. This site includes in depth Insight factsheets and lots of topic-based intelligence including infographics, maps and story maps. New intelligence content is regularly added, and the site is continuously being developed and improved. [www.durhaminsight.info](http://www.durhaminsight.info). Key messages from the Integrated Needs Assessment have been identified for each priority below.

### Policy drivers

Key factors which impact on community safety have been drawn out from the strategic assessment and Durham Insight and utilised to inform the priorities for the Safe Durham Partnership Plan:

- Crime and Disorder Act 1998 (amended)
- The Police and Justice Act 2006
- The Crime and Disorder (Prescribed Information) (Amendment) Regulations 2010
- The Crime and Disorder (Formulation and Implementation of Strategy) (Amendment) Regulations 2010
- The Crime and Disorder (Formulation and Implementation of Strategy) (Amendment) Regulations 2011
- Police Reform and Social Responsibility Act 2011
- Health and Social Care Act 2012
- Care Act 2014
- Anti-Social Behaviour, Crime and Policing Act 2014
- Counter Terrorism and Security Act 2015
- Multi-agency Statutory Guidance for the Conduct of Domestic Homicide Reviews 2016
- Policing and Crime Act 2017
- Children Act 2004/Children and Social Work Act 2017

Most recent policy drivers include:

- Coronavirus Act 2020
- Channel guidance
- Cyber crime
- Domestic Abuse Bill 2020
- BLM (Black Lives Matter)
- Backlogs in the Criminal Justice system
- Serious Violence Duty

Coronavirus Act 2020 provides a set of measures giving public bodies and the Government the tools and powers they needed to carry out an effective response to this public health emergency. The implementation of measures within the act could

have a direct impact on services and resources provided by partners and therefore the delivery of actions with the Safe Durham Partnership Plan.

Channel is part of the Prevent strategy. The process is a multi-agency approach to identify and provide support to individuals who are at risk of being drawn into terrorism. The refreshed Channel duty guidance, which has implications for how Channel panels are delivered across England and Wales was launched during November 2020. This will enable us all to manage the vulnerability of individuals at risk of being drawn into terrorism more effectively.

There have been increases in cybercrime and fraud due to the Covid-19 pandemic as many people are now working from home and using the internet more than ever.

The Domestic Abuse Bill 2020 aims to create a statutory definition of domestic abuse, emphasising that domestic abuse is not just physical violence, but can also be emotional, coercive or controlling, and economic abuse. The Bill is due to receive royal ascent imminently and will also update legislation accordingly.

Black Lives Matter (BLM) is a political and social movement advocating for non-violent civil disobedience in protest against incidents of police brutality and all racially motivated violence against black people. Although there was an increase in community tensions within regions of higher ethnic minority populations, County Durham did not see the scale of demonstrations and targeting of national monuments related to the slave trade that were seen in other parts of the country. However, tensions are monitored, and any potential areas of concern highlighted by partners so that suitable actions can be taken to address any issues. Gypsies, Roma and Travellers are the largest BAME (Black and Minority Ethnic) population in County Durham. They have a long-established history as part of our community in County Durham. We have a duty to encourage race equality, eliminate discrimination and foster good relations.

A local and national issue exists in respect of delays within the criminal justice system, and within courts. The impact of Covid on the courts has resulted in a significant backlog in the listing of trials and sentencing within courts, and this brings pressure to all component parties, including police, CPS, court staff, and cause particular strain upon victims. The Durham & Cleveland Local Criminal Justice Partnership (LCJP), who provide oversight of criminal justice in the Durham area, are pleased to note that Durham are faring well in comparison to other LCJP areas. However, in recognition of the impact that this has on community safety and justice perceptions and confidence, they remain cautious and vigilant and thus continue to work proactive locally as well as linking in with the National Criminal Justice Board.

The Serious Violence Duty will require local authorities, the police, fire and rescue authorities, specified criminal justice agencies and health authorities to work together to formulate an evidence based analysis of the problems associated with serious violence in a local area, and then produce and implement a strategy detailing how they will respond to those particular issues.

It is set to be introduced as part of a new Bill early in 2021 and that the Duty will come into force no sooner than 2022. Once the Bill is published online there will be wider communication, including to colleagues across Government.

Alongside the Bill, statutory guidance is being developed, in collaboration with representatives of the sectors which will be subject to the Duty. Draft guidance will be published before Committee stage of the Bill to ensure further understanding of how the Duty will work in practice. There will also be a Government consultation on the draft guidance which will be published before the Duty is commenced in 2022 which will enable stakeholders to feed into the guidance and share good practice.

## **Consultation**

Extensive public consultation on the Vision identified housing as a key consideration for local people. The selective licensing initiative, as part of a wider strategic approach outlined in the County Durham Housing Strategy, supports the aims of the Safe Durham Partnership Plan 2020-2025 and the Safe Durham Partnership's vision that Durham is a county where every adult and child will feel and be safe.

Placing Selective Licensing within the remit of the Safe Durham Partnership recognises the potential positive impacts for both tenants and landlords in problematic areas, including better quality and safer property standards, fewer empty properties, reduced levels of homelessness and safer, more pleasant areas to live due to lower levels of crime, littering and other anti-social activity.

Other areas included the need to 'accept' and to value diversity and the Safe Durham Partnership will take the lead on actively taking steps to encourage community cohesion to support more resilient and cohesive communities. The consultation also supported a greater emphasis on road safety which is included in this plan.

Tackling alcohol and substance misuse reduction has been identified as one of the priorities of this plan which support vision consultation feedback in relation to tackling alcohol misuse.

Following consultation in 2020 for the Safe Durham Partnership Plan 2020-25 there was strong support for the priorities within the Plan. There were 72 responses to the consultation and over four in five people agreed with the Safe Durham Partnership Plan. Comments included:

“We strongly agree with the Safe Durham Partnership Plan and it complements many other Strategic Partnership Plans as well as the County Durham Vision.”

“Feeling safe is what binds communities and makes it a good place to live”

The draft Safe Durham Partnership Plan 2021-25 was again subject to public consultation via the Durham County Council website and included the Area Action Partnerships, voluntary and community service and the Youth Council.

## Our Vision

The Safe Durham Partnership's vision is underpinned by the strategic assessment and is:

**'Durham is a county where every adult and child will feel and be safe'**

## Our Strategic Priorities

The Safe Durham Partnership has six strategic priorities which set out what we will focus on to make Durham a county where every adult and child will feel and be safe. These priorities are:

- **Promote being safe and feeling safe in your community**

Being and feeling safe both in our homes and within the wider community impacts on both our emotional and physical wellbeing. It also directly impacts on our personal resilience as well as impacting overall on a community's resilience, confidence and cohesion.

- **Support victims and protect vulnerable people from harm**

For the vast majority of victims, the experience is new and completely unexpected. Many of them are vulnerable and some have mental health problems. It's essential that appropriate support is available to help them cope and recover from their ordeal.

People can be vulnerable for all sorts of reasons including learning or physical disabilities, mental health, alcohol and substance misuse, age or discrimination. Vulnerable people are of increased risk of being targeted by predatory perpetrators of crime and being groomed in order to be exploited sexually, criminally or financially.

- **Prevent Strategy: Countering Terrorism, Radicalisation and Violent Extremism**

Becoming radicalised can happen to anyone anywhere for numerous reasons, such as a traumatic event, prejudice or a skewed ideology. No matter the reason there may be warning signs that can help identify those people that may be at risk. If we can refer these individuals early enough into suitable interventions and support, we may be able to prevent devastating life changing incidents from occurring.

- **Reduce reoffending**

Prevention and early intervention initiatives can have an impact on diverting individuals away from offending in the first place. Targeted and desistance-based interventions are also required to rehabilitate individuals effectively and reduce reoffending. The Criminal Justice System needs to be effective in turning lives around and stopping people reoffending through support rather than punishment.

This will help reduce crime, reduce the number of victims and make our communities safer. Where those people who are harmed by crime or conflict choose to, then a restorative approach can bring the harmed and the harmer together in a number of

ways, enabling everyone affected by the incident to play a part in repairing the damage and finding a positive way forward.

- **Alcohol and substance misuse reduction**

Alcohol and substance misuse have strong links to both offending and vulnerability in acquisitive crimes to further fund the addiction such as shop lifting and burglary to the impacts on reducing inhibitions and changing the behaviours of individuals which may lead to domestic and sexual abuse and night time economy violence.

- **Tackle and prevent cyber enabled crime**

Cybercrime continues to rise in scale and complexity, impacting on a greater number of victims, affecting essential services, businesses and private individuals alike. However less complex means are also very successful such as phishing for personal information using bogus information.

It is costing the UK billions of pounds, causes untold damage, and threatens national security. According to the National Crime Agency home-grown cyber criminals are becoming more sophisticated and therefore a rising threat. Although young criminals are often driven by peer kudos rather than financial reward, organised UK cybercrime groups are motivated by profit.

For each strategic priority we will firstly explain why it is a priority by interpreting the appropriate data sets and trends. We will then look at why this is important by understanding the impact it has on the area and the lives of those affected. A case study is also provided to give an example of how working together effectively we can make a real difference for people living within County Durham.

### **Alignment with other key strategic plans**

Protecting vulnerable children and adults is a key priority for the Safe Durham Partnership; and it is important that there are close links with the Safe Durham Partnership and the statutory Durham Safeguarding Children Partnership and the Safeguarding Adults Board.

The Safe Durham Partnership Plan has been developed in close collaboration with the Police, Crime and Victims' Commissioner's office, drawing on a clear body of evidence and understanding of the needs of communities in County Durham. The priorities which each plan sets are therefore aligned, and the partners work closely to ensure they are delivered to meet the needs of our local communities. Please refer to Appendix 1 to see how the Safe Durham Partnership Plan aligns to other plans.

## **Strategic priority 1: Promote being safe and feeling safe in your community**

Areas of work included under this priority are:

- Antisocial behaviour
- Arson and Deliberate Fires
- Safer Homes
- Road Safety
- Hate crime and community tension

### **Evidence base**

- On average there are around 51,000 crimes per year reported in County Durham.
- The monthly crime rate averages at 8 crimes per 1,000, this dropped to between 6 and 7 crimes per 1,000 during April and June 2020.
- The crime rate historically is 97 crimes per 1,000 (2018/19 & 2019/20, excludes ASB), in the 12 months to September 2020 this dropped to 93 per 1,000.
- There are on average 7,000 ASB incidents per quarter in County Durham (Council and Police ASB data). During the first 6 months of 2020/21 this increased to an average of 8,700.
- ASB (2018/19 & 2019/20) rates in County Durham historically is 53 per 1,000 (Council and Police ASB data). In the 12 months to September 2020 this increased to 58 per 1,000.
- During 2019/20 the fire service attended 243 house fires and delivered 16,360 home safety visits. In the first six months of 2020/21, 119 house fire were attended, and 1,742 home safety visits carried out.
- In 2019/20, across CDDFRS area, 50% of all primary fires were deliberate and 89% of all secondary fires were deliberate.
- In the East coast area that the Arson Suppression Group are focusing on (Wheatley Hill, Peterlee, Easington, Horden etc), over the last 5 years in this area, car fires alone account for 47% of deliberate primary fires and loose refuse alone accounts for 53% of deliberate secondary fires.
- In 2019/20, County Durham Fire and Rescue Service had the third highest rate of deliberate secondary fires per 100,000 population, the two highest rates are in our neighbouring Services in Tyne and Wear and Cleveland showing this is a regional issue and not just County Durham.
- In 2019/20 County Durham Fire and Rescue Service had the highest rate of deliberate primary fires per 100,000 population, with Tyne and Wear and Cleveland in second and third place respectively, again demonstrating this is a regional issue.
- Public confidence is in line with the Most Similar Groups (MSG) average.
- 54% of respondents to the National Crime Survey think Council & Police are dealing with crime issues that matter to the local area.
- Hate crime incidents increased locally by almost 27% between 2016-17 and 2019-20. 259 incidents were recorded in the first six months of 2020-21, the highest number of incidents in the first six months of any year since 2016/17.

- Hate crimes have been increasing locally over the past few years, in 2019-20 there had been a 127% increase compared to 2016-17. 437 crimes were recorded in the first six months of 2020-21, a 27% increase compared to the first six months of 2019-20 and a 144% increase compared to the first six months of 2016-17.

### **Why is it important?**

County Durham remains one of the safest places to live, work and visit in the country, and partners are committed to ensuring that local people feel safe and are safe in communities with low crime rates which are more cohesive and resilient. With regards to Covid-19, partners are aware of these issues and to understanding the complexities of the societal changes that have accompanied the national emergency. This is an ongoing and evolving picture with agencies also adapting their service delivery to meet demand and public expectation.

Whilst incidents of anti-social behaviour continue to be managed this is an area which can have a significant impact on our communities and individuals and County Durham remains higher than the national average. Problem solving approaches and partnership working remains key to addressing anti-social behaviour and a more place-based approach linking in with other areas of partnership work is being considered moving forward.

Hate Crime is an area subject to under reporting where the key challenge is to ensure that victims are confident to report, and that once reported, the hate element is recognised so that support and safeguarding can be provided. The number of both Hate incidents and Hate crimes have increased steadily over the last few years. It is difficult to attribute the increase to any one single factor and is more likely to be a result of a combination of increased confidence in reporting, an increase in the actual number of incidents, and changes to crime recording standards relating to certain harassment incidents now being classed as crimes.

Resilient and cohesive communities are more likely to engage with services and report crime and anti-social behaviour. In order to achieve this there are range of tools and powers available to partner organisations to tackle anti-social behaviour. However our real strength in communities lies in the recognition of place based community assets and seeking to mobilise these in order to support each other, listening to the individuals within those communities in order to improve a sense of belonging and purpose so that people are safe and free from the fear of crime.

Identifying vulnerable people within our communities and ensuring they receive the support needed to prevent them becoming either victims of crime or becoming exploited can only be done by working together through schemes such as Safer Homes or the Rough Sleepers and the Night Shelter winter nights work.

The Safer Homes scheme run in partnership with County Durham and Darlington Fire and Rescue Service and Durham Constabulary offers free fire safety advice and free smoke alarms where required. Referrals can also be made under the scheme for free crime prevention advice via the police. Referrals to health specialists are also available for a range of health and wellbeing issues if required.

During the Covid-19 pandemic Community Risk Officers have continued to visit the very high-risk clients to ensure that the most vulnerable people in our communities get the support they need.

A safe, strong and prosperous community is also a cohesive one. It is important that people have a sense of belonging and feel proud about where they live. It is also important to understand the impact which tensions and conflict may have on our local communities. The implementation of the Community Cohesion Toolkit will ensure that issues around community tensions are identified sooner to ensure a partnership response and avoid escalation. The Area Action Partnerships (AAPs) will have a key role to play, feeding in issues around community tensions and implementing schemes that will help form a more cohesive community.

Road safety is an issue that cuts across local councils, emergency services and health. Incidents can have a devastating far reaching and long-term impact on those involved and their families. Having a road network that encourages sustainable travel and road users that are safe is a priority of the council and its strategic partners. This is achieved through a targeted partnership approach to address those key road user groups over-represented in casualty statistics and those individuals or groups who engage in risk taking behaviours.

As a result of the Covid-19 pandemic, our ability to meet residents face-to-face has been diminished, we have developed a number of education tools to assist in road safety delivery. This is supported by publicity campaigns aimed at encouraging safe and sustainable road use, particularly on the school journey.

## **Case Study – GRT (Gypsy, Roma, Traveller) Communities**

Gypsies, Roma and Travellers have a long-established history as part of our community in County Durham. We have a duty to encourage race equality, eliminate discrimination and foster good relations.

A large unauthorised encampment arrived in the county during the early summer. A resident in the locality reported this to the local authority. During the conversation the complainant became very angry and made a threat to damage the caravans belonging to the families and threatened to set fire to them.

The Gypsy Roma Traveller Services (GRTS) team was informed immediately about the comment made who then contacted Durham Constabulary to follow up the report.

Key partners and Durham County Council Health and Safety were contacted to make them aware of the incident and advised they should assess potential risk in respect of any contact/visits to the area and the DCC Equality and Diversity team to make them aware of the incident.

Durham Constabulary visited the complainant and issued a verbal warning about his conduct. It was explained that his behaviour was totally unacceptable and further incidents could lead to him being convicted of a racially aggravated offence.

A tension monitoring form was completed and then discussed at the local multi-agency problem solving meeting to make partners aware of the situation.

In order to help reduce further tensions in the community further interventions were arranged to help educate and inform residents about Gypsy, Roma, Traveller communities such as the Holocaust Memorial Day event and Community Safety Roadshows as well as plans to set up a community forum. This forum brings together members of the GRT communities with key members of the community and officials to ensure that these issues are less likely to happen in the future.

Strategic Priority 1	Promote being safe and feeling safe in your community				
Work areas	Anti-Social behaviour (ASB)	Arson and Deliberate Fires	Safer Homes	Road Safety	Hate Crime and Community Tension
<p><b>Core Deliverables</b></p>	<ul style="list-style-type: none"> <li>• Work with partners in order to be more efficient and effective in combatting the following: <ul style="list-style-type: none"> <li>○ Fly tipping</li> <li>○ Derelict/ abandoned properties</li> <li>○ Horses</li> <li>○ Noise</li> <li>○ Nuisance Motorcycles/Quads</li> <li>○ Other statutory nuisances</li> </ul> </li> <li>• Improve public confidence in the Police and Council for tackling crime and ASB</li> <li>• Communicate successes in order to build confident communities</li> <li>• Clear use of a partner problem solving approach to improve the delivery of agile interventions utilising the Local Multi-agency Problem Solving (LMAPS) process</li> <li>• Collaboration with Area Action Partnerships and the Voluntary and Community Sector in tackling long term anti-social behaviour in high impact areas</li> <li>• Consideration of a place-based approach for ASB and potentially other areas of partnership work</li> <li>• Develop a partnership action plan to tackling nuisance motorcycles and quads</li> <li>• Continue to work with Believe Housing to prevent eviction and explore opportunities to work with other housing providers in same way</li> <li>• Work with Jigsaw to provide supported housing for rough sleepers with complex needs</li> <li>• Implement the Safe to Stay initiative where rough sleepers can access accommodation immediately and a housing pathway is developed for them</li> <li>• A rough sleeper team will provide support for all rough sleepers from immediate emergency accommodation through to more longer-term accommodation</li> </ul>	<ul style="list-style-type: none"> <li>• Improve public confidence in the Police, Fire and Council for tackling Arson and deliberate fires by working with partners to adopt a 'Public Health Approach' which advocates a 'Whole System Multi-Agency Approach' to Arson and deliberate fires.</li> <li>• Prevent Arson and deliberate fires by addressing the underlying issues using the 'Public Health Approach'. This will identify the common risk factors driving Arson and deliberate fires, and the protective factors preventing them. It will facilitate identification of these factors and implementation of interventions across all levels of the ecological framework; Children &amp; Early Years, Family, Young People, Education &amp; School Based, Community, Offender Specific.</li> <li>• Implement and deliver the response to Arson and deliberate fires within each thematic against the four components of the Government's Serious Organised Crime Strategy Prevent, Protect, Prepare, Pursue.</li> <li>• Address community issues relating to Arson and deliberate fires to build a place based approach that seeks to create networks to support people to improve their lives and community based projects to change the status quo around Arsons and deliberate fires being acceptable or the norm.</li> <li>• Improve the response to Arson and deliberate fires under the offender specific theme by focusing on those most at risk of offending and those identified as being involved in Arson and deliberate fires, including use of powers under the Anti-Social Behaviour Crime Policing Act 2014.</li> <li>• Co-ordinate processes and procedures to identify and support Children, Early Years &amp; Families to achieve their full potential including diversion, activities and education, improving outcomes for young people and families.</li> <li>• Creation of the 'Arson Suppression Group' who will adopt a 'Whole System Multi Agency Approach' that will generate an overall action plan with short and long-term outcomes.</li> </ul>	<ul style="list-style-type: none"> <li>• Deliver a range of interventions to improve private sector housing and living standards</li> <li>• Introduce wide-scale licensing of private landlords</li> <li>• Work with identified residential licensed premises to support them to review their annual risk assessment to ensure that safety control measures are maintained in good condition</li> <li>• Provide annual assurance to SDP around fire safety issues including safe and wellbeing visits</li> <li>• Ensure referrals for target hardening properties for a specific need i.e. domestic violence, harassment, self-neglect, hoarding for those most vulnerable</li> <li>• Fire safety awareness training delivered to partners</li> </ul>	<ul style="list-style-type: none"> <li>• Focus on delivering schemes to address those road user groups that are overrepresented in casualty statistics</li> <li>• Undertake an annual review of all reported injury collisions to establish those road user groups or risk-taking behaviours that contribute to casualties in the county</li> <li>• Task the County Durham and Darlington Casualty Reduction Forum with producing and publishing an annual delivery plan to support the road safety strategy</li> <li>• Provide annual assurance to SDP around road safety issues including reporting of performance, delivery of campaigns and local safety schemes</li> </ul>	<ul style="list-style-type: none"> <li>• Understand and reduce the true level of hate crimes and incidents</li> <li>• Increase reporting of hate incidents through the Hate Hurts Campaign</li> <li>• Develop a multi-agency communications strategy, demonstrating a cross-organisation and cross-sector approach, including a message that there should be zero-tolerance of hate crime. This to be aimed at all sections of society</li> <li>• Review of reporting mechanisms and pathways</li> <li>• Review how organisations share intelligence</li> <li>• Review of the use of evidence to ensure effective prosecutions</li> <li>• Map the support for victims and identify gaps in effective support</li> <li>• Understand the issue of incitement in relation to 'disability hate crime', and the common connections between 'disability hate crime' and 'crimes against disabled people' through joint working with the Joint Hate Crime Action Group and the Law Commission</li> </ul>
<p><b>Delivery plan mechanism</b></p>	<p><b>Anti-Social Behaviour Strategy (in development)</b></p>	<p><b>Multi-Agency Arson Reduction Strategy 2021-2024</b> <b>Arson Suppression Group 4P Action plan</b></p>	<p>County Durham and Darlington Fire and rescue Service Community Risk Management Plan and Community Safety Strategy</p>	<p><b>County Durham and Darlington Road Safety Strategy 2020</b></p>	<p><b>Joint Hate Crime Action Plan</b></p>

## **Strategic Priority 2: Support victims and protect vulnerable people from harm**

Areas of work included under this priority are:

- Domestic Abuse and Sexual Violence
- Organised Crime and County Lines
- Victims

### **Evidence base**

- Violence and sexual offences are the most reported crimes locally, at a rate of 40.7 per 1,000 (July 2018 – Jun 2019) which is similar to the North East but higher than England.
- There were almost 1,500 rape and sexual offences in County Durham in 2019/20, at a rate of 2.7 per 1,000. During the first three months of 2020/21 rape and sexual offences decreased but have since returned to average levels. However, between July and September 2020 rape increased to above average levels particularly in August.
- There were over 11,000 domestic abuse related crimes recorded in County Durham (2019/20) which is equivalent to 21 crimes for every 1,000 people. For the first two quarters of 2020/21, 7,900 domestic abuse related crimes have been recorded.
- There were 6,982 referrals to Harbour in 2019/20, compared to 5,140 in 2018/19 a rise of 38%. Referrals continue to rise with the six refuges across the North East constantly at full capacity.
- 3,213 victims of crime took up the offer of help from (Victims Care and Advice Service 2019/20). During the first six months of 2020/21, 217 victims have taken up the offer of support.
- The National Crime Agency states nationally that 69% of County Lines Drugs supply related to Crack and Heroin. (December 2018).
- The National Crime Agency reports that there were 2000 individual drug deal line numbers in the UK and half of these can be branded as County Lines. (December 2018).
- The National Crime Agency concluded that 91% of individuals recorded nationally associated with County Lines offending were male, however they believe that the number of females as both offenders and victims of exploitation were underrepresented. (December 2018).

### **Why is it important?**

Being a victim of crime can have devastating consequences for both the individual and those closest to them. This can include entry into a criminal justice process which can be confusing and frightening as well as intrusive. It is important that we ensure appropriate and timely support is available to all victims at each stage of the process to ensure they are able to cope and recover from the experience. During the recent Covid-19 pandemic this support has been essential and commissioned services have continued to offer support either in line with restrictions regarding face

to face meetings or extending remote provision through video enabled technology or telephone contact.

Domestic abuse and sexual violence are hidden crimes that are significantly unreported. This violence and abuse have a major and long-lasting impact on victims, witnesses, children and young people, whole families and the wider community. Most victims of domestic abuse and sexual violence are women and girls, but men and boys can also be victims.

Durham Constabulary expects to see an increase in demand from domestic abuse incidents as improvements are made in identifying victims and increasing confidence amongst victims to report abuse. The harm of domestic abuse to the victim is substantial and is often linked to complicating factors such as alcohol, drugs and mental health.

Children are affected by Domestic Abuse in their households. Actions focus on the long-term impact and risks associated with children and young people who are affected by domestic abuse and information sharing across agencies. Sexual offences against children remains an area of concern, specifically in relation to contact offences which are largely committed by persons known to the child and often within the family unit.

We aim to significantly reduce the number of repeat victims and serial perpetrators of domestic abuse through early intervention and ensuring that more hidden victims are identified and offered support.

County lines facilitates the purchase of illicit drugs by drug users in smaller towns and rural areas and requires exploitation of the vulnerable, including children and those with mental health or addiction problems, at all points of their drug supply routes. Albeit relatively rarely, UK investigations have encountered children from what people might perceive to be more stable or more affluent backgrounds who have been groomed for county lines dealing.

A small number of County Lines have been identified in the Durham Constabulary area. There has been an effective (pursue) response using proactive measures to gather evidence and prosecute those involved, closing down the lines involved.

However, it is recognised that there is an emerging crack cocaine market developing in the force area and effective partnership working (prepare and protect) is required to prevent further county lines activity being imported into the area and to ensure an effective safeguarding response if further lines take hold. This is being developed by the Constabulary working with all relevant agencies through the Child Exploitation Group.

We are working with Durham Safeguarding Children Partnership to raise awareness with staff and partners of what criminal exploitation and county lines is, what to look for and where to report concerns and intelligence.

We are also working with the Safeguarding Adults Board to raise awareness of modern slavery. Durham County Council has developed a Modern Slavery Charter which focusses upon three key aims; prevention, protection and partnership working. Making sure the appropriate agencies disrupt the organised criminal gangs involved in this activity effectively and ensuring partners understand the nature of this harm to enable practitioners to recognise its signs and respond appropriately so that potential victims get the support and help that they need.

### **Case Study 1 – Victims Care and Advice Service**

Mrs D was a victim of robbery at knifepoint and at her place of work. Following the crime, she was terrified at even the thought of returning to work, she also felt scared, anxious and nervous when at home and during times when she needed to leave her home to carry out simple tasks like shopping. This was all in addition to the anxiety and isolation already being experienced due to Covid-19 restrictions.

Following a referral to the Victim Care and Advice Service and in step with Covid-19 regulations a Victim Care Officer was able to conduct safe garden visits with Mrs D at her home and was also able to go on socially distanced walks with her in order to carry out a needs assessment, develop a recovery plan and put the required support in place. This included support to Mrs D regarding the subsequent Criminal Justice proceedings as the offender had been identified.

Despite the Covid-19 restrictions Mrs D was able to access the support she required to help her cope and recover; she was able to return to work, she felt safer both inside and when leaving her home, and was also fully supported and well informed throughout the criminal justice process linked with the prosecution of the individual who had offended against her.

### **Case Study 2 – Community Peer Mentors**

M, a 25 years old woman called County Durham Together Community Hub. She was feeling very low and upset, had ongoing legal issues after suffering from harassment for a number of years from her ex-partner. She needed help as she didn't understand the letters or information she was being given and didn't feel supported by the legal profession. She was taking anti-depressants to cope. The police and solicitors were involved in dealing with the case however she was very confused and didn't understand correspondence she was receiving from police. Her medication was making her feel unwell and she felt unsupported.

M agreed to allow these issues to be discussed with her GP and was happy to be referred to other organisations for further support. It was identified that M required further support with regards to her mental wellbeing and medication and referrals to Wellbeing for Life, Citizens Advice Bureau (CAB) and to Community Peer support mentor programme were made.

M was grateful for support from the hub and recognised that she had other issues and that they were happy for future support. Community Peer Support mentor made contact with M and immediately built up a rapport and provided support and practical advice. A Social prescribing link worker also contacted M and made an appointment to review her medication. She was also contacted by CAB to discuss legal support.

M was thrilled by all the support she received, she stated that this has really helped her feelings of isolation and feeling that no one cares. Her mental wellbeing has improved greatly and having support from Community Peer Support mentors ensured that she didn't feel socially isolated.

Strategic Priority 2	Support victims and protect vulnerable people from harm		
Work Areas	Domestic Abuse and Sexual Violence	Organised Crime; County lines	Victims
<b>Core Deliverables</b>	<ul style="list-style-type: none"> <li>• Ensure that all agencies have a good understanding of the impact of domestic abuse with a specific focus on coercive and controlling behaviour</li> <li>• To continue to further develop a suite of sustainable intervention providers to ensure a consistent approach to work with perpetrators</li> <li>• Continue to monitor and meet standards in respect of risk and needs assessment to ensure the needs of people affected by domestic abuse and sexual violence are met</li> <li>• To educate children and young people on the importance of respectful and healthy relationships in order to prevent future offending or victimisation</li> <li>• Ensure that all Operation Encompass notifications are processed within timescales and appropriately responded to by education settings</li> <li>• To continue to support and promote appropriate campaigns in relation to domestic abuse and sexual violence</li> <li>• Maintain strong links between Domestic Abuse Sexual Violence Executive Group and the Durham Safeguarding Children partnership to ensure issues requiring multi-agency and individual partner response are identified and addressed</li> <li>• Review commissioned contracts across the whole domestic abuse system including progressive pooled budget arrangements if appropriate</li> <li>• Review and implement all aspects of the Domestic Abuse Bill 2021 with a specific focus on the new statutory duty relating to Safe Accommodation</li> </ul>	<ul style="list-style-type: none"> <li>• Work with the Durham Safeguarding Children Partnership to raise awareness with staff and partners of what is county lines, what to look for and where to report concerns and intelligence</li> <li>• Work with Durham Safeguarding to raise awareness and explain the nature of this harm, enable practitioners to recognise its signs and respond appropriately so that potential victims get the support and help they need</li> <li>• Appropriate agencies to work together to disrupt the organised criminal gangs involved in this activity effectively</li> </ul>	<ul style="list-style-type: none"> <li>• Provide co-ordinated end to end care and support for victims and ensure effective pathways and timely support are in place</li> <li>• Deliver positive outcomes for victims and witnesses</li> <li>• Enable the victim's voice to be heard throughout the criminal justice system processes</li> <li>• All young people who become a victim or witness are offered appropriate support</li> <li>• Ensure relevant information is available to all victims and witnesses in relation to all aspects of their experience</li> <li>• Ensure group discussion and action planning is focused, targeted and results in tangible outcomes for victims and witnesses</li> </ul>
<b>Delivery plan mechanism</b>	<b>Domestic Violence and Sexual Abuse Group (DASVEG) Action Plan</b>	<b>Operation Sentinel Action Plan Durham Safeguarding Children Partnership Strategy Child Exploitation Group Action Plan</b>	<b>County Durham and Darlington Victims and Witnesses Group Delivery Plan Reducing Re-offending Strategy</b>

## Strategic Priority 3: Prevent Strategy: Countering terrorism, radicalisation and violent extremism

Areas of work included under this priority are:

- Preventing people being drawn into terrorism
- Support the work to strengthen our protection against terrorist attacks and mitigate the impact of such an attack

### Evidence base

- The UK threat level for International Terrorism changed to Substantial which means an Attack is Likely in February 2021 from Severe, which means an attack is Highly Likely.
- The threat level reached Critical – the highest level, where an Attack is Expected Imminently on two occasions during 2017, a year during which there were five terrorist attacks resulting in 36 deaths and hundreds of injuries.

### National statistics

- There were 215 arrests for terrorism-related activity in the 12 months to September 2020, 48 fewer than the number in the previous 12-month period (a fall of 18%). Of the 215 arrests:
  - 62 (29%) resulted in a charge, of which 55 were for terrorism-related offences.
  - 84 (39%) persons were released pending further investigation
  - 41 people (19%) were released without charge.
  - 20 (9%) faced alternative action, for example receiving a caution or recalled to prison.
  - 8 (4%) cases were awaiting an outcome to be assigned at the time of data provision.

### Why is it important?

The Counter Terrorism and Security Act 2015 placed Prevent on a statutory footing and requires all specified authorities to have “due regard to the need to prevent people from being drawn into terrorism”. Local Authorities and their partners therefore have a core role to play in countering terrorism at a local level and helping to safeguard individuals at risk of radicalisation. The Counter Terrorism Strategy (CONTEST) 2018 confirms that the threat to the UK comes from Islamist terrorists while extreme right-wing terrorism is described as a growing threat.

Counter Terrorism Strategy 2018 has the following objectives:

- **Pursue** - To stop terrorist attacks (the remit of the police and security services)
- **Prevent** - To stop people becoming or supporting violent extremists
- **Prepare** - Where we cannot stop an attack, to mitigate its impact
- **Protect** - To strengthen our overall protection against terrorist attacks

It has been recognised that people are spending more and more time online due to the restrictions caused by Covid-19. This has increased the access by extremist and radical groups to our most vulnerable in society and provided a new narrative that can be exploited to further their ideals and agenda.

It is recognised that mental health plays a key part in exploitation, taking advantage when people are at their most vulnerable. Loneliness, community cohesion and poverty have a significant effect on mental health, therefore working closely with support services and care workers, ensuring they have the necessary training and access to resources is key to identifying any concerns at an early stage, thus preventing further harm.

Prevent awareness is a key strategic objective of the local contest delivery plan. Through the Safe Durham Partnership and Safer Darlington Partnership, the Silver Contest Group's plan has now been updated to incorporate activities across partners to ensure training is aligned to the Counter Terrorism Local Profile but also to ensure we understand strategic delivery.

The Channel Programme is a key part of the Prevent strategy. There is a requirement for local authorities and others to provide support for people who are vulnerable to being drawn into terrorism, before they commit an offence. This process aims to provide support to individuals at an early stage and help protect them from radicalisation.

## Case Study – Channel

D was a 16-year-old boy referred to Prevent.

He suffered from severe childhood trauma, living in Local Authority care, had used drugs, was regularly missing from home and excluded from College.

D had repeatedly expressed a hatred towards Muslims and racially abused Asian people which had resulted in him being dismissed from the Army Cadets.

After referral to Prevent his case was accepted onto the Channel multi-agency (safeguarding) panel and a bespoke multi-agency support package was provided including a Home Office Intervention Provider and Counselling Services. It was established that D had aspirations to join the Armed Forces and had been due to enrol at Military College. As a result of D's willingness to engage, the Armed Forces Prevent Lead was invited to take part in Channel.

The positive engagement resulted in D being supported to attain GCSE level qualifications and to follow the employment path D chose. There has been continuing support for his family with his Mother giving credit to Prevent for 'changing her son's life' and offering to speak with other parents in a similar position. Both D and his family have also agreed to promote their positive experience with Prevent and Channel which will be used as a best practise case study for training and future engagement purposes.

D's Social Worker commented that '...The multi-agency working and information sharing was outstanding ... This good practice example demonstrates how education and intervention can really have a longstanding, positive impact and change someone's life for the better'.

<b>Strategic Priority 3</b>	<b>Prevent Strategy: Countering terrorism, radicalisation and violent extremism</b>	
<b>Work Areas</b>	<b>Prevent people being drawn into terrorism</b>	<b>Support the work to strengthen our protection against terrorist attacks and mitigate the impact of such an attack</b>
<b>Core Deliverables</b>	<ul style="list-style-type: none"> <li>• Utilise the Prevent Duty Toolkit to assess Prevent against statutory requirements and best practice delivery</li> <li>• Deliver a wide range of PREVENT awareness raising to staff of specified authorities and the childcare sector to ensure they know how to recognise when someone is vulnerable to being drawn into terrorism and understand how to refer them for support and intervention</li> <li>• Work in partnership to understand and respond to levels of intolerance and extremism that can raise community tensions</li> <li>• Promote the use of the adult/child referral pathways and ensure all staff know how to make a Prevent referral</li> <li>• Transition the Channel intervention and support programme to Durham County Council and put in place protocols for implementation as required by operation Dovetail</li> <li>• Implement the Channel Duty guidance</li> </ul>	<ul style="list-style-type: none"> <li>• Identify the threat and vulnerability from terrorism and extremism relating to terrorism in County Durham</li> <li>• Raise awareness of the importance of reporting suspicious incidents among professionals and the community</li> <li>• Collaborate with the Local Resilience Forum and County Durham Safety Advisory Group on issues of Prevent, Protect and Prepare</li> <li>• Raise awareness of how to protect crowded places from, and respond to, a terrorist attack</li> </ul>
<b>Delivery plan mechanism</b>	<b>County Durham and Darlington Silver Contest Delivery Action Plan</b>	

## Strategic Priority 4: Reduce Reoffending

Areas of work included under this priority are:

- Prevent offending and inter-generational offending
- Prevent reoffending

### Evidence base

- The rate of first-time entrants into the Youth Justice System has been decreasing and shows a downward trend in County Durham, with 213 entrants into the Youth Justice System per 100,000 10-17 population (Oct 18 – Sept 19)
- In County Durham 3 in 10 adult offenders re-offend. This rises to almost half for children and young people.
- The reoffending rate in County Durham is 30% (Jan 18 – Dec 18), higher than the national average (28%).
- In County Durham there are an average of 4.7 offences per offender, above the national average of 4.01.
- The reoffending rate for children and young people in County Durham is 39%, higher than the national average of 38%.
- The level of detected crime for offenders in the Integrated Offender Management cohort has fallen over the last 12 months to 44%, this is lowest rate seen since June 2018/19.
- The rate of successful completions as a proportion of all Criminal Justice clients in drug and alcohol treatment has been increasing in County Durham since Q4 2018-19. During Q1 2020-21 County Durham had a success rate of 12.5%, although this figure seems small, this is the highest rate seen in County Durham.
- Nearly 1,000 referrals were made into Checkpoint in 2019/20. Between April and June 2020, the number of referrals fell but have since returned to average levels.
- In the 12 months to June 2020 the compliance rate for Checkpoint has remained above 70%.
- Between April 2015 to September 2020, the Stronger Families Programme worked with 2,355 families who were identified as being involved in ASB or Crime. 49.1% of families achieved a successful intervention.
- Between 2015/16 and 2018/19 pre-caution disposals fell by 41%.

### Why is it important?

In order to prevent crime and stop people who have offended from committing further crimes, partners need to work together to implement effective measures to ensure adults and young people who offend are challenged and supported to desist from crime. Durham and Darlington's reducing reoffending group focuses its work on youth offending, early intervention, volume offender management and enabling desistance pathway support (the reasons why people offend).

Prevention and early intervention initiatives can have an impact on diverting individuals away from the criminal justice system. Our youth justice service has reduced the number of first-time entrants to the system significantly by offering rehabilitative support and restorative interventions to prevent further offending and

support victims of the crimes committed. This allows for a greater focus on those young people causing the most harm in our communities and those repeat young people who offend.

Desistance-based interventions are also required to rehabilitate individuals effectively and reduce reoffending. The Criminal Justice System needs to be effective both in terms of punishing those people who offend and stopping people reoffending through rehabilitation rather than punishment if appropriate. Evidence-based diversionary schemes like Checkpoint are known to be effective in improving reoffending by addressing the underlying causes of offending (such as employment, drugs, alcohol, mental health, accommodation) and diverting them away from the Criminal Justice System.

Challenges remain in relation to a coordinated approach to securing desistance pathway support, but we have been successful in securing a joint approach to housing needs and support as well as commissioning a specific pathway through substance misuse provision for those who offend. Effective offender management relies heavily upon all partner resources to provide critical pathways to steer people away from future offending. Targeted interventions are required for specific cohorts such as offender management, domestic abuse perpetrators, prison-based interventions.

The Local Criminal Justice Partnership (LCJP)) is aligned to the Safe Durham Partnership and is committed to delivering an end-to-end system for rehabilitating offenders and reducing reoffending. This ensures the police, youth offending services, Crown Prosecution Service, Courts, Community Rehabilitation Company, National Probation Service and Prisons, work together with those partners responsible for providing the services which help to prevent people offending, including Public Health, Housing, Employment and Mental Health services work together so that people can get access to the support that they need. The Effectiveness and Efficiency group now has an additional responsibility of providing oversight of the LCJP recovery work in order to manage criminal justice demand system in light of Covid-19 and improve outcomes for victims and offenders.

## Case Study 1 - Restorative Justice

An incident of criminal damage occurred, where H kicked open a front door of a family's home. This led to the children fearing being in the home and unable to sleep properly – the whole family needed to know why it had happened in order to move forward.

The police were called and following an investigation H was identified.

The case was referred to the Restorative Hub by the police officer with the agreement of all concerned. In a safe and structured face to face meeting H explained his actions to the parents who in turn were able to let him know of the impact of those actions on them and their children. H was shocked that his behaviour had caused such significant harm upon as many people, and especially children.

The parents were better able to understand H and thanked him for his honesty and were pleased that he was not being further criminalised. They could then tell the children that they had met 'the man that did it' and that he was "really sorry", which helped greatly in their recovery.

All agreed that they were pleased to have taken part and that a weight had been lifted from their shoulders. The family asked for an update in three months' time on H's behaviour, as only a period of not getting into trouble would be full proof that he had learned from this experience. This was agreed and the police confirmed that H had been in no further trouble, was doing well in school and was not associating with the same peer group.

## Case Study 2 – Project Beta

C was released from prison in 2019 after serving a period of 5 years in custody. He had been institutionalised for most of his adult life within prison and approved premises leading to him not having the skills to manage independently in the community and in his own tenancy.

At the age of 16 C became reliant on drugs and alcohol which played a part in his offending behaviour. C's family relations broke down due to his offending behaviour, reliance on substances and recalls back to custody. On release from custody he was completely isolated from any family members or support network.

C was diagnosed with ADHD (attention deficit hyperactivity disorder) as a child, which had not been addressed. During his time in custody he was diagnosed with personality disorder, memory loss, paranoia but did not have the opportunities to access support.

On C's release, he was directed to Approved Premises where he received weekly visits to establish support needs and put a support plan in place. Through these visits it was established that he was institutionalised and would not be able to sustain a tenancy independently. Supported accommodation referrals were submitted but were rejected due to the risk being deemed too high.

A housing provider agreed to meet with C and it was apparent to their staff that C has the motivation to make positive changes to his life, but this had to be considered alongside the risk he posed to other residents. C was offered a space in semi-detached, self-contained property where he would be sharing with another resident.

It was identified that support was needed for his drug and alcohol addiction, mental health and social isolation which was progressed through regular multi agency meetings. C has now been in the community since October 2019 and sustained his tenancy with supported accommodation. C has committed no further offences and is ready to move into independent accommodation.

C has become a mentor and role model for the other residents and C is now being supported to apply for social housing as a move on plan.

<b>Strategic Priority 4</b>	<b>Reduce Reoffending</b>	
<b>Work Areas</b>	<b>Prevent offending and inter-generational offending</b>	<b>Prevent reoffending</b>
<b>Core Deliverables</b>	<p><b>Objectives</b></p> <ul style="list-style-type: none"> <li>• Identify those at risk of offending and ensure appropriate support is in place to break the cycle of intergenerational offending</li> <li>• Implement early intervention strategies with the aim to divert individuals from the Criminal Justice system</li> <li>• Implement targeted interventions for those who are repeat offenders</li> <li>• Ensure critical pathway evidence informs needs-based solutions using integrated offender management principles</li> </ul> <p><b>Prevention</b></p> <ul style="list-style-type: none"> <li>• Building our “Think Family” approach for offenders and their families</li> <li>• Aligning criminal justice interventions with children and family support initiatives to maintain links with children and families of offenders</li> </ul> <p><b>Early Intervention</b></p> <ul style="list-style-type: none"> <li>• Supporting young people to intervene as early as possible to educate and divert young people from crime</li> <li>• Encouraging appropriate use of diversion for adults such as first-time offenders</li> </ul> <p><b>Targeted Intervention</b></p> <ul style="list-style-type: none"> <li>• Ensuring those offenders posing highest risk to the community are within scope of Integrated Offender Management (IOM) arrangements</li> <li>• Increasing effective community orders and alternatives to short term custodial sentences</li> <li>• Promote the safe transition and effective integration into communities from prison</li> <li>• Ensure restorative approaches are used when working with people who offend</li> <li>• Develop a whole system approach for females who offend</li> </ul> <p><b>Effective Pathways</b></p> <ul style="list-style-type: none"> <li>• Working in partnership to improve referrals and services which address the pathways to enable effective intervention throughout the criminal justice process (priorities in accommodation, drugs, alcohol, mental health)</li> <li>• Understand where gaps in service provision are, across the whole system, and working in partnership to fill them</li> </ul>	
<b>Delivery plan mechanism</b>	<b>Reducing Reoffending Strategy</b>	

## **Strategic Priority 5: Alcohol and substance misuse reduction**

Areas of work included under this priority are:

- Prevention and early intervention
- Providing specialist interventions to promote recovery
- Protecting children and vulnerable adults at risk
- Strengthening leadership, management and governance

### **Evidence base**

- There are around 2,800 opiate and crack users (OCUs) in County Durham. The rate is statistically significantly lower than the North East but not significantly different to England.
- Unmet need for OCUs (estimate of the proportion OCUs not currently in treatment) for OCUs is lower in County Durham than England, but for crack users alone, it is higher.
- Drug related incidents increased by 32% between 2015/16 and 2019/20. In the first quarter of 2020/21 incidents have continued to increase and stand at 3.4% down slightly from Q1 2020/21 (4.1%).
- Between 2016/17 and 2019/20 the number of alcohol related ASB reduced by 3.5% but have increased to over 18% in the first six months of 2020/21.
- Between 2018/19 and 2019/20 Alcohol related violent crime increased almost 4% and violence against the person offences which are alcohol related have also increased to 5.5%.
- Historically, around 27% of all violent crime in County Durham is alcohol related. However, over 2019/20 and the first six months of 2020/21 we have seen alcohol related violent crime increase to over 30%.
- Drug poisoning related death rates fell by 12.7% compared to 2018, they are still statistically significantly higher in County Durham (10.6 per 100,000) than England (7.1), but lower than the North East (13.1).
- Drug misuse related death rates fell by 32.5% compared to 2018, they are still statistically significantly higher in County Durham (7.4 per 100,000) than England (4.7), but lower than the North East (9.1).

### **Why is it important?**

Although alcohol consumption per adult (aged over 15 years) has been declining since 2004, those that do drink are drinking at an increasing risk. Consumption habits have changed throughout the last two decades with twice as much alcohol now being sold from off-sales compared to the on-trade. Reasons for risks associated with alcohol include pre-loading and cheap alcohol sales, density of drinking establishments, high risk licensed premises and vertical drinking premises as well as changes in consumption habits.

Although alcohol related incidents such as public order, criminal damage or violence have been fluctuating since they peaked in July 2018, they still present a significant demand on resources.

Alcohol is noted as a factor in many incidents of domestic abuse, sexual violence and child exploitation. The use of alcohol is also a significant factor in why children suffer from neglect or harm. Alcohol misuse causes harm to people's health including their mental health and can impact on the ability of individuals to access or sustain employment.

Drug dependency continues to be a significant driver of acquisitive crime, causing a high demand on resources. There has also been an increase in vulnerable child and vulnerable adult incidents which are drug related. Drug related violence against the person accounted for a significant portion of all drug related crime and drug offences have increased when compared with 2017/18. Crime and drug trafficking offences have increased significantly for the same period.

Drug misuse is a serious issue not only to the health and wellbeing of the individual that is affected by it, but that of their families and the wider community. The levels of substance misuse related deaths continue to rise on a national basis, with a significant number being attributed to prescription medication, cocaine and alcohol use. Death rates in County Durham have reduced during 2019/20 (ONS, 2020) to the lowest in the NE region.

Tackling drug misuse requires a co-ordinated approach involving a whole range of partners. It is not just the responsibility of organisations, however; individuals and the wider community all have a role to play in reducing and preventing drug misuse.

Partners will work together to reduce alcohol and drug misuse, campaigning in partnership for changes in the law around minimum unit pricing and tackling the organised crime groups who supply illegal drugs. Preventing further misuse of drugs and alcohol is also an area of focus for the Health and Well Being Board.

Research undertaken during the Covid-19 pandemic has found that consumption of alcohol increased across the country during the lockdown restrictions. The Global Drug Survey found UK drinkers started drinking earlier in the day, having more drinking days and found more evidence of binge drinking.

It is difficult to comment on drug use during Covid-19 , but the heroin market is reported to be reasonably stable nationally; although some areas are reporting long waiting times and reduced quality. Whilst crack and cocaine purity appear stable in the majority of regions.

The rise in mental ill health during the Covid-19 response linked to socio-economic factors, job insecurity, debt, bereavement, social isolation and moral injury may also have implications for any future rise in levels of substance misuse.

## Case Study – Drugs and alcohol

J was referred to the Humankind Drug/Alcohol Service via their Community Rehabilitation Company (CRC) Officer, for a court-imposed Alcohol Treatment Requirement (ATR) for domestic violence. J had previously worked with the service on a number of occasions; however, he always dropped out. He had previously spent time in custody for a number of violence-related offences.

J was claiming job seekers allowance and when he got paid, he would binge drink on a bottle of vodka daily for 4 - 5 days. Then as his money is depleting, they would buy strong cider following that. The only time he didn't drink was because he had run out of money. He also bought cannabis weekly and used street diazepam when he had no alcohol as he had difficulty sleeping. J experienced some withdrawals. During his abstinent days, he complained of anxiety, stomach cramps, restlessness and sweats and had blacked out whilst drinking.

J had excellent attendance with the service and had commenced on an alcohol reduction plan using a drink diary and utilising the resources of an alcohol workbook, which offers both visual and textualised content related to the issues that surround alcohol abuse. The workbook was sent to J via post, as face to face contact had been suspended due to the Covid-19 pandemic.

J was still in a relationship, that at times, can cause him stress and he had previously used alcohol as a coping mechanism, however due to the work completed with Humankind and his alcohol consumption had reduced dramatically.

J attended two pre-recovery group meetings online via zoom every week for four weeks until he had reduced his alcohol and drug consumption to zero. He then embarked on a Reducing Alcohol and Drugs (RAD) programme, which, comprised of a 12-week community recovery programme for individuals who are no longer drinking, or taking substances and worked on gaining skills and knowledge to maintain his recovery in the community.

Strategic Priority 5	Alcohol and Substance Misuse Reduction			
Work Areas	Prevention and early intervention	Providing specialist interventions to promote recovery	Protecting children and vulnerable adults at risk	Strengthening leadership, management and governance
<b>Core Deliverables</b>	<ul style="list-style-type: none"> <li>Contribute to the reduction of the availability and supply of illicit drugs and counterfeit alcohol addressing community perceptions</li> <li>Increase early identification and support for those affected by alcohol and drugs across the life course within a range of settings (Making Every Contact Count)</li> <li>Improve the quality and consistency of information and education about alcohol and drugs in a variety of settings including schools, colleges, University, wider community and the workplace</li> <li>Promote responsible management of licensed premises through effective implementation of the Licensing Act 2003 and best practice interventions</li> </ul>	<ul style="list-style-type: none"> <li>Promote harm reduction messages for the reduction of alcohol intake, promote needle exchange activities and overdose prevention (including naloxone provision) within a range of settings</li> <li>Ensure that individuals, families and wider partners have access to high quality information on support options available, with specific targeting for marginalised groups</li> <li>Provide drug and alcohol specialist services to provide holistic package of care within a range of settings</li> <li>Monitor outcomes for service delivery via the National Drug Treatment Monitoring System (NDTMS)</li> </ul>	<ul style="list-style-type: none"> <li>Contribute to the effectiveness of safeguarding and risk management arrangements for children, young people and adults where substance misuse is a factor, including overdose and substance misuse related death, those at risk of domestic abuse and sexual exploitation</li> <li>Provide effective interagency responses for those experiencing severe and multiple disadvantage substance misuse, offending, homelessness, mental health, long-term chronic conditions</li> <li>Strengthen an integrated approach to providing support for children and families affected by parental substance misuse (cross reference with prevention and early intervention) utilising a Think Family approach</li> </ul>	<ul style="list-style-type: none"> <li>Review the Alcohol Declaration for Safe Durham Partnership</li> <li>Promote information sharing across all partnership agencies</li> <li>Ensure there are links to other strategic plans e.g. Tobacco Plan</li> <li>Prioritise the voice of the service user to ensure the service is effective</li> </ul>
<b>Delivery plan mechanism</b>	<b>Alcohol and Drugs Harm Reduction Strategy</b>			

## Strategic Priority 6: Tackle and prevent cyber enabled crime

Areas of work included under this priority are:

- Raise awareness of the general population about staying safe online
- Reduce risk to the most vulnerable groups
- Build resilience of local businesses to the threat of cyber crime

### Evidence base

- The Cyber Security Breaches Survey 2020 indicates that almost half of businesses (46%) and a quarter of charities (26%) report having cyber security breaches or attacks in the last 12 months, at an average cost of around £3,230.
- For the year ending June 2020 the Telephone-operated Crime Survey for England and Wales (TCSEW) estimated that there were 5.9 million cybercrimes, 73% were fraud offences and 27% were related to computer misuse.
- Estimates showed that there were 733,967 fraud offences and 29,138 computer misuse offences referred to National Fraud Intelligence Bureau in the year ending June 2020.
- Within plastic card frauds, there was a 58% increase in “remote banking” fraud which reflects the greater number of people now regularly using internet, telephone and mobile banking, and the attempts by fraudsters to take advantage of this. The two highest-volume computer misuse types were “Hacking – social media and email” and “computer viruses and malware”.
- The coronavirus (COVID-19) pandemic is likely to have had differential effects on trends in fraud and computer misuse offence, for example Action Fraud reported the increase in “online shopping and auctions” fraud could be accounted for by the increase in online shopping whilst the decrease in “other advance fee” fraud could be attributed to reduction in holiday fraud figures as fewer holidays were booked. However, it is too early to say whether this is evidence of a change to longer-term patterns.

<https://www.ons.gov.uk/peoplepopulationandcommunity/crimeandjustice/bulletins/crimenenglandandwales/yearendingjune2020#computer-misuse>

### Why is it important?

Advances in technology and cyber related crime, impacts across virtually all areas of policing. It is an enabler of crime, such as fraud, harassment, child sexual abuse and exploitation or pure cyber-dependent crime and is also a source of significant amounts of data, in both an online and offline context.

There have been increases in cybercrime and fraud due to the Covid-19 pandemic as many people are now working from home and using the internet more than ever. National reports suggest increases in fraud especially targeting elderly vulnerable people (Action Fraud, 2020). There have also been a number of scams directly relating to Covid-19 as criminals exploit the vulnerabilities of people living in the pandemic.

The impact on policing is significant, particularly in terms of maximising capability to exploit investigatory opportunities and capture evidence as part of investigations that are proving more complex. In relation to fraud offences key concerns are around under reporting, particularly in relation to the business sector where there may be a reluctance to report crimes due to reputational damage.

Targeting of individual victims is increasing and particularly among vulnerable groups. This has increased dramatically during the Covid-19 pandemic. It is important to protect individuals and organisations from becoming victims through ensuring our communities have the knowledge and ability to protect themselves against cyber-enabled fraud and crime. Every victim coming to the attention of the victim and advice service is offered information with regard to prevention of cybercrime and targeted preventative work that is being carried out by both the force and the local authority.

The huge growth in technology and digital communications has enhanced society and quality of life for everyone. However, it comes with clear risks to homes and businesses, as cyber-fraud increases and there are new patterns of criminal activity all the time.

The significant risks associated with cybercrime alongside the widely estimated understanding that the majority of cyber-attacks are preventable, make good practice critically important.

Through the Safer Cyber Working Group, the Safe Durham Partnership will look to support and deliver this strategic priority across the partnerships structures and community sectors.

Collaboration and partnership working is needed across the county to enhance our capability to tackle cybercrime and cyber-enabled crime, which is thought to be largely under-reported. This will include programmes to raise awareness and educate communities, including the business sector, to protect themselves against cyber-enabled crime.

## **Case Study 1 – Cyber Crime**

Thirteen-year-old J was referred to the intervention workshop after hacking into a bank account and receiving a caution by the police.

J said: “I like making and breaking stuff and messing around online. “I hacked a bank account and the police came to my school. My parents were shocked I suppose.”

Discussions led to J taking part in the pilot North East cyber workshop where he worked with other young people in similar situations and was made aware of the serious implications of this activity. He was shown how he can enjoy a lucrative and legitimate career out of his interest whilst sticking to the right side of cyber law.

J has not been in trouble since this intervention took place.

## **Case Study 2 – Cyber Crime**

A is a 70-year-old man who lives alone. A was contacted by an unknown person who said he was from his local bank. A was informed that his bank account had been ‘hacked’ and he was at risk of losing all his money. He was asked to open his online bank account in order that a new and safe account could be opened to transfer his funds to. A followed the instructions he was given believing he was keeping his money safe.

Later it transpired that A had via his online bank account transferred all his money into an account controlled by the fraudulent bank staff member. A considerable amount of money had been stolen and the bank were unable to recover that money or make a refund.

A was referred to the Victim Care and Advice Service (VCAS), who gave him immediate emotional support, and the opportunity to talk about the issues affecting him. He felt embarrassed that he been ‘caught out’ so easily, and felt uneasy with regard to the fraudster knowing who he was and where he lived as he felt that he may be targeted in his own home. Advice and support was given with regard to his future online safety and reassurance with regard to his safety at home.

Arrangements were made to carry out a ‘Friends Against Scams’ presentation to A and a number of his friends at a local community group. As a consequence of the support provided A (and his friends) felt they would be more confident in identifying fraudsters both online and through other methods such as the telephone, he felt safer at home and less concerned about the embarrassment that he had suffered.

Strategic Priority 6	Tackle and prevent cyber enabled crime		
Work Areas	Raise awareness of the general population about staying safe online	Reduce risk to the most vulnerable groups	Build resilience of local businesses to the threat of cyber crime
<b>Core Deliverables</b>	<ul style="list-style-type: none"> <li>• Deliver awareness raising sessions of the risks and threats of cybercrime</li> <li>• Deliver a general understanding about digital hygiene through events, seminars, marketing and communications</li> <li>• Increase awareness of those in the public, voluntary and community sectors about protecting clients from becoming a victim</li> <li>• Increase confidence to report incidents of cyber-crime</li> </ul>	<ul style="list-style-type: none"> <li>• Collaborate with other partnerships to widely embed cyber-crime and exploit opportunities for joint working</li> <li>• Work with the voluntary and community sector to identify means of communicating cyber safety to those who have vulnerabilities (e.g. older people) i.e. <ul style="list-style-type: none"> <li>○ More secure passwords</li> <li>○ Up to date anti-virus software</li> </ul> </li> <li>• Work with education, youth support and other networks working with children and young people to identify those vulnerable to entering or remaining in cyber-crime activity</li> </ul>	<ul style="list-style-type: none"> <li>• Work with the business sector to promote Cyber Essentials and programmes of support as a means of protecting businesses from cyber crime</li> <li>• Work with the education sector to develop opportunities for raising awareness of cybercrime with students</li> <li>• Work with the business and education sector to provide advice on recovery after a cyber-attack and encourage businesses to develop business continuity plans</li> </ul>
<b>Delivery plan mechanism</b>	<b>Safer Cyber Working Group Action Plan</b>		

## **Enabling factors**

There are a number of enabling factors that are relevant to all actions in this strategy to ensure that it is delivered.

### **Strategic focus**

- Engage in cross cutting activity that enables access to external funding
- Aligned community priorities to strategic needs
- Develop innovative and effective interventions

### **Communication**

- Marketing and Communications takes place in collaboration across all organisations
- Effective information sharing protocols
- Promoting success

### **Performance Management**

- Strong analysis available to inform the local approach
- Performance framework to enable monitoring against outcomes, targets and delivery plan
- Comprehensive data sharing among partners
- Robust evaluation/assessment of utilised interventions

### **Knowledge and skills**

- Upskilling through shared knowledge and expertise
- Understanding partners roles and priorities
- Making use of all available tools and powers within the Home Office guidance and partner agencies

### **Partnership working**

- Shared resources
- Learning from best practice and commitment to replicate across the County and the community to be able to respond appropriately
- Working towards co-commissioning of services where appropriate
- Collaboration takes place within the public, private and voluntary sector
- Joint commissioning and pooling budgets where appropriate

### **Community Engagement**

- Engagement with communities
- A cohesive and integrated society where there is confidence to report issues
- Well established community groups willing to work with partners
- Building resilience and around empowering and enabling communities to feel safer
- Empowering communities to take actions to help make their own communities safer
- One of the biggest assets we have are communities and the non-statutory activity that already go on within them

## **Performance Management Framework**

While this Plan is ultimately owned by the Safe Durham Partnership, it is the subgroups which have a role in managing the associated actions, ensuring that they are delivered, as well as responding to any emerging trends or changes in crime and disorder patterns.

The Safe Durham Partnership has in place a Performance Management Framework structured around the strategic priorities. In addition to performance measures linked to the strategic priorities, the framework includes key indicators of crime for the Safe Durham Partnership to monitor activity trends in this area.

Performance management arrangements of the Safe Durham Partnership Plan are refreshed on an annual basis and incorporated into the Safe Durham Partnership Performance Management Framework. This ensures responsibility and accountability of the strategic actions within the Plan.

In addition, each group which supports the work of the Safe Durham Partnership has a specific action plan and performance management framework that directly supports the delivery of the Safe Durham Partnership Plan.

Each priority within the strategic plan has a separate S.M.A.R.T. (Specific, measurable, achievable, realistic and timed) delivery plan that is owned by a thematic subgroup and monitored regularly by the Safe Durham Partnership through the chairs of each subgroup.

## Appendix 1: Priorities and links to other partnership strategic plans.

Safe Durham Partnership priorities and alignment to other Strategic Partnership Plans					
Safe Durham Partnership	Children and Young People's Strategy 2019-22	Safeguarding Adults Board Strategic Plan 2018-21	Durham Safeguarding Children Partnership Business Plan 2019-20	County Durham Housing Strategy July 2019	Durham County Council Homelessness Strategy 2019-22
Promote being safe and feeling safe in your community		Prevention and early intervention		Maintain and improve standards across County Durham's housing stock and wider housing environment	
Support victims and protect vulnerable people from harm	Protect and support those children and young people in need of help and protection.	Prevention and early intervention	Reducing Child Sexual Exploitation/ Criminal Exploitation and Neglect	To provide housing advice, assistance & support for older & Vulnerable People	Provide a range of support services to reduce the risk of households becoming homeless
Prevent Strategy: Countering Terrorism, Radicalisation and Violent Extremism		Prevention and early intervention	Prevent children and young people from being drawn into terrorism.		
Reduce Reoffending	Provide support for young people who have offended or been victims of crime				
Alcohol and Substance Misuse Reduction	Improve health and wellbeing outcomes for children with a specific focus on vulnerable children and young people (5-24)				
Tackle and prevent cyber enabled crime					

## Safe Durham Partnership priorities and alignment to other Strategic Partnership Plans

Safe Durham Partnership	Durham Police, Crime and Victims Plan 2018-21	Cleveland and Durham Local Criminal Justice Partnership Plan 2018-21	Youth Justice Plan 2019-21	Joint Health and Wellbeing Strategy 2021-25
<b>Promote being safe and feeling safe in your community</b>	Tackle and prevent hate crime  Prevent and tackle anti-social behaviour  Improve community safety in rural areas	High public confidence in the criminal justice system		Living Well and Ageing Well
<b>Support victims and protect vulnerable people from harm</b>	Tackle and prevent domestic abuse and sexual violence in all their forms  Tackle and prevent fraud  Tackle and prevent modern slavery  Ensure that victims are supported at all stages of the criminal justice system	Positive outcomes for victims and witnesses	Putting victims, especially young victims, and Restorative Justice at the heart of everything we do	Starting Well, Living Well and Ageing Well
<b>Prevent Strategy: Countering Terrorism, Radicalisation and Violent Extremism</b>	Safeguard vulnerable people			Living Well and Ageing Well
<b>Reduce Reoffending</b>	Address the root causes of offending and support the rehabilitation of people who have offended	Reduce intergenerational and repeat offending	Targeting our resources on those young people committing the most offences	Living Well and Ageing Well
<b>Alcohol and Substance Misuse Reduction</b>	Reduce the harm caused by alcohol and drugs			Living Well and Ageing Well
<b>Tackle and prevent cyber enabled crime</b>	Tackle and prevent cyber-enabled crime			Living Well and Ageing Well

**Please ask us if you would like this document summarised in another language or format.**

العربية (Arabic) (中文 (繁體字)) (Chinese) اردو (Urdu)  
polski (Polish) ਪੰਜਾਬੀ (Punjabi) Español (Spanish)  
বাংলা (Bengali) हिन्दी (Hindi) Deutsch (German)  
Français (French) Türkçe (Turkish) Melayu (Malay)

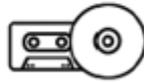
**03000 260 000**

**[help@durham.gov.uk](mailto:help@durham.gov.uk)**

Braille



Audio



Large print



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## Appendix 3: Safe Durham Partnership Plan Consultation Overview

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### Safer and Stronger Communities Overview and Scrutiny Committee:

The Safer and Stronger Communities Overview and Scrutiny Committee noted the content of the SDPP at their meeting on 1 March 2021. The Committee supported the plan's vision and priorities. The following comments were made by the committee that led to amendments within the document:

- Priority 1:
  - Off road motorcycle and quads were a particular issue in relation to anti-social behaviour and nuisance throughout the County and there was a request that these be mentioned within the plan.  
**Action – added a core deliverable to develop a partnership action plan to tackling nuisance motorcycles and quads.**
  - The committee also proposed that the issue around secondary fires should be a separate stand-alone priority and not encompassed within anti-social behaviour.  
**Action - Following discussion at the SDP Board this recommendation was agreed, and a separate work area was given to this issue titled Arson and Deliberate Fires with underlying actions developed by the Arson Suppression Group.**
- Priority 3:
  - The wording of the priority was confusing, Prevent: Counter terrorism and extremism as it sounded like the aim was to stop people countering this issue.  
**Action – Changed the wording to Prevent Strategy: Countering terrorism and extremism.**
- Priority 6:
  - The terminology used within the plan on a page mentioning digital hygiene was felt to be unclear and some people may not understand its meaning.  
**Action: Wording changed to cyber safety and some examples added.**

## Public Consultation:

There were 55 responses to the public consultation and 76% of respondents agreed with the plan overall and 23% neither agreed nor disagreed with the plan. Between 81% and 100% of respondents agreed with each of the separate six priorities.

The Partnerships Team Leader and the Apprentice Young People's Commissioner presented an animated video (designed by the Apprentice Young People's Commissioner) to the County Durham Youth Council via Microsoft Teams plus a question and answer session. This included questions and comments relating to extremism, cyber security and reducing re-offending. The Youth Council were encouraged to respond to the consultation.

There was a marked difference in the age ranges who responded to the consultation, with approximately 30% of the respondents being between the ages of 11 and 15. This is primarily due to the Microsoft Teams based consultation and discussion that took place with the County Durham Youth Council who were fully engaged in the consultation process.

General feedback from the consultation included the following:

- The importance of involving residents and the community when making decisions.
  - This links in with the approach to wellbeing highlighted within the plan.
- Fear of hate crime related abuse was another area of concern raised by a resident.
  - Tackling hate crime and community tensions are work areas key areas identified within the plan. The following are examples of key deliverables within the plan that will help address this concern:
    - Develop a multi-agency communications strategy, demonstrating a cross-organisation and cross-sector approach, including a message that there should be zero-tolerance of hate crime. This to be aimed at all sections of society.
    - Increase reporting of hate incidents through the Hate Hurts Campaign.
- There were concerns raised about vulnerable people being isolated and unable to access services.

- Supporting victims and protecting vulnerable people is a work area within the plan. The following are examples of key deliverable within the plan that will help address this concern:
  - To provide co-ordinated end to end care and support for victims and ensure effective pathways and timely support are in place.
  - All young people who become a victim or witness are offered appropriate support.

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# Durham County Council Equality Impact Assessment

**NB:** The Public Sector Equality Duty (Equality Act 2010) requires Durham County Council to have ‘due regard’ to the need to eliminate unlawful discrimination, harassment and victimisation, advance equality of opportunity and foster good relations between people from different groups. Assessing impact on equality and recording this is one of the key ways in which we can show due regard.

## Section One: Description and Screening

<b>Service/Team or Section</b>	Neighbourhoods and Climate Change
<b>Lead Officer</b>	Andrea Petty, Strategic Manager
<b>Title</b>	Safe Durham Partnership Plan 2021-25
<b>MTFP Reference (if relevant)</b>	N/A
<b>Cabinet Date (if relevant)</b>	
<b>Start Date</b>	11/12/20
<b>Review Date</b>	

## Subject of the Impact Assessment

Please give a brief description of the policy, proposal or practice as appropriate (a copy of the subject can be attached or insert a web-link):

### **The Safe Durham Partnership Plan 2021-2025**

The Crime and Disorder Act 1998 placed a statutory duty on local authorities to create Partnerships to tackle crime, disorder, anti-social behaviour, substance misuse, other behaviour adversely affecting the local environment and to reduce re-offending. This is a multi-agency action plan co-ordinated by the Safe Durham Partnership

Protecting vulnerable children and adults is a key priority for the Safe Durham Partnership; and it is important that there are close links with the Safe Durham Partnership Board and the statutory Durham Safeguarding Children’s Partnership and the Safeguarding Adults Board.

Supporting the County Durham vision, we will protect vulnerable people who are often victims of crime. All victims will be offered support to cope and recover from

their ordeal at all stages and to engage in the justice system. We will provide support to young offenders and young victims of crime.

Together we want to build safer and stronger communities where people feel able to get involved, help themselves and support each other no matter what their background. We will work together to tackle crime and anti-social behaviour adversely affecting our communities and to address the underlying causes of crime and community tensions. We will actively take steps to encourage community cohesion and mark specific events which encourage greater understanding of each other to promote good relationships. We want to work with communities to solve problems together and develop local solutions that will work.

County Durham's Police, Crime and Victims' Commissioner is elected by local people to represent their views, to set objectives for the Chief Constable in a Police and Crime Plan, and to hold them to account for their delivery. The Safe Durham Partnership Plan has been developed in close collaboration with the Police, Crime and Victims' office, drawing on a clear body of evidence and understanding of the needs of communities in County Durham. The priorities which each plan sets are therefore aligned, and the partners work closely to ensure they are delivered to meet the needs of our local communities.

The Plan also identifies how the partnership will respond to the impact of national policy changes and new and emerging risks, such as the rise in cyber enabled crime, countering terrorism at a local level and helping to safeguard individuals at risk of radicalisation.

Having a clear plan focuses efforts on the most important issues for our area and means that there is a greater opportunity to succeed and make a tangible difference to the quality of life of the communities within County Durham.

For those responsible for delivering services, any future work programmes should contribute to achieving the objectives set out in this strategy. The Plan is therefore a living document that is designed to be used regularly.

The 6 Strategic Objectives and underlying priorities are as below:-

1. Promote being safe and feeling safe in your community
  - Anti-Social Behaviour
  - Safer Homes
  - Road Safety
  - Hate Crime and Community Tension
  
2. Support victims and protect vulnerable people from harm

- Domestic Abuse and Sexual Violence
  - Organised Crime; County lines
  - Victims
3. Prevent Strategy; Countering Terrorism, Radicalisation and Violent Extremism
- Prevent people being drawn into terrorism
  - Support the work to strengthen our protection against terrorist attacks and mitigate the impact of such an attack
4. Reduce Re-offending
- Prevent offending and inter-generational offending
  - Prevent reoffending
5. Alcohol and Substance Misuse Reduction
- Prevention and early intervention
  - Providing specialist interventions to promote recovery
  - Protecting children and vulnerable adults at risk
  - Strengthening leadership, management and governance
6. Tackle and prevent cyber enabled crime
- Raise awareness of the general population about staying safe online
  - Reduce risk to the most vulnerable groups
  - Build resilience of local businesses of the threat of cyber crime

Who are the main stakeholders? (e.g. general public, staff, members, specific clients/service users):

General public / Elected Members / Partners  
 Community individuals and groups (including voluntary organisations) – community safety can affect everybody including local residents, those working, educated in or

visiting the borough, and businesses. The risk and potential risk for victimisation, or becoming involved in offending, can vary by crime problem (i.e. burglary, violent crime), location, socio-economic status, age, gender, ethnicity, sexual orientation and disability for example.

## Screening

Is there any actual or potential negative or positive impact on the following protected characteristics?

Protected Characteristic	Negative Impact Indicate: Y = Yes, N = No, ? = unsure	Positive Impact Indicate: Y = Yes, N = No, ? = unsure
Age	N	Y
Disability	N	Y
Marriage and civil partnership (workplace only)	N	N
Pregnancy and maternity	N	N
Race (ethnicity)	N	Y
Religion or Belief	N	Y
Sex (gender)	N	Y
Sexual orientation	N	Y
Transgender	N	Y

Please provide **brief** details of any potential to cause adverse impact. Record full details and analysis in the following section of this assessment.

The Partnership Plan is the statutory strategy for reducing crime and disorder, reducing the harm caused by substance misuse, reducing anti-social behaviour and other behaviour adversely affecting the environment and reduce re-offending. It therefore does not have any potential to cause negative impact.

How will this policy/proposal/practice promote our commitment to our legal responsibilities under the public sector equality duty to:

- eliminate discrimination, harassment and victimisation,

- advance equality of opportunity, and
- foster good relations between people from different groups?

The Partnership Plan is a statutory requirement under the Crime and Disorder (Formulation and Implementation of Strategy) Regulations (amended) 2011. The Safe Durham Partnership is required to make arrangements for obtaining the views of persons and bodies who live or work in the area about the levels and patterns of crime and disorder and substance misuse in the area; and the matters which should be prioritised for the area. So far as is reasonable, the Safe Durham Partnership must consult with persons who appear to represent the interests of as many different groups or persons within the area as is reasonable; and persons who appear to the strategy group to represent the interests of those groups or persons within the area likely to be particularly affected by the implementation of the partnership plan.

## Evidence

What evidence do you have to support your findings?  
Please **outline** your data sets and/or proposed evidence sources, highlight any gaps and say whether or not you propose to carry out consultation. Record greater detail and analysis in the following section of this assessment.

- National statistics, research and best practice
- Joint strategic needs assessment (JSNA)
- Durham Insight 2019
- Consultation undertaken with Area Action Partnerships (AAPs) during 2019
- Consultation with Safer, Stronger Communities Overview and Scrutiny Committee in 2019
- The Police, Crime and Victims' Plan 2018-2021
- Durham Constabulary Strategic Assessment 2019
- Youth Justice Plan 2017/19
- <https://www.durham-pcc.gov.uk/Document-Library/Performance-reports/2018-19-Quarter-1.pdf>
- CTLP (Counter Terrorism Local Profile) 2019/20
- Alcohol Harm Reduction Strategy 2015-2020
- County Durham Drug Strategy 2014 - 2017

## Screening Summary

On the basis of this screening is there:	Confirm which refers (Y/N)
Evidence of actual or potential impact on some/all of the protected characteristics which will proceed to full assessment?	Y
No evidence of actual or potential impact on some/all of the protected characteristics?	N

## Sign Off

Lead officer sign off: Andrea Petty, Strategic Manager Partnerships	February 2021
Service equality representative sign off: Mary Gallagher, Equality and Diversity Team Leader	February 2021

If carrying out a full assessment please proceed to section two.

If not proceeding to full assessment please return completed screenings to your service equality representative and forward a copy to [equalities@durham.gov.uk](mailto:equalities@durham.gov.uk)

If you are unsure of potential impact please contact the corporate research and equalities team for further advice at [equalities@durham.gov.uk](mailto:equalities@durham.gov.uk)

## Section Two: Data analysis and assessment of impact

Please provide details on impacts for people with different protected characteristics relevant to your screening findings. You need to decide if there is or likely to be a differential impact for some. Highlight the positives e.g. benefits for certain groups, advancing equality, as well as the negatives e.g. barriers for and/or exclusion of particular groups. Record the evidence you have used to support or explain your conclusions. Devise and record mitigating actions where necessary.

Protected Characteristic: <b>Age</b>		
What is the actual or potential impact on stakeholders?	Record of evidence to support or explain your conclusions on impact.	What further action or mitigation is required?
This plan will have a positive impact for young people.	<p><b>CD YOS Youth Justice Plan 2017/19</b></p> <p>Since 2007/08, the number of young people entering the criminal justice system has reduced by 89.4%.</p> <p>Since 2010/11 the number of young people committing offences has reduced by 69.2%, and the number of offences has reduced by 56.6%. The number of young people re-offending and the number of offences they commit have also reduced.</p>	<p>Communicate successes in order to build confident communities</p> <p>Clear use of a partner problem solving approach to improve the delivery of agile interventions utilising the Local Multi-agency Problem Solving (LMAPS) process.</p> <p>Collaboration with Area Action Partnerships and the Voluntary and Community Sector in tackling long term anti-social behaviour</p> <p>Identify those at risk of offending and ensure appropriate support is in place to break the cycle of intergenerational offending</p> <p>Implement early intervention</p>

		<p>strategies with the aim to divert individuals from the Criminal Justice system and promote positive outcomes for victims</p> <p>Ensure critical pathway evidence informs needs-based solutions using integrated offender management principles Effective Pathways</p> <p>Building our “Think Family” approach for offenders and their families</p> <p>Using and improving pathways to enable effective intervention throughout the criminal justice process including integrated offender management</p> <p>Understanding where gaps in service provision are, across the whole system, and working in partnership to fill them</p> <p>Develop an improved understanding of the needs profile of females who offend</p>
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		<p>Supporting the development and use of the Restorative Justice Hub</p> <p>Ensuring restorative approaches are used when working with people who offend</p> <p>Embedding the work of the RJ Hub among partner agencies</p> <p>Engaging with volunteers where appropriate and developing their skills</p> <p>Developing and promoting victim involvement within restorative practice</p> <p>Use and completion of sentences / orders</p> <p>Using full range of diversion and sentencing powers / orders by courts</p> <p>Rehabilitative and safe use of custody / prison</p> <p>Raising awareness of the links between re-offending and sentencing</p>
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<p>Prevent young people being drawn into County Lines exploitation.</p>	<p><b>Durham Constabulary Strategic Assessment 2019</b></p> <p>County Lines MoRiLE score is 42, ranked 25th. Key Threats and Information Gaps: County Lines footprint is not fully understood, known criminality includes use of violence to intimidate drug users. Potential violence involving existing dealers/OCGs. Knowledge of vulnerable persons linked to County Lines not fully understood.</p>	<p>Ensuring those offenders posing highest risk to the community are within scope of IOM arrangements</p> <p>Working in partnership to deliver range of desistance provision for offenders and families</p> <p>Work with the Durham Safeguarding Children Partnership to raise awareness with staff and partners of what is county lines, what to look for and where to report concerns and intelligence</p> <p>Appropriate agencies to disrupt the organised criminal gangs involved in this activity effectively</p> <p>To raise awareness and explain the nature of this harm to enable practitioners to recognise its signs and respond appropriately so that potential victims get the support and help they need</p>
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<p>Prevent young people being drawn into radical extremism and committing acts of terrorism.</p>	<p>CTLP (Counter terrorism Local Profile). Restricted document there only a general statement used below.</p> <p>A majority of the people referred to the Prevent Team were males under the age of 18.</p>	<p>Shared resources across all specified authorities</p> <p>Upskilling through shared knowledge and expertise</p> <p>Making use of all available resources within the Home Office and partner agencies (i.e. Criminal Exploitation of children and vulnerable adults: County Lines guidance 2018, Serious Violence Strategy April 2018)</p> <p>Identify the threat and vulnerability from terrorism and extremism relating to terrorism in County Durham</p> <p>Raise awareness of the importance of reporting suspicious incidents among professionals and the community</p> <p>Collaborate with the Local Resilience Forum and County Durham Safety Advisory Group on issues of Prevent, Protect and Prepare</p> <p>Raise awareness of how to protect</p>
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<p>Prevent young people being drawn into committing acts of cyber enabled crime and being exploited both criminally and sexually.</p>	<p><b>Durham Constabulary Strategic Assessment 2019</b></p> <p>Child Sexual Abuse and Exploitation (CSAE)  MoRiLE scores and ranks:  CSAE Online model 75, ranked 15th; CSAE Lone offenders 72, ranked 16th; CSAE Group offenders 72, ranked 17th.  Key Threats: Online offences against children remain a threat in force area – also raised in Cybercrime section. Concern that risk may be downplayed if online offences are viewed as less harmful. Contact CSAE offences largely committed by persons known to the child, particularly within the family unit, continue to pose high risk. Peer exploitation continues to be area of concern, young offenders of CSAE continue to pose a risk. Capacity often results in prioritisation of high risk cases being addressed by police and partners.  Key Trends: an emergence over time in male victims of CSAE has been seen through crime recording and Health partners. Online model offences are a growth area, with many contact offences also containing an online element.  Key Risks: Increased forecasted demand in relation to sexual offences against children. Group offending – potential for multiple victims and offenders to be uncovered. Online Child</p>	<p>crowded places from, and respond to, a terrorist attack</p> <p>Deliver awareness raising sessions of the risks and threats of cybercrime</p> <p>Deliver a general understanding about digital hygiene through events, seminars, marketing and communications</p> <p>Increase awareness of those in the public, voluntary and community sectors about protecting clients from becoming a victim</p> <p>Increase confidence to report incidents of cyber-crime</p> <p>Collaborate with other partnerships to widely embed cyber-crime and exploit opportunities for joint working</p> <p>Work with the voluntary and community sector to identify means of communicating digital hygiene to those who have particular vulnerabilities (e.g. older people)</p>
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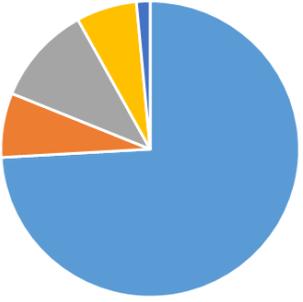
	<p>Abuse Activist Groups activity considered to be low in force area but this is not tested.</p>	<p>Work with education, youth support and other networks working with children and young people to identify those vulnerable to entering or remaining in cyber-crime activity</p> <p>Work with the education sector to develop opportunities for raising awareness of cybercrime with students</p> <p>Contribute to the effectiveness of safeguarding and risk management arrangements for children, young people and adults where substance misuse is a factor, including overdose and substance misuse related death, those at risk of domestic abuse and sexual exploitation.</p> <p>Provide effective interagency responses for those experiencing severe and multiple disadvantage substance misuse, offending, homelessness, mental health, long-term chronic conditions</p>
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<p>Safeguard young people from the direct and indirect effects of drugs and alcohol.</p>	<p><b>Alcohol Harm Reduction Strategy 2015-2020</b></p> <p>The rate of alcohol specific hospital admissions for under-18s has reduced over time by 45.9% from 129.0 per 100,000 population in 2006/07-2008/09 to 69.9 per 100,000 population in 2010/11-2012/13. This equates to 185 less young people admitted to hospital in the most recent three year period. Although the rate for under-18 hospital admissions in County Durham remains significantly higher than the rest of England (40.1 per 100,000) the gap has narrowed. Out of the 12 local authorities in the North East County Durham has the 6th highest rate of under-18 hospital admissions.</p> <p>An estimated 19,000 alcohol-related sexual assaults occur each year in England and Wales. Many of those committing sexual assaults have consumed alcohol prior to the incident and in some cases are alcohol dependent. Furthermore, many victims of</p>	<p>Strengthen an integrated approach to providing support for children and families affected by parental substance misuse (cross reference with prevention and early intervention) utilising a Think Family approach</p> <p>Contribute to the effectiveness of safeguarding and risk management arrangements for children, young people and adults where substance misuse is a factor, including overdose and substance misuse related death, those at risk of domestic abuse and sexual exploitation.</p> <p>Provide effective interagency responses for those experiencing severe and multiple disadvantage substance misuse, offending, homelessness, mental health, long-term chronic conditions</p> <p>Strengthen an integrated approach to providing support for children and</p>
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	<p>sexual assault have been drinking prior to the event. Research suggests that, in night-life settings, rapists specifically target intoxicated young women due to their vulnerable state. (Faculty of Public Health, 2005).</p> <p>Men and young people (18-34 years) are more likely to be profiled as increasing/high risk drinkers (Balance, 2013). Consultation undertaken locally with men 25-44 concluded that this population are not concerned about their level of drinking (Explain, 2014).</p> <p>Young people are more likely to experience poor outcomes due to their own alcohol consumption than any other age group. Under-18 alcohol specific admission rates are significantly higher in County Durham than England. The rates are the 18th worst in the Country (LAPE, 2014). Rates have been falling over time in County Durham, the North East and England. Proportionally this decrease has been greater in County Durham (37%) than the North East (35%) and England (34%).</p> <p><b>County Durham Drug Strategy 2014 - 2017</b></p> <p>During 2012/13, 151 referrals were made to Young People Substance Misuse service for an intervention relating to their primary substance misuse. This equated to 57% of all referrals received by the service during 2012/13,</p>	<p>families affected by parental substance misuse (cross reference with prevention and early intervention) utilising a Think Family approach</p>
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	<p>compared with 43% for primary problematic alcohol use.</p> <p><b>Durham Insight Substance misuse fact sheet.</b></p> <p>In 2015/16, around 1 in 12 (8.4 per cent) adults aged 16 to 59 had taken an illicit drug in the last year. This equates to around 2.7 million people. This level of drug use was similar to the 2014/15 survey (8.6 per cent), but is significantly lower than a decade ago (10.5 per cent in the 2005/06 survey). In 2014, 15 per cent of pupils had ever taken drugs, 10 per cent had taken drugs in the last year and 6 per cent had taken drugs in the last month. The prevalence of drug use increased with age. 6 per cent of 11 year olds said they had tried drugs at least once, compared with 24 per cent of 15 year olds.</p>	
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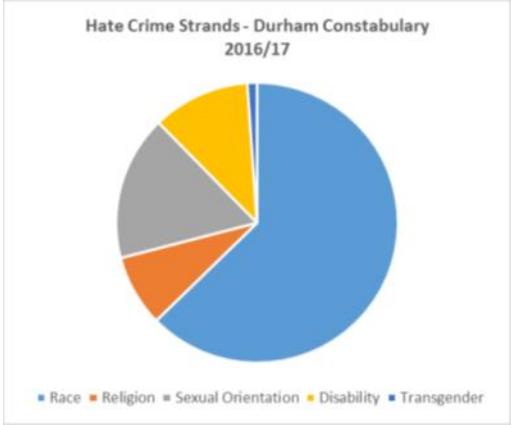
Protected Characteristic: <b>Disability</b>														
What is the actual or potential impact on stakeholders?	Explain your conclusion considering relevant evidence and consultation	What further action or mitigation is required?												
<p>This plan will have a positive impact in relation to disabled people, particularly tackling hate crime.</p> <p>The plan will ensure that victims are confident to report, and that once reported, the hate element is recognised so that support and safeguarding can be provided.</p>	<p>Hate Crime is an area of focus within the Police Crime and Victims' Plan and a Joint Hate Crime Action Group, chaired by the PCVCs office, is a multi-agency group that drives improvements in engagement, enforcement and partnership working to reduce the impact of hate crime in our area.</p> <p>Figures provided by the Durham Constabulary Community Cohesion Unit.</p> <p>Over the last 3 years hate crime has risen from 452 incidents and 456 crime to 520 incidents and 854 crimes.</p> <p>As can be seen in the figures below there (Latest information available). There is a significant difference within Durham proportionately compared to the over national picture for the number of Hate Crimes relating to disability.</p> <div data-bbox="555 1330 1066 1756" data-label="Figure"> <table border="1"> <caption>Hate Crime Strands - Durham Constabulary 2016/17</caption> <thead> <tr> <th>Strand</th> <th>Color</th> </tr> </thead> <tbody> <tr> <td>Race</td> <td>Blue</td> </tr> <tr> <td>Religion</td> <td>Orange</td> </tr> <tr> <td>Sexual Orientation</td> <td>Grey</td> </tr> <tr> <td>Disability</td> <td>Yellow</td> </tr> <tr> <td>Transgender</td> <td>Dark Blue</td> </tr> </tbody> </table> </div>	Strand	Color	Race	Blue	Religion	Orange	Sexual Orientation	Grey	Disability	Yellow	Transgender	Dark Blue	<p>Understand and reduce the true level of hate crimes and incidents in relation to disability.</p> <p>Increase reporting of hate incidents</p> <p>Develop a multi-agency communications strategy, demonstrating a cross-organisation and cross-sector approach, including a message that there should be zero-tolerance of hate crime. This to be aimed at all sections of society.</p> <p>Review of reporting mechanisms and pathways</p> <p>Review how organisations shared intelligence</p> <p>Review of the use of evidence to ensure effective prosecutions</p>
Strand	Color													
Race	Blue													
Religion	Orange													
Sexual Orientation	Grey													
Disability	Yellow													
Transgender	Dark Blue													

	<p style="text-align: center;">Hate Crime Strands - England and Wales 2016/17</p>  <p style="text-align: center;">■ Race ■ Religion ■ Sexual Orientation ■ Disability ■ Transgender</p>	<p>Map the support for victims and identify gaps in effective support</p>
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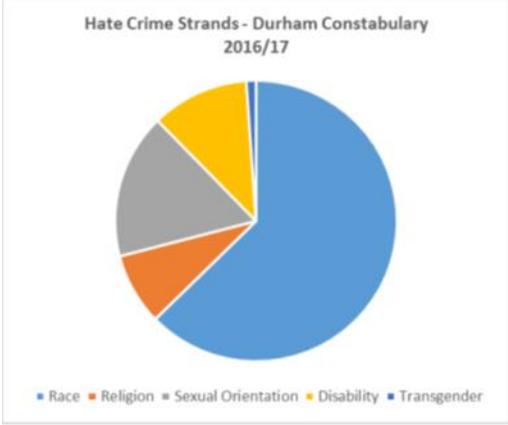
Protected Characteristic: <b>Marriage and civil partnership (workplace only)</b>		
What is the actual or potential impact on stakeholders?	Explain your conclusion considering relevant evidence and consultation	What further action or mitigation is required?
N/A		

Protected Characteristic: <b>Pregnancy and maternity</b>		
What is the actual or potential impact on stakeholders?	Explain your conclusion considering relevant evidence and consultation	What further action or mitigation is required?
None		

Protected Characteristic: <b>Race (ethnicity)</b>		
What is the actual or potential impact on stakeholders?	Explain your conclusion considering relevant evidence and consultation	What further action or mitigation is required?
<p>This plan will have a positive impact in relation to ethnicity, especially in relation to reporting and recording of Hate Crime.</p> <p>To ensure that victims are confident to report, and that once reported, the hate element is recognised so that support and safeguarding can be provided.</p>	<p>Hate Crime is an area of focus within the Police Crime and Victims' Plan and a Joint Hate Crime Action Group, chaired by the PCVCs office, is a multi-agency group that drives improvements in engagement, enforcement and partnership working to reduce the impact of hate crime in our area.</p> <p>Figures provided by the Durham Constabulary Community Cohesion Unit.</p>	<p>Understand and reduce the true level of hate crimes and incidents in relation to race.</p> <p>Increase reporting of hate incidents</p> <p>Develop a multi-agency communications strategy,</p>

	<p>Over the last 3 years hate crime has risen from 452 incidents and 456 crime to 520 incidents and 854 crimes.</p> 	<p>demonstrating a cross-organisation and cross-sector approach, including a message that there should be zero-tolerance of hate crime. This to be aimed at all sections of society.</p> <p>Review of reporting mechanisms and pathways</p> <p>Review how organisations shared intelligence</p> <p>Review of the use of evidence to ensure effective prosecutions</p> <p>Map the support for victims and identify gaps in effective support</p>
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Protected Characteristic: <b>Religion or belief</b>		
What is the actual or potential impact on stakeholders?	Explain your conclusion considering relevant evidence and consultation	What further action or mitigation is required?
The plan will have a positive impact, especially in relation to victims of Religious Hate Crime. To ensure that victims are confident to report, and that once reported, the hate element is recognised so that support and	Hate Crime is an area of focus within the Police Crime and Victims' Plan and a Joint Hate Crime Action Group, chaired by the PCVCs office, is a multi-agency group that drives improvements in engagement, enforcement and partnership working to reduce the impact of hate crime in our area.	Understand and reduce the true level of hate crimes and incidents in relation to religion.  Increase reporting of hate incidents

<p>safeguarding can be provided.</p>	<p>Figures provided by the Durham Constabulary Community Cohesion Unit.</p> <p>Over the last 3 years hate crime has risen from 452 incidents and 456 crime to 520 incidents and 854 crimes.</p> 	<p>Develop a multi-agency communications strategy, demonstrating a cross-organisation and cross-sector approach, including a message that there should be zero-tolerance of hate crime. This to be aimed at all sections of society.</p> <p>Review of reporting mechanisms and pathways</p> <p>Review how organisations shared intelligence</p> <p>Review of the use of evidence to ensure effective prosecutions</p> <p>Map the support for victims and identify gaps in effective support</p>
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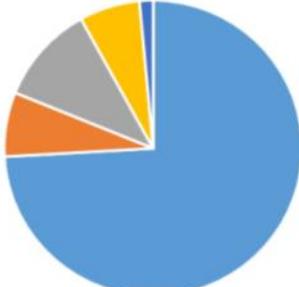
Protected Characteristic: <b>Sex (gender)</b>		
What is the actual or potential impact on stakeholders?	Explain your conclusion considering relevant evidence and consultation	What further action or mitigation is required?
<p>This will have a positive impact for both men and women who are victims of domestic abuse.</p> <p>To significantly reduce the number of repeat victims</p>	<p>Durham Constabulary Strategic Assessment 2019</p> <p>MoRiLE score 119, ranked 4th.</p> <p>In the year ending March 2018, police forces nationally recorded a 23% increase in</p>	<p>Referrals for target hardening properties for a specific need i.e. domestic violence, harassment, self-neglect, hoarding.</p>

<p>and serial perpetrators of domestic abuse.</p>	<p>domestic abuse crimes than the previous year, and 76% of prosecutions resulted in conviction. Between November 2017 and December 2018 reported domestic abuse incidents in Durham have increased by 5.5%, representing just under 10% of all incidents and 19% of overall crime. Referrals are on an upward trend, rising by 9.3%. The domestic abuse - crime ratio reached 74% October 2018. Analysis indicates that the proportion of crimes linked to DA referrals, increases in line with risk assessment, with 75% high risk, 66% medium and 35% standard. Domestic abuse referrals have increased by 9% on the previous 12 months. Violence against the person offences are the majority of repeat DA crimes, mainly with violence being committed by male perpetrators against a regular female partner. DA incidents involving alcohol and mental health continues to increase year on year. Alcohol has increased to 35%, mental health 21% and drugs remains static at 3%. The impact of cyber within DA cases is not yet fully understood, but is a significant enabling factor within DA harassment and stalking cases. Victim satisfaction in relation to DA is included within the Satisfaction section. Partnerships: The 'toxic trio' has the potential to increase associated risks. DA incidents are forecast to increase by 6% and will continue to do so</p>	<p>We aim to significantly reduce the number of repeat victims and serial perpetrators of domestic abuse through early intervention and ensuring that more invisible victims are identified and offered support.</p> <p>Explore the reason for repeats</p> <p>Develop innovative and effective perpetrator interventions</p> <p>Support the specialist service with the delivery of the 'follow-up' service for abused women</p> <p>Develop peer to peer relationship programme in conjunction with DCC Children's Services.</p> <p>Monitor and evaluate peer to peer programme on an ongoing basis</p> <p>Implement peer to peer relationship programme in conjunction with DCC Children's Services.</p>
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	<p>until 2023, impacting on caseloads within Safeguarding, Multi Agency Safeguarding Hub and Central Referral Unit as medium and high risk referrals. Multi Agency Tasking and Co-ordinating (MATAC) will continue to December 2020. The Edge of Care initiative is used within Force to consider the impact of multiple exposure to DA incidents on children and officers are requested to consider 'Through the eyes of a child' within DA incidents. 636 Encompass alerts (notice to schools regarding children within households with DA incidents) have been issued between November 17 and October 18.</p>	<p>Work with the CCG's to engage with GP's across County Durham and Darlington Work with Public Health to engage with Healthy Pharmacy schemes across County Durham and Darlington</p>
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Protected Characteristic: <b>Sexual orientation</b>		
What is the actual or potential impact on stakeholders?	Explain your conclusion considering relevant evidence and consultation	What further action or mitigation is required?
<p>This will have a positive impact in relation to domestic abuse and hate crime victims.</p> <p>To significantly reduce the number of repeat victims and serial perpetrators of domestic abuse.</p>	<p>Durham Constabulary Strategic Assessment 2019</p> <p>MoRiLE score 119, ranked 4th. In the year ending March 2018, police forces nationally recorded a 23% increase in domestic abuse crimes than the previous year, and 76% of prosecutions resulted in conviction. Between November 2017 and December 2018 reported domestic abuse incidents in Durham have increased by 5.5%, representing just under 10% of all incidents and 19% of overall crime. Referrals are on an upward trend, rising by 9.3%. The domestic abuse - crime ratio reached 74% October 2018. Analysis indicates that the proportion of crimes linked to DA referrals, increases in line with risk assessment, with 75% high risk, 66% medium and 35% standard. Domestic abuse referrals have increased by 9% on the previous 12 months. Violence against the person offences are the majority of repeat DA crimes, mainly with violence being committed by male perpetrators against a regular female partner. DA incidents involving alcohol and mental health continues to increase year on year. Alcohol has increased to 35%, mental health 21% and drugs remains static at 3%. The impact of cyber within DA cases is not yet fully understood, but is a significant enabling factor within DA harassment and stalking cases. Victim satisfaction in relation to DA is included within the Satisfaction section.</p> <p>Partnerships: The 'toxic trio' has the potential to increase associated risks. DA incidents are forecast to increase by 6% and will continue to do so until</p>	<p>Referrals for target hardening properties for a specific need i.e. domestic violence, harassment, self-neglect, hoarding.</p> <p>We aim to significantly reduce the number of repeat victims and serial perpetrators of domestic abuse through early intervention and ensuring that more invisible victims are identified and offered support.</p> <p>Explore the reason for repeats</p> <p>Develop innovative and effective perpetrator interventions</p> <p>Support the specialist service with the delivery of the 'follow-up' service for abused women</p> <p>Develop peer to peer relationship programme in</p>

	<p>2023, impacting on caseloads within Safeguarding, Multi Agency Safeguarding Hub and Central Referral Unit as medium and high risk referrals. Multi Agency Tasking and Co-ordinating (MATAC) will continue to December 2020.</p> <p>In the financial year 2017/18, there were 797 recorded hate crimes which represented 1.2% of all recorded crime. In the financial year 2018/19, there were 822 recorded hate crimes which represented 1.26% of all recorded crime. This continues the trend of increased reporting that has been seen over the last four years.</p> <p>Hate Crime is an area of focus within the Police Crime and Victims' Plan and a Joint Hate Crime Action Group, chaired by the PCVCs office, is a multi-agency group that drives improvements in engagement, enforcement and partnership working to reduce the impact of hate crime in our area.</p> <p>Figures provided by the Durham Constabulary Community Cohesion Unit. Over the last 3 years hate crime has risen from 452 incidents and 456 crime to 520 incidents and 854 crimes.</p> <p>As can be seen in the figures below there (Latest information available). There is a significant difference within Durham proportionately compared to the over national picture for the number of Hate Crimes relating to sexual orientation.</p>	<p>conjunction with DCC Children's Services.</p> <p>Monitor and evaluate peer to peer programme on an ongoing basis</p> <p>Understand and reduce the true level of hate crimes and incidents in relation to sexual orientation.</p> <p>Increase reporting of hate incidents</p> <p>Develop a multi-agency communications strategy, demonstrating a cross-organisation and cross-sector approach, including a message that there should be zero-tolerance of hate crime. This to be aimed at all sections of society.</p> <p>Review of reporting mechanisms and pathways</p> <p>Review how organisations shared intelligence</p>
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	<p style="text-align: center;">Hate Crime Strands - Durham Constabulary 2016/17</p>  <p style="text-align: center;">Hate Crime Strands - England and Wales 2016/17</p>  <p style="text-align: center;">Legend: Race (blue), Religion (orange), Sexual Orientation (grey), Disability (yellow), Transgender (dark blue)</p>	<p>Review of the use of evidence to ensure effective prosecutions</p> <p>Map the support for victims and identify gaps in effective support</p>
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Protected Characteristic: <b>Transgender</b>		
What is the actual or potential impact on stakeholders?	Explain your conclusion considering relevant evidence and consultation	What further action or mitigation is required?
<p>This will have a positive impact in relation to transgender victims of hate crime and domestic abuse.</p> <p>To significantly reduce the number of repeat victims and serial perpetrators of domestic abuse.</p>	<p>Durham Constabulary Strategic Assessment 2019</p> <p>MoRiLE score 119, ranked 4th. In the year ending March 2018, police forces nationally recorded a 23% increase in domestic abuse crimes than the previous year, and 76% of prosecutions resulted in conviction. Between November 2017 and December 2018 reported domestic abuse incidents in Durham have increased by 5.5%, representing just under 10% of all incidents and 19% of overall crime. Referrals are on an upward trend, rising by 9.3%. The domestic abuse - crime ratio reached 74% October 2018. Analysis indicates that the</p>	<p>Referrals for target hardening properties for a specific need i.e. domestic violence, harassment, self-neglect, hoarding.</p> <p>We aim to significantly reduce the number of repeat victims and serial perpetrators of domestic abuse through early intervention and ensuring that</p>

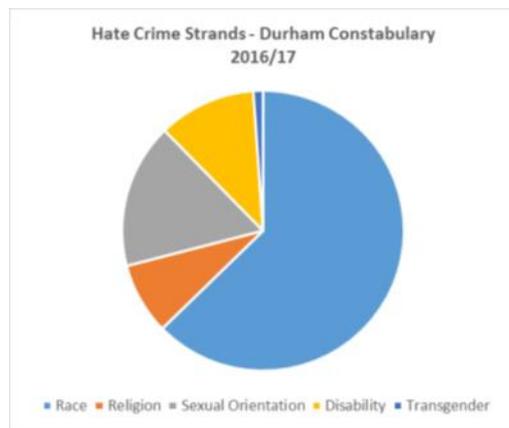
<p>To ensure that victims are confident to report,</p>	<p>proportion of crimes linked to DA referrals, increases in line with risk assessment, with 75% high risk, 66% medium and 35% standard. Domestic abuse referrals have increased by 9% on the previous 12 months. Violence against the person offences are the majority of repeat DA crimes, mainly with violence being committed by male perpetrators against a regular female partner. DA incidents involving alcohol and mental health continues to increase year on year. Alcohol has increased to 35%, mental health 21% and drugs remains static at 3%. The impact of cyber within DA cases is not yet fully understood, but is a significant enabling factor within DA harassment and stalking cases. Victim satisfaction in relation to DA is included within the Satisfaction section.</p> <p>Partnerships: The 'toxic trio' has the potential to increase associated risks. DA incidents are forecast to increase by 6% and will continue to do so until 2023, impacting on caseloads within Safeguarding, Multi Agency Safeguarding Hub and Central Referral Unit as medium and high risk referrals. Multi Agency Tasking and Co-ordinating (MATAC) will continue to December 2020.</p> <p>In the financial year 2017/18, there were 797 recorded hate crimes which represented 1.2% of all recorded crime. In the financial year 2018/19, there were 822 recorded hate crimes which represented 1.26% of all recorded crime. This continues the trend of increased reporting that has been seen over the last four years.</p> <p>Hate Crime is an area of focus within the Police Crime and Victims'</p>	<p>more invisible victims are identified and offered support.</p> <p>Explore the reason for repeats</p> <p>Develop innovative and effective perpetrator interventions</p> <p>Support the specialist service with the delivery of the 'follow-up' service for abused women</p> <p>Develop peer to peer relationship programme in conjunction with DCC Children's Services.</p> <p>Monitor and evaluate peer to peer programme on an ongoing basis</p> <p>Implement peer to peer relationship programme in conjunction with DCC Children's Services.</p> <p>Understand and reduce the true level of hate crimes and incidents in relation to transgender.</p>
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and that once reported, the hate element is recognised so that support and safeguarding can be provided.

Plan and a Joint Hate Crime Action Group, chaired by the PCVCs office, is a multi-agency group that drives improvements in engagement, enforcement and partnership working to reduce the impact of hate crime in our area.

Figures provided by the Durham Constabulary Community Cohesion Unit.

Over the last 3 years hate crime has risen from 452 incidents and 456 crime to 520 incidents and 854 crimes.



Increase reporting of hate incidents

Develop a multi-agency communications strategy, demonstrating a cross-organisation and cross-sector approach, including a message that there should be zero-tolerance of hate crime. This to be aimed at all sections of society.

Review of reporting mechanisms and pathways

Review how organisations shared intelligence

Review of the use of evidence to ensure effective prosecutions

Map the support for victims and identify gaps in effective support

## Section Three: Conclusion and Review

### Summary

Please provide a brief summary of your findings stating the main impacts, both positive and negative, across the protected characteristics.

Community safety can affect everybody including local residents, those working, educated in or visiting the borough, and businesses. The risk and potential risk for victimisation, or becoming involved in offending, can vary by crime problem (i.e. burglary, violent crime), location, socio-economic status, age, gender, ethnicity, sexual orientation and disability for example.

Equality and Diversity / Public Sector Equality Duty - Equity and the engagement of vulnerable and marginalised communities are highlighted within key findings and the recommendations of the HIA report, which is considered within the new SDP Plan 21-25. The effectiveness of the system to identify the needs of these communities during the pandemic will be monitored and part of the implementation of the HIA Action Plan (September 2020).

#### **Strategic Objective 1: Promote being safe and feeling safe in your community**

Resilient and cohesive communities are more likely to engage with services and report crime and anti-social behaviour. In order to achieve this there are range of tools and powers available to partner organisations to tackle anti-social behaviour. Home safety referrals will ensure that vulnerable victims feel safer in their homes.

#### **Strategic Objective 2: Support Victims and Protect vulnerable people from harm**

We aim to significantly reduce the number of repeat victims and serial perpetrators of domestic abuse through early intervention and ensuring that more invisible victims are identified and offered support.

We expect to see an increase in demand from Domestic Abuse (DA) incidents as improvements are made in identifying victims and increasing confidence amongst victims to report abuse. In Durham Constabulary's policing area, DA incidents represent around 10% (18,420) of all incidents illustrating that DA continues to be a key area of demand. The harm of DA to the victim is substantial and often has aggravating factors such as alcohol, drugs and mental health.

There is also an increase in the proportion of reported sexual violence incidents which are inter-familial or domestic abuse related. Increased levels of domestic abuse not only places demand on policing services but also across a range of partner agencies where there is a requirement for multi-agency interventions in both the medium and long term.

Organised crime places a significant demand upon police and relevant partner agencies and will continue to require substantial resources to effectively deal with

the most prominent aspects of serious crime. The impact of organised crime upon victims and communities can be substantial therefore the need to continue to raise public awareness, particularly in relation to the development of County Lines and Modern Slavery is critical to ensure the true picture of criminality is known and understood, so that victims are protected and offenders brought to justice.

### **Strategic Objective 3: Prevent Strategy; Countering Terrorism, Radicalisation and Violent Extremism**

Prevent awareness is a key strategic objective of the local contest delivery plan. Through the Safe Durham Partnership Silver Contest Group its plan has now been updated to incorporate activities across partners to ensure training is aligned to the Counter Terrorism Local Profile but also to ensure we understand strategic delivery.

The Channel Programme is a key part of the Prevent strategy. Section 36 of the Act requires local authorities and others to provide support for people who are vulnerable to being drawn into terrorism, before they commit an offence. This process, known as Channel, aims to provide support to individuals at an early stage and help protect them from radicalisation.

### **Strategic Objective 4: Reduce Re-offending**

Prevention and early intervention initiatives can have an impact on diverting individuals away from offending in the first place. Targeted and desistance-based interventions are also required to rehabilitate individuals effectively and reduce reoffending. The Criminal Justice System needs to be effective in turning lives around and stopping people reoffending through support rather than punishment. This will help reduce crime, reduce the number of victims and make our communities safer.

### **Strategic Objective 5: Alcohol and Drugs Harm Reduction**

Alcohol is a contributory factor in many incidents of domestic abuse and sexual violence and has strong links to child sexual exploitation in the county. It is also a significant factor in child neglect and child protection. Alcohol consumption plays a substantial part in homicides and domestic homicides in County Durham. Alcohol misuse causes harm to people's health including their mental health and can impact on the ability of individuals to access or sustain employment,

Drug misuse is a serious issue not only to the health and wellbeing of the individual that is affected by it, but that of their families and the wider community. Tackling drug misuse requires a co-ordinated approach involving a whole range of partners. It is not just the responsibility of organisations however; individuals and the wider community all have a role to play in reducing and preventing drug misuse.

Partners will work together to reduce alcohol and drug misuse, campaigning in partnership for changes in the law and tackling the organised crime groups who supply illegal drugs.

It is important to protect individuals and organisations from becoming victims through ensuring our communities have the knowledge and ability to protect themselves against cyber-enabled fraud and crime.

**Strategic Objective 6: Tackle and prevent cyber enabled crime**

Collaboration and partnership working is needed across the country to enhance our capability to tackle cybercrime and cyber-enabled crime, which is thought to be largely under-reported. This will include programmes to raise awareness and educate communities, including the business sector, to protect themselves against cyber-enabled crime.

Will this promote positive relationships between different communities? If so how?

**Action Plan**

Action	Responsibility	Timescales for implementation	In which plan will the action appear?
<p>Communicate successes in order to build confident communities</p> <p>Clear use of a partner problem solving approach to improve the delivery of agile interventions utilising the Local Multi-agency Problem Solving (LMAPS) process.</p> <p>Collaboration with Area Action Partnerships and the Voluntary and Community Sector in tackling long term anti-social behaviour</p> <p>Referrals for target hardening properties for a specific need i.e. domestic violence, harassment, self-neglect, hoarding.</p>	SDP	Throughout the lifetime of the plan.	<p><b><u>Safe Durham Partnership Plan 2021-2025</u></b></p> <p><b>Promote being safe and feeling safe in your community</b></p> <p>Anti-social Behaviour</p> <p>Safer Homes</p>
Understand and reduce the true level of hate crimes and incidents	SDP	Throughout the lifetime of the plan.	<b><u>Safe Durham Partnership Plan 2021-2025</u></b>

<p>Increase reporting of hate incidents</p> <p>Develop a multi-agency communications strategy, demonstrating a cross-organisation and cross-sector approach, including a message that there should be zero-tolerance of hate crime. This to be aimed at all sections of society.</p> <p>Review of reporting mechanisms and pathways</p> <p>Review how organisations shared intelligence</p> <p>Review of the use of evidence to ensure effective prosecutions</p> <p>Map the support for victims and identify gaps in effective support</p>			<p><b>Promote being safe and feeling safe in your community</b></p> <p>Hate Crime and Community Tension</p>
<p>We aim to significantly reduce the number of repeat victims and serial perpetrators of domestic abuse through early intervention and ensuring that more invisible victims are identified and offered support.</p> <p>Explore the reason for repeats</p> <p>Develop innovative and effective perpetrator interventions</p> <p>Support the specialist service with the delivery of the 'follow-up' service for abused women</p>	SDP	Throughout the lifetime of the plan.	<p><b><u>Safe Durham Partnership Plan 2021-2025</u></b></p> <p><b>Support Victims and Protect Vulnerable people from harm</b></p> <p>Domestic Abuse and Sexual Violence</p>

<p>Develop peer to peer relationship programme in conjunction with DCC Children's Services.</p> <p>Monitor and evaluate peer to peer programme on an ongoing basis</p> <p>Implement peer to peer relationship programme in conjunction with DCC Children's Services.</p> <p>Work with the CCG's to engage with GP's across County Durham and Darlington Work with Public Health to engage with Healthy Pharmacy schemes across County Durham and Darlington</p> <p>Establish IRIS programme within County Durham and Darlington Voices of Victims, Perpetrators and Children   Collaboration between Agencies   Assessment of Interventions</p>			
<p>Work with the Durham Safeguarding Children Partnership to raise awareness with staff and partners of what is county lines, what to look for and where to report concerns and intelligence</p> <p>Appropriate agencies to disrupt the organised criminal gangs involved in this activity effectively</p> <p>To raise awareness and explain the nature of this harm to enable practitioners to recognise</p>	SDP	Throughout the lifetime of the plan.	<p><b><u>Safe Durham Partnership Plan 2021-2025</u></b></p> <p><b>Support Victims and Protect Vulnerable people from harm</b></p> <p>Organised Crime; County lines</p>

<p>its signs and respond appropriately so that potential victims get the support and help they need</p> <p>Shared resources across all specified authorities</p> <p>Upskilling through shared knowledge and expertise</p> <p>Making use of all available resources within the Home Office and partner agencies (i.e. Criminal Exploitation of children and vulnerable adults: County Lines guidance 2018, Serious Violence Strategy April 2018)</p>			
<p>Deliver a wide range of PREVENT awareness raising to staff of specified authorities and the child care sector to ensure they know how to recognise when someone is vulnerable to being drawn into terrorism and understand how to refer them for support and intervention</p> <p>Work in partnership to understand and respond to levels of intolerance and extremism that can raise community tensions</p> <p>Develop robust adult/child referral pathways and ensure all staff know how to make a Prevent referral</p> <p>Transition the Channel intervention and support programme to Durham County Council and put in place protocols for</p>	SDP	Throughout the lifetime of the plan.	<p><b><u>Safe Durham Partnership Plan 2021-2025</u></b></p> <p><b>Prevent Strategy; Countering Terrorism, Radicalisation and Violent Extremism</b></p> <p>Prevent people being drawn into terrorism</p>

implementation as required by operation Dovetail			
<p>Identify those at risk of offending and ensure appropriate support is in place to break the cycle of intergenerational offending</p> <p>Implement early intervention strategies with the aim to divert individuals from the Criminal Justice system and promote positive outcomes for victims</p> <p>Ensure critical pathway evidence informs needs-based solutions using integrated offender management principles Effective Pathways</p> <p>Building our “Think Family” approach for offenders and their families</p> <p>Using and improving pathways to enable effective intervention throughout the criminal justice process including integrated offender management</p> <p>Understanding where gaps in service provision are, across the whole system, and working in partnership to fill them</p> <p>Develop an improved understanding of the needs profile of females who offend</p> <p>Supporting the development and use of</p>	SDP	Throughout the lifetime of the plan.	<p><b><u>Safe Durham Partnership Plan 2021-2025</u></b></p> <p><b>Reduce Re-offending</b></p> <p>Prevent inter-generational offending</p> <p>Prevent repeat offending</p>

<p>the Restorative Justice Hub</p> <p>Ensuring restorative approaches are used when working with people who offend</p> <p>Embedding the work of the RJ Hub among partner agencies</p> <p>Engaging with volunteers where appropriate and developing their skills</p> <p>Developing and promoting victim involvement within restorative practice</p> <p>Use and completion of sentences / orders</p> <p>Using full range of diversion and sentencing powers / orders by courts</p> <p>Rehabilitative and safe use of custody / prison</p> <p>Raising awareness of the links between re-offending and sentencing</p> <p>Ensuring those offenders posing highest risk to the community are within scope of IOM arrangements</p>			
<p>Contribute to the effectiveness of safeguarding and risk management arrangements for children, young people and adults where substance misuse is a factor, including overdose and substance misuse related death, those at risk of domestic</p>	<p>SDP</p>	<p>Throughout the lifetime of the plan.</p>	<p><b><u>Safe Durham Partnership Plan 2021-2025</u></b></p> <p><b>Alcohol and Substance Misuse Reduction</b></p> <p>Protecting children and vulnerable adults at risk</p>

<p>abuse and sexual exploitation.</p> <p>Provide effective interagency responses for those experiencing severe and multiple disadvantage substance misuse, offending, homelessness, mental health, long-term chronic conditions</p> <p>Strengthen an integrated approach to providing support for children and families affected by parental substance misuse (cross reference with prevention and early intervention) utilising a Think Family approach</p>			
<p>Deliver awareness raising sessions of the risks and threats of cybercrime</p> <p>Deliver a general understanding about digital hygiene through events, seminars, marketing and communications</p> <p>Increase awareness of those in the public, voluntary and community sectors about protecting clients from becoming a victim</p> <p>Increase confidence to report incidents of cyber-crime</p> <p>Collaborate with other partnerships to widely embed cyber-crime and exploit opportunities for joint working</p>	SDP	Throughout the lifetime of the plan.	<p><b><u>Safe Durham Partnership Plan 2021-2025</u></b></p> <p><b>Tackle and prevent cyber enabled crime</b></p> <p>Raise awareness of the general population about staying safe online</p> <p>Build resilience of local businesses of the threat of cyber crime</p>

<p>Work with the voluntary and community sector to identify means of communicating digital hygiene to those who have particular vulnerabilities (e.g. older people)</p> <p>Work with education, youth support and other networks working with children and young people to identify those vulnerable to entering or remaining in cyber-crime activity</p> <p>Work with the education sector to develop opportunities for raising awareness of cybercrime with students</p>			
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**Review**

Are there any additional assessments that need to be undertaken? (Y/N)	
When will this assessment be reviewed? Please also insert this date at the front of the template	

**Sign Off**

Lead officer sign off: Andrea Petty, Strategic Manager, Transformation & Partnerships	February 2021
Service equality representative sign off: Mary Gallagher, Equality and Diversity Team Leader	February 2021

Please return the completed form to your service equality representative and forward a copy to [equalities@durham.gov.uk](mailto:equalities@durham.gov.uk)

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**Cabinet**

**16 June 2022**

**Joint Health and Wellbeing Strategy  
2021-2025**



**Ordinary Decision**

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**Report of Corporate Management Team**

**Alan Patrickson, Corporate Director of Neighbourhoods and  
Climate Change**

**Jane Robinson, Corporate Director of Adults & Health Services**

**John Pearce, Corporate Director of Children & Young People's  
Service**

**Amanda Healy, Director of Public Health**

**Councillor Paul Sexton, Cabinet Portfolio Holder for Adult and  
Health Services**

**Councillor Ted Henderson, Cabinet Portfolio Holder for Children  
and Young People's Services**

**Electoral divisions affected:**

Countywide

**Purpose of the Report**

- 1 The purpose of this report is to present Cabinet with the Joint Health and Wellbeing Strategy (JHWS) 2021-2025 for endorsement. The strategy is attached as Appendix 2.

**Executive summary**

- 2 The JHWS is a legal requirement under the Health and Social Care Act 2012, to ensure health and social care agencies work together to agree services and initiatives which should be prioritised.

- 3 The Health and Wellbeing Board has the responsibility to deliver the JHWS, which is informed by the Joint Strategic Needs Assessment (JSNA), as part of Durham Insight, which is an assessment of the current and future health, wellbeing and social care needs of residents in County Durham.
- 4 The JHWS 2021-25 has been aligned to the Director of Public Health Annual Report 2020, the Marmot 10 Year Review and the County Durham Place Based Commissioning and Delivery Plan 2020-25. It also recognises proposals in the Department of Health and Social Care's 'Integration and Innovation: Working together to improve health and social care for all' white paper, which sets out the Government's legislative proposals for a Health and Care Bill.
- 5 Covid-19 has had a huge impact on how Durham County Council and its partners deliver services, especially health and social care services to ensure those who need to access vital services still receive them, whilst also supporting providers who run essential services. Many of the actions in the current strategy have supported our approach in these unprecedented times.
- 6 Utilising the approach to wellbeing, we have worked with communities and the voluntary and community sector to support residents who have shielded, are self-isolating or have no other support networks.
- 7 This JHWS 2021-25 also considers the impact Covid-19 has on our partners, communities and services and any Covid-19 related actions are included.
- 8 The JHWS takes account of any governance changes, for example, the inclusion of the Physical Activity Strategy Committee as a sub-group of the Health and Wellbeing Board, ensuring there is greater alignment with physical and mental wellbeing and physical activity and healthy weight.
- 9 A range of consultation has been undertaken on the strategy, details of which are provided in Appendix 3. The consultation feedback has been used to inform the JHWS 2021-25.
- 10 An Equality Impact Assessment (EIA) has been undertaken as part of the process for developing the JHWS, which is attached as Appendix 4.
- 11 The JHWS 2021-25 was agreed by the Health and Wellbeing Board at its meeting on 18 March 2021.

## **Recommendation**

12 Cabinet is recommended to:

- (a) receive and endorse the Joint Health and Wellbeing Strategy 2021-25.

## **Background**

- 13 The Health and Wellbeing Board agreed the JHWS 2020-25 in March 2020, to provide a holding position for a year whilst further work was undertaken to ensure the Strategy takes account of the County Durham Vision 2035, the Marmot 10-year review and Covid-19.
  
- 14 The JHWS 2021-25 has been further aligned to the County Durham Vision 2035, which was developed together with partner organisations and the public and sets out what we would want the county to look like in 15 years' time. This vision is structured around three ambitions which are:
  - (a) More and better jobs;
  - (b) People live long and independent lives;
  - (c) Connected communities.
  
- 15 The JHWS 2021-25 will take forward objectives of the vision that are focussed on the health and wellbeing of residents of County Durham, mainly under the "People live long and independent lives" ambition and will contribute to other areas, working in partnership with other strategic partnership boards, for example:
  - (a) We will promote positive behaviours;
  - (b) We will tackle the stigma and discrimination of poor mental health and building resilient communities;
  - (c) Better integration of health and social care services.
  
- 16 In response to the coronavirus pandemic, a County Durham Covid-19 Health Impact Assessment was undertaken which took account of the impact of the first lockdown, which was supported by detailed forecasting and modelling work. This has given a helpful, system-wide picture of the potential impact of the pandemic on County Durham residents over the next four years and has been considered in the development of the JHWS 2021-25.

## **JHWS consultation**

- 17 Consultation took place between 22 January 2021 and 21 February 2021 on the JHWS, which included public consultation via the Durham County Council website. Details of this consultation can be found in Appendix 3.

- 18 Partners were invited to take part in the consultation, including Health and Wellbeing Board Partners, Area Action Partnerships, Town and Parish Councils, Durham Community Action, Better Together Forum, VCS organisations, Armed Forces & Veterans Forum, Age UK, Young and Adult Carers, Patient Reference Groups, Poverty Action Steering Group, The People’s Parliament, Disability Partnership, and County Durham Youth Council.
- 19 Children and Young People and Adults, Wellbeing and Health Overview and Scrutiny Committees also received a copy of the draft Strategy for comment. Both committees accept and agree the JHWS, and key priorities set out therein.

### **Joint Health and Wellbeing Strategy vision and strategic priorities**

- 20 The vision for the Health and Wellbeing Board is agreed as ***‘County Durham is a healthy place, where people live well for longer’***.
- 21 The Health and Wellbeing Board adopts a life course approach to its priorities, recognising the importance of mental health and wellbeing, physical activity and the social determinants of health cutting across all our priorities. The strategic priorities are as follows:
- (a) Starting Well;
  - (b) Living Well;
  - (c) Ageing Well.

### **Strategic Objectives**

- 22 The strategy is developed under the three strategic priorities outlined above, with six strategic objectives chosen across the three priorities, which are of importance given the impact they have on people’s health and wellbeing and of where we want to be in 2025. The six strategic objectives are as follows:
- **Improve healthy life expectancy and reduce the gap within County Durham and between County Durham and England** 98% of people who took part in the public consultation strongly agreed / agreed that this should be an objective.
  - **We will have a smoke free environment with over 95% of our residents not smoking and an ambition that pregnant women and mothers will not smoke** 91% of people who took part in the

public consultation strongly agreed / agreed that this should be an objective.

- **Decrease overall levels of unemployment and specifically close the employment gap between the general population and those living with a long term physical or mental health condition, or with a learning disability** 95% of people who took part in the public consultation strongly agreed / agreed that this should be an objective.
- **Over 90% of our children aged 4-5 years, and 79% of children aged 10-11 years are of a healthy weight** 89% of people who took part in the public consultation strongly agreed / agreed that this should be an objective.
- **Improved mental health and wellbeing evidenced by increased self-reported wellbeing scores and reduced suicide rates** 95% of people who took part in the public consultation strongly agreed / agreed that this should be an objective.
- **Increase the number of organisations involved in Better Health at Work Award** 75% of people who took part in the public consultation strongly agreed / agreed that this should be an objective.

## **Core deliverables**

- 23 The JHWS includes a number of core deliverables that identify the key areas of work which the Health and Wellbeing Board will focus on, linked to the priorities, objectives and milestones.

## **Equality Impact Assessment**

- 24 An Equality Impact Assessment (EIA) has been undertaken alongside the development of the strategy which is attached at Appendix 4.

## **Accessibility**

- 25 New legislation dictates how we can present information, to ensure it is accessible to all. As a consequence, the new version of the JHWS is in plain text format and does not contain infographics, tables and diagrams.

## Conclusion

- 26 The development of the JHWS has been led by the Health and Wellbeing Board, supported by a multi-agency working group. The Strategy has been informed by the Joint Strategic Needs Assessment as part of [Durham Insight](#) which provides the evidence base on which the priorities have been developed.
- 27 Consultation feedback has been used to inform the JHWS 2021-25.
- 28 The JHWS is aligned to the Director of Public Health Annual Report 2020, the Marmot 10 Year Review and the County Durham Place Based Commissioning and Delivery Plan 2020-25.
- 29 The JHWS is also aligned to the County Durham Vision 2035 and will be the delivery mechanism for some of the objectives which support the overall ambitions.

## Background papers

- None

## Author

Gordon Elliott

Tel: 03000 263605

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## **Appendix 1: Implications**

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### **Legal Implications**

The Health and Social Care Act 2012 places clear duties on local authorities and Clinical Commissioning Groups (CCGs) to prepare a JHWS.

### **Finance**

Ongoing pressure on the public services will challenge all agencies to consider how best to ensure effective services are delivered in the most efficient way.

The demographic profile of the County in terms of both an ageing and projected increase in population will present future budget pressures to the County Council and NHS partners for the commissioning of health and social care services.

### **Consultation**

Details of consultation are provided in the report.

### **Equality and Diversity / Public Sector Equality Duty**

An Equality Impact Assessment has been undertaken alongside the JHWS.

### **Climate Change**

There are no climate change implications.

### **Human Rights**

There are no adverse implications.

### **Crime and Disorder**

The JHWS is aligned with and contributes to the current priorities within the Safe Durham Partnership Plan which focuses on crime and disorder.

**Staffing** - There are no staffing implications.

### **Accommodation**

There are no accommodation implications.

### **Risk**

There are no risk implications.

## **Procurement**

The Health and Social Care Act 2012 outlines that commissioners should take regard of the JHWS when exercising their functions in relation to the commissioning of health and social care services.

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## **Appendix 2: Joint Health and Wellbeing Strategy 2021-2025**

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Attached as a separate document

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## **Appendix 3: Joint Health and Wellbeing Strategy Consultation Overview**

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Attached as a separate document.

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## **Appendix 4: Joint Health and Wellbeing Strategy 2021-25 Equality Impact Assessment**

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Attached as a separate document

# Joint Health and Wellbeing Strategy 2021-2025



**Better for everyone**

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## Foreword

Welcome to the County Durham Health and Wellbeing Board's sixth Joint Health and Wellbeing Strategy (JHWS).

The Health and Wellbeing Board agreed the JHWS 2020-25 at its meeting in March 2020, to provide a holding position for a year while work was undertaken to ensure the Strategy took account of the County Durham Vision 2035 the Marmot 10 Year Review and the NHS health inequalities paper.

At that time, we could not foresee the scale of the global coronavirus pandemic, Covid-19, and as Chair and Vice Chair we must acknowledge the impact this has had on our services across the County.

A specific County Durham Covid-19 Health Impact Assessment on inequalities was undertaken which took account of the first lockdown, which was supported by detailed forecasting and modelling work. This has given a helpful, system-wide picture of the potential impact of the pandemic on County Durham residents over the next 4 years and has been considered in the development of the JHWS 2021-25.

Unfortunately, the ongoing pandemic has impacted disproportionately on certain people across the County, particularly our older population, people with existing/underlying health conditions such as diabetes and obesity, our Black, Asian and Minority Ethnic (BAME) populations as well as those living and working in more disadvantaged circumstances. We have also seen how the virus has had a direct impact on our communities in terms of their health and also a wider indirect impact instigated by lockdown on mental wellbeing across the whole life course, exasperating issues and widening health, social and economic inequalities.

Although recovery will take years, our partners will continue to work together to prevent health and wellbeing inequalities widening even further through the promotion of inclusive programmes of work and the actions in the JHWS 2020-25 have supported our approach in how we deliver health and social care services in these unprecedented times.

During these challenging times, the Board and its partners have responded to the pandemic and work has continued to improve people's health and reduce health inequalities across the county, however work in some areas has been impacted as a result of the pandemic.

The following achievements have been delivered against the priorities in the JHWS 2020-25:

- Holiday activities with food delivered to 14,500 children
- Increased number of businesses signing up to the county's Breastfeeding Friendly scheme, this includes all Local Authority Libraries and Leisure Centres, and Durham and Bishop Auckland Town Halls.
- Launch of Healthy Business Strategy to support smaller businesses and voluntary organisations to provide access to good quality mental health training and support for owners and employees
- Continuation of the 'Active 30' programme in schools
- Reduction in substance misuse deaths
- Creation of the Physical Activity Strategy Committee to support an evidence-based approach to local systems and policy
- Currently 28,315 dementia friends and 140 dementia friends' champions
- 30 dementia friendly communities established

- Established the County Durham Together Community Hub to support vulnerable residents
- Recruited Covid-19 Community Champions to supporting the promotion and dissemination of key messages and help us to better understand the needs of our communities

Moving forward, we continue to be supported by partners to deliver our vision to ensure ***County Durham is a healthy place, where people live well for longer.***

We would like to thank everyone for their continued commitment to achieving our vision during these challenging times.



**Councillor Lucy Hovvels MBE**

Chair of the Health and Wellbeing Board (2013- May 2021)  
Cabinet Portfolio Holder for Adult and Health Services



**Dr Stewart Findlay**

Vice Chair of the Health and Wellbeing Board  
Chief Officer County Durham Clinical Commissioning Group

## **What is the Health and Wellbeing Board?**

Health and Wellbeing Boards were established under the Health and Social Care Act 2012, and County Durham Health and Wellbeing Board was formally established as a committee of Durham County Council in April 2013.

The legislation gives the County Durham Health and Wellbeing Board specific functions as follows:

- To develop a Joint Strategic Needs Assessment (JSNA), which provides an overview of the current and future health and wellbeing needs of the people of County Durham;
- To develop a Joint Health and Wellbeing Strategy (JHWS), which is based on evidence in the Joint Strategic Needs Assessment;
- A responsibility and duty to encourage integrated working between commissioners of health services, public health and social care services for the purposes of advancing the health and wellbeing of the people in its area;
- Power to encourage those who provide services related to social determinants of health to work closely with the Health and Wellbeing Board;
- To produce a Pharmaceutical Needs Assessment which looks at the current provision of pharmacy services across County Durham, and whether there are any potential gaps to service delivery;
- Act as the Local Outbreak Engagement Board as the public-facing Board led by Elected Members of the Council to communicate openly with the public.

## **Covid-19, and our response**

The Covid-19 pandemic is one of the greatest public health challenges in living memory, with significant repercussions for health and wellbeing. It has affected every part of our society and is likely to lead to lasting changes to how we live, work and play. The virus is highly infectious and can cause severe respiratory illness. The risk of dying from the Covid-19 virus is highest in the elderly or those with underlying health conditions, however the risks are found to be higher in males than females; higher in those living in the more deprived areas than those living in the least deprived; and higher in those in Black, Asian and Minority Ethnic (BAME) groups than in White ethnic groups.

As well as these direct health consequences of the Covid-19 virus, the subsequent restrictions, have affected other areas of health and wellbeing including mental health, social isolation, and changes in eating, drinking and physical activity behaviours. The wider impacts are still unfolding, with concerns around the health of the economy, employment, education, businesses and socio-economic inequalities.

However, throughout these difficult times our services, communities, and residents have been working together in partnership to address these challenges.

In July we published a Local Outbreak Control Plan for County Durham, which sets out our plan to protect our local communities by preventing and controlling transmission of Covid-19. The plan includes provision of clear prevention messages, rapid detection and management of outbreaks, working with various settings to implement appropriate infection control measures and developing and applying intelligence, including the knowledge and insight provided by our local communities. The latest coronavirus news, support and advice can be found at <https://www.durhaminsight.info/covid-19/>

It also outlines the support we will continue to offer to our communities, particularly those who are vulnerable or needing to self-isolate.

The role of the Health and Wellbeing Board in this pandemic is key. The Health and Wellbeing Board is our Member led Local Outbreak Engagement Board to support the ongoing response to Covid-19. The Health and Wellbeing Board will:

- Lead, coordinate and manage the work to help prevent the spread of Covid-19
- Utilise the Approach to Wellbeing Principles
- Support local people/communities to:
  - Understand the issues
  - Provide a forum to ask questions relating Covid-19
  - How recovery is planned at a local level

Since the Local Outbreak Control Plan was launched at the Health and Wellbeing Board in July 2020, the Health Protection Board has undertaken a number of actions to support our communities, which includes the following:

- Progressed the implementation of the Local Outbreak Control Plan since its launch in July
- Each setting has developed their local outbreak control teams (OCT), standard operating procedures (SOP) with Public Health England (PHE) for outbreaks (this includes additional groups that are relevant to County Durham for e.g. Durham University)
- Agreed local process for schools informing the local authority of suspected cases
- Developed a response to the contain framework and local escalation
- Actively responded to cases clusters and outbreaks of Covid-19
- Engaged nationally to ensure accurate up to date data and intelligence is received locally
- Supported 1,500 settings with case management within the setting (self-reported cases)
- Training and capacity building across council departments
- Improved data analysis, analysis data sharing including healthcare
- Worked with partners including the local authority and police to support compliance and undertake enforcement activity where
- Developed a Covid-19 Communication Toolkit and produced a community engagement strategy and action plan.
- Communications has included through Social media; Targeted messages and Common risk factors

As part of the Local Resilience Forum (LRF) gold command, emergency system response to the Coronavirus pandemic, a County Durham Together Community Hub has been established to co-ordinate food provision, social contact, welfare support and as central co-ordination function for the voluntary and community sector. The Hub supports residents that are clinically extremely vulnerable; have multiple social vulnerabilities and are impacted by COVID-19; are self-isolating; need support to access food, essential supplies and online shopping slots; have concerns about money, housing, health or employment linked to coronavirus, self-isolation or lockdown; are isolated or lonely and would like someone to listen and chat via our Chat Together programme or have questions or queries about current Guidance and Legislation

Although recovery will take years, our partners will continue to work together to prevent health and wellbeing inequalities widening even further.

We have also conducted a Health Impact Assessment (HIA) for health inequalities during Covid-19 to provide a 'snapshot' insight into the direct and indirect impact of Covid-19 lockdown on inequalities. The HIA focused on the following areas:

- Socio-economic factors - poverty reduction
- Mental health and emotional wellbeing
- Community assets and community mobilisation
- Inclusion of vulnerable groups

The findings and recommendations from the HIA have been used to develop a system-wide recovery plan for health inequalities which has been integrated into key strategic partnership plans such as the Joint Health and Wellbeing Strategy and the County Durham Place Based Commissioning and Delivery Plan 2020-2025 and have been incorporated into the Health and Wellbeing Board work programme to ensure action is taken.

### **County Durham Vision 2035**

The County Durham Vision 2035 is a document developed with partners to provide a shared understanding of what everyone wants our county to look like in 15 years' time.

The County Durham Vision 2035 was written together with partner organisations and the public. It provides strategic direction and enables us to work more closely together, removing organisational boundaries and co-delivering services for the benefit of our residents. This vision is structured around three ambitions which are:

- More and Better jobs
- People live long and independent lives
- Connected communities

A new partnership structure framework was agreed by the County Durham Partnership (the overarching partnership in County Durham) in September 2020 which ensures the County Durham partnership structure aids delivery of the County Durham Vision 2035.

The new partnership structure underneath the County Durham Partnership is:

- **Health and Wellbeing Board (Local Outbreak Engagement Board) – Statutory**
- Safe Durham Partnership – Statutory
- Economic Partnership
- Environment and Climate Change Partnership

In addition, the County Durham Together Partnership will be responsible for countywide approaches.

The JHWS will form part of the delivery mechanism for the Vision, with the objectives contained under the vision ambition "People live long and independent lives" which have a health focus being the responsibility of the Health and Wellbeing Board, as well as also working with other partnerships on shared priorities and cross-cutting issues. In doing so, it is important that we encourage activities that support inclusion so that inequalities are not exacerbated and ensuring that no one is left behind.

We will also work with the Economic Partnership to ensure young people have access good quality education, training and employment.

The Health and Wellbeing Board will deliver the following objectives under the vision ambition **‘People will have long and independent lives’**:

- Children and young people will enjoy the best start in life, good health and emotional wellbeing
- Children and young people with special educational needs and disabilities will achieve the best possible outcomes
- We will promote positive behaviours
- We will tackle the stigma and discrimination of poor mental health and building resilient communities
- Better integration of health and social care services
- People will be supported to live independently for as long as possible by delivering more homes to meet the needs of older and disabled people

As mentioned above, the HWB will not just fulfil the objectives in the Vision but also has a duty to meet our statutory obligations under the Health and Social Care Act 2012.

### **Climate Change**

The Environment and Climate Change Partnership has committed to County Durham being carbon neutral by 2050. The Climate Emergency Response Plan contains milestones and actions that will support achieving this.

The JHWS 2021-25 recognises that climate change is a fundamental threat to health and wellbeing and has the potential to widen inequalities further. Actions to combat climate change, which benefit all, can improve health and aid recovery from the pandemic, in addition to preserving the planet.

It is recognised by the World Health Organisation that climate change affects many of the social and environmental determinants of health. The impact of clean air, reducing emissions of greenhouse gases through better transport, food and energy use can result in improved physical and mental health amongst the population.

The UK Government in the 25 Year Environment Plan (2018) listed ‘connecting people to the environment to improve health and wellbeing’ as one of six key actions required for success. To achieve this, we will work closely with the Environment and Climate Change Partnership to:

- Improve people’s health and wellbeing including using green spaces and through mental health services
- Encourage children to be close to nature, in and out of school
- ‘Green’ our towns and cities by creating a green infrastructure
- Increase levels of active travel
- Improve access to nature and green spaces
- Tackle fuel poverty and cold home related health problems
- Encourage healthier diets
- Reduce pollution

The good news is that many of the actions we can take to tackle climate change can improve health, tackle health inequality, and aid our recovery from the pandemic in tandem.

## **Place Based Approach**

Place Based approaches are being adopted across County Durham in a variety of different arenas, for example through Children and Young People Early Help Services and through community safety activities. This approach recognises that communities are different and ensures that the residents are at the centre of what partner agencies deliver in order to improve outcomes locally.

## **County Durham Plan**

The County Durham Plan sets out a range of development proposals as well as planning policies for the County until 2035 to ensure it is a successful place to live, work, invest and visit by focussing on supporting and creating vibrant communities. The plan seeks to do this by delivering more and better jobs and sustained economic growth; a wide choice of high quality homes that supports economic growth and meets the needs of all people; a high quality built and enhanced natural environment; and the necessary supporting infrastructure including transport, health and educational needs.

An Open Space Needs Assessment (OSNA) has been developed to support the County Durham Plan, which requires proposals for new residential development to make provision for open space to meet the needs of future residents. Where it is determined that open space provision is not appropriate, the council will require financial contributions, secured through planning obligations, towards the provision of new open space, or the improvement of existing open space elsewhere in the locality. Creating and improving open spaces for recreation, food growing, and exercise will support improved health and wellbeing of our residents.

## **Approach to Wellbeing (A2W)**

The County Durham Approach to Wellbeing has been adopted by the Health and Wellbeing Board as a means of ensuring all organisations and services within the county consider wellbeing as a common currency; it includes everything that is important to people and their lives. It is designed to ensure we involve people in decisions that affect them and devolve power to people, and the act of doing so, then has an impact on people's wellbeing. This will invoke a culture where the wellbeing of the County's residents is considered in every decision that is made whether this be regarding decisions about people or places or the systems designed to support them. It is aligned to the County Durham Vision and its three ambitions of:

- More and Better Jobs
- People Live Long and Independent Lives
- Connected Communities

Our approach has six guiding principles which are all underpinned by a strong evidence base. These principles affirm the key role that communities can play in supporting their own residents and the significant improvements in health and wellbeing outcomes that can result from involving communities more in decisions that affect them. A community can be defined as a geographical community or a community of interest such as people living with dementia or asylum seekers.

Our approach has people and places at its heart. Working with communities, building on the assets of those communities, supporting the positive development of the neighbourhoods that people live in and fostering the resilience and empowerment of these communities through the support offered to everyone, and importantly to those who are most vulnerable.

Our approach highlights the importance of supporting systems – encouraging alignment of activities across agencies and sectors and ensuring that services are commissioned and delivered in a way that is collaborative and supportive. For those who require more formal interventions or treatment, our approach supports person-centred interventions that are empowering rather than stigmatising. Through commissioners and providers of services across the sectors the model helps to provide a framework against which we can address the needs of peoples, communities and neighbourhoods whilst working towards a cultural change. This means ensuring all services self-assess against the model using the structured framework that helps to reflect on current practice and will inform future decisions about how local work and activities can support the wellbeing of people living in communities. Over time it is aimed that the model will be integrated into commissioning decisions, supporting providers to deliver services that place improving wellbeing at the centre of service delivery.

Finally, and most importantly, all our actions need to be informed by local conversations with people and communities – using and building on their knowledge and learning from their own experiences of knowing what they need, what is right and what works for them. In doing this we will also ensure that the model is dynamic, adapting, changing and that it is shaped and developed over time by County Durham residents.

<b>People and Places</b>	<b>Empowering communities:</b> Working with communities to support their development and empowerment
	<b>Being asset focused:</b> Acknowledging the different needs of communities and the potential of their assets
	<b>Building resilience:</b> Helping the most disadvantaged and vulnerable, and building their future resilience
<b>Supporting Systems</b>	<b>Working better together:</b> Working together across sectors to reduce duplication and ensure greater impact
	<b>Sharing decision making:</b> Designing and developing services with the people who need them
	<b>Doing with, not to:</b> Making our health and care interventions empowering and centred around you as an individual
<b>Using what works:</b> Everything we do is supported by evidence informed by local conversations	

### Joint Strategic Needs Assessment

The Joint Strategic Needs Assessment (JSNA) helps to inform the planning and improvement of local services and guides us in making the best use of funding available. It builds a picture of current and future health and wellbeing needs of local people. This is used to shape joint commissioning priorities to improve health and wellbeing as well as reduce health inequalities in our communities.

Over the last few years, we have transformed our JSNA to create a tool that is fit for the future and rooted in intelligence and wider evidence about what drives health and wellbeing across the county. The JSNA is part of Durham Insight, our shared intelligence, research and knowledge base for the County [www.durhaminsight.info](http://www.durhaminsight.info).

As part of that development, we have added information on the following:

- Covid-19 advice and information
- County Durham Covid-19 surveillance dashboard
- Local economy during and post Covid-19 (including furloughed employments; estimates of unemployment; claimant count)
- Covid-19 shielded population
- Office for National Statistics (ONS) population estimates and projections
- Poverty (including children in poverty; free school meals; fuel poverty)
- Reports and story maps - State of the County; County Durham Town Centre Surveys 2019; Enterprise Framework: Business Geography)

Further insight on physical activity patterns and trends is provided by the Active Partnership. This contributes to the shaping of policy, delivery and system change.

## Key messages from our Joint Strategic Needs Assessment:

### Deprivation and employment

- County Durham is in the top 40% most deprived upper-tier local authorities in England, ranking as the 48<sup>th</sup> most deprived of 151 upper tier local authorities in England.
- Nearly half of our population live in the 30% most deprived areas nationally. For children this rises to 54% (IMD2019).
- There are almost 14,000 businesses based in County Durham, an increase of almost 20% over the last 10 years.
- 72.1% of people of working age in County Durham are in employment. This is higher than regionally (71.8%), but lower than nationally (76.4%).
- ONS estimate that around one third of people in employment work in key worker occupations (33.1%/76,000 people, Jan 2019 to Dec 2019)

### Covid-19

- The Clinically Extremely Vulnerable (CEV) population for County Durham is around 27,200 people; there is a social gradient between the most vulnerable and deprived areas of County Durham. A further cohort of around 72,000 people were identified through a Population Health Management approach as potentially displaying multiple social vulnerabilities due to Covid-19 (as opposed to being clinically extremely vulnerable).
- Through the work of our County Durham Together community hub we have helped to protect our most clinically and socially vulnerable from the wider impacts of Covid-19. Since it was launched the hub has helped coordinate food deliveries and link people to volunteers, welfare advice, and wider support services; supporting over 10,000 people. Over 2,000 shielding residents needed support with food supplies and 1,500 needed support with pharmacy supplies.
- At the peak of the pandemic, over 200 council staff and over 80 NHS and Wellbeing for Life staff were redeployed from their usual roles to support the community hub, which was functioning 7 days per week.
- Local estimates suggest that 69,000 employments in County Durham were furloughed up to June 2019; and that 11,500 claims by eligible self-employed people in County Durham have made claims under the Coronavirus Self-Employment Income Support Scheme (SEISS) Tranche 2 up to 31st August 2020, representing 59% of the eligible population.
- Over the entire pandemic period there have been over 20,500 positive lab confirmed tests. Our peak 7-day rate per 100,000 (so far) was 413.7 on November 13<sup>th</sup> 2020. In total there have been over 1,000 Covid-19 related deaths of County Durham residents recorded by ONS, at a rate of 920.9 per 100,000. For the North East this rate is 816.7 per 100,000. The latest COVID statistics relating to County Durham can be found on Durham Insight <https://www.durhaminsight.info/covid-19/>

### Starting Well

- Life expectancy and healthy life expectancy for both men and women in County Durham is lower than the England average.
- Life expectancy is 8.8 years lower for men and 6.6 years lower for women in the most deprived areas of County Durham than in the least deprived areas.
- There are 101,500 children aged 0-17 living in County Durham, with a further 49,800 young people aged 18 – 24.

- As at December 2020:
  - 1,648 CYP are known to early help,
  - 1,952 are Children in Need,
  - 963 are Children Looked After,
  - 469 CYP are subject to a current Child Protection Plan, and
  - 3,704 CYP (aged 0-25) have an Education, Health and Care Plan
- Childhood obesity is worse than the England average and is increasing. 1 in 10 (10.7%) reception children and 1 in 5 (22.7%) Year 6 children are obese (2019/20).
- Levels of teenage pregnancy, smoking in pregnancy, breastfeeding, and the rate for alcohol-specific hospital admissions among those under 18 are worse than the average for England.
- Educational attainment, levels of self-harm hospital admissions and childhood immunisations are better than England, as was the percentage of children aged 2-2½ years at or above the expected level of development in all five areas of development (communication, gross motor, fine motor, problem-solving and personal-social skills) in 2018/19.
- Estimates suggest that:
  - 46% of children live in households where an adult has any of the 'toxic trio' (experience of domestic abuse, alcohol/substance misuse problems or mental health problems). That's almost 46,500 children & young people.
  - 1 in 10 children are estimated to have a mental health condition, that's around 10,000.

## Living Well

- National (pre Covid) estimates suggest 1 in 4 adults will experience at least one diagnosable mental health problem in their lifetime; that's over 100,000 adults in County Durham. In any one week, 1 in 6 adults will experience symptoms of depression or anxiety.
- Rates of death by suicide and undetermined injury are statistically significantly higher in County Durham than England. During the period 2017-2019 there were an average of 62 deaths by suicide and undetermined injury per year.
- There are 43 Crees across County Durham, engaging with those at risk of suicide by tackling social isolation and self-harm through skill-sharing and informal learning to promote social interaction. Although Crees were originally aimed at men, some have developed for women and young people.
- Estimated smoking prevalence has increased for 2019 from 15% to 17%, or by around 12,000 residents since 2017
- Estimated levels of excess weight in adults (aged 18+) and physically active adults (aged 19+) are worse than the England average.
- Prevalence of hypertension, COPD, cardiovascular disease, diabetes, stroke and coronary heart disease are higher in County Durham than England. But levels of new sexually transmitted infections, people killed and seriously injured on roads, statutory homelessness and new cases of tuberculosis are better than the England average.

## Ageing Well

- There are over 110,000 residents aged 65 and over in County Durham. ONS Projections suggest that to 2035 the number aged 65+ will increase by 31% and the number aged 85+ will increase by 82%.
- 35% of the county's over 60 population live in income deprived households (IDAOP, IMD2019). That's around 47,500 older people.
- Over 30,000 people aged 65+ live alone.

- Over 5,000 County Durham residents have a dementia diagnosis. However, it is estimated that the actual number of people over the age of 65 with dementia is closer to 7,300, this is predicted to increase 52% to over 11,000 by 2040 (POPPI).
- There are now 30 dementia friendly communities across the county, raising awareness and helping those affected to confidently contribute to community life.
- Rates of premature mortality from the major causes of death are statistically significantly higher in County Durham than England, this includes rates for CVD, cancer, liver disease and heart disease.
- There is inequality in the distribution of premature mortality within County Durham. It is higher in the more deprived areas.

### Policy drivers

Key factors which impact on health have been drawn out from the JSNA and utilised to inform the priorities for the JHWS. This has been coupled with the major policy drivers for improving health and reducing health inequalities and any COVID-19 implications:

- The Marmot Review (Fair Society Healthy Lives) 10 years on
- NHS Long Term Plan
- Prevention Green Paper - Advancing our health: Prevention in the 2020's
- Future in Mind
- Better Births
- Health Impact Assessment on Inequalities during COVID-19

In 2020, the Health Foundation commissioned the Institute of Health Equity to examine progress in addressing health inequalities in England, 10 years on from the landmark study Fair Society, Healthy Lives (**The Marmot Review**).

The 2010 review identified six key policy areas for action to reduce health inequalities:

- Giving every child the best start in life
- Enabling all children, young people and adults to maximise their capabilities and have control over their lives
- Creating fair employment and good work for all
- Ensuring a healthy standard of living for all
- Creating and developing healthy and sustainable places and communities
- Strengthen the role and impact of ill health prevention.

This '10 years on' report shows that, in England, health is getting worse for people living in more deprived districts and regions, health inequalities are increasing and, for the population as a whole, health is declining. The report brings evidence together showing that for almost all the recommendations made in the original Marmot Review, the country has been moving in the wrong direction. In particular, lives for people towards the bottom of the social hierarchy have been made more difficult.

Both the 2020 and 2010 Marmot Reviews into health inequalities in England labelled climate change a fundamental threat to health. A further 2020 Marmot, Advisory Group Report for the UK Committee on Climate Change highlighted that climate change is already damaging the health of populations in the UK, has the potential to increase health inequalities and lead to more systemic, unpredictable shocks such as the Covid-19 pandemic.

Marmot also recommends that we should:

- Put health equity and wellbeing at the heart of local, regional and national economic planning and strategy.
- Adopt inclusive growth and social value approaches nationally and locally to value health and wellbeing as well as, or more than, economic efficiency.

The impact of COVID-19 has replicated existing health inequalities and, in some cases, has increased them, including a higher impact on older age (70+) due to vulnerabilities and long-term conditions; the virus has higher impact on men, but lockdown has a higher impact on mental health of women, a high impact on child poverty, educational attainment and future employment opportunities for young people and a higher impact on BAME communities. In County Durham, the impact on Gypsy, Roma and Travellers requires further investigation. The mortality risk of Covid 19 is higher for people with learning difficulties.

In addition, the impact of lockdown on people with learning difficulties and autism was particularly challenging. During the first wave of Covid the death rate of people with learning disabilities was around 4 to 6 times higher than general population and the death rate for age 18 to 34 with learning disabilities was 30 times higher than the rate in the same age group without disabilities.

The Covid-19 pandemic has had a devastating impact on physical activity levels. During the first Covid-19 lockdown, the number of adults in England meeting physical activity guidelines decreased by over three million and of particular concern is the decrease in physical activity levels among already vulnerable groups. Physical activity also plays an important role in maintaining mental wellbeing. Those who are more physically active are happier, more satisfied with life, and less anxious. Tackling inequalities in physical activity will play a crucial role in reducing health inequalities in our county. A physical activity framework is in development to support creating a cultural of physical activity across County Durham which makes physical activity accessible, easy and the norm. This framework is informed by our Approach to Wellbeing.

The culture and leisure activities that people can experience can also have a significant impact on their physical and mental wellbeing and those who live in County Durham have access to a range of options including leisure centres and swimming pools, grassroots sports, libraries, the Empire theatre at Consett and the Gala at Durham. There are also Town Halls and museums across the County who offer a range of activities and cultural experiences throughout the seasons, as well as a range of parks, playgrounds and allotments where residents of County Durham can go to enjoy experiences which have a positive impact on their health and wellbeing and offer valuable opportunities to meet people in social settings.

Across County Durham there are major differences in the health that people experience and there remain differences between the health of local people and those across England. The JHWS is seeking to work with people to change these outcomes. The solutions to these differences are not to be found within health and care services alone and many other factors have an influence on people's health and wellbeing. These include the environment in which people live (including accessibility to the natural environment), physical activity, culture and leisure opportunities, access to a good education, and good quality jobs, housing, the food people eat, money and resources, family, friends and communities. These are often called the social determinants of health. These differences are unjust and unfair, and the Health and Wellbeing Board is committed to making a difference. The Board recognises that many of the social determinants of health require close working with key partners across County Durham who have responsibility for housing, schools and of course with our local communities.

## Poverty and Inclusive growth

Poverty can cause poor mental health, as well as being an impact of poor mental health. We must also consider those who are in work poverty, and the fact that this is on the rise.

The impact of COVID-19 on the national and local economy has been unprecedented. Despite the extension to the furlough scheme, levels of unemployment are expected to rise in adults of working age and especially in young people. This will lead to increasing financial insecurity, housing insecurity, debt and a new reliance on welfare for those families affected. These factors all elevate stress and anxiety levels resulting in relationship breakdown, substance misuse, domestic abuse and a rise in safeguarding concerns within the family unit.

In 2019 County Durham was ranked the 26th most deprived upper tier Council area in England. Whilst across England weekly gross pay for full-time workers was at £591.40 in 2019 the level of full-time weekly pay has remained below England levels at £528 in County Durham. An estimated 23.2% of employees in County Durham are earning less than the Living Wage Foundation hourly rates. Many people in County Durham today live in different social circumstances and experience avoidable differences in health, well-being and length of life.

In June 2020 the Institute for Fiscal Studies stated about 30% of low-income households pre-crisis said that they could not manage a month if they were to lose their main source of household income. The coronavirus crisis has shone a harsh light on the increasing inequalities residents in County Durham who spend a high fraction of their budgets on necessities that are hard to scale back.

The Poverty Action Steering Group is working to address socio economic factors, and reducing poverty is key to our resident's health and wellbeing enabling them to find employment and reduce their dependence on benefits.

Adults income causes child poverty, and the rise in child poverty is seen in young children and families. An estimated 26.8% of children aged 0 to 4 were living in relative poverty – an increase of 20.2% in the number of children aged 0 to 4 since 2015/16. The 5 to 10 age group increased the most during this period, rising by 39.1% to 20.3% of children aged 5 to 10.

The national Child Poverty Action Group reports that since the outbreak of Covid-19, families already struggling risk sinking deeper into poverty, due to redundancy or furlough, thus increasing the numbers and severity of poverty for children, young people and families. The Poverty Action Steering Group will work with the Health and Wellbeing Board to address socio economic factors, and reducing poverty is key to our resident's health and wellbeing enabling them to find employment and reduce their dependence on benefits.

Factors influencing mental health and emotional wellbeing are directly linked to the social determinants of health which have been significantly impacted by the Covid-19 pandemic. Studies suggest mental health has worsened as a consequence by up to 8.1% (IFS, 2020). It is now well documented that the virus and Covid-19 restrictions will increase inequalities nationally as levels of unemployment, poverty and social isolation affect the long-term outcomes of vulnerable and disadvantaged groups. Local forecasting suggests that we could see a 20-25% increase in mental ill health in the population over the coming 5 years as a result, with higher levels expected for children and young people.

A key factor in helping to address poverty will be to support activities that help people to find employment, or alternatively to adopt new skills through training and further education, that enable them to compete in the labour market. Importantly, the trick will be to ensure that such actions do

not increase inequalities with those closest to the labour market securing new jobs and those facing greater challenges and who are more disadvantaged, being left behind. For that reason, it is important that we ensure our work promotes economic inclusion where those with mental ill health, those with learning disabilities and those with long term conditions have equal chances of securing work and moving out of poverty, as well as us working to reduce the numbers going into poverty. Such an approach would bring to life the concept of proportionate universalism (Marmot), whereby our support is targeted proportionally to those who need it most.

## **Consultation**

We have utilised the extensive consultation which was undertaken as part of the County Durham Vision. This included support for the relationship between the environment and climate change and health and opportunities for 'active travel' and the priority of reducing self-harm and suicide prevention which are included in actions within the Joint Health and Wellbeing Strategy.

The need for integrated commissioning and pooled budgets where possible was highlighted and partners working across County Durham have developed a five-year County Durham Commissioning and Delivery Plan 2020-25 which identifies key programmes of work over the next five years for health and social care services.

There were also comments in the vision consultation of how the evidence base of the Joint Strategic Needs Assessment is crucial in formulating plans and work to achieve our overarching objective to improve life expectancy, healthy life expectancy and the life expectancy/healthy life expectancy gap between the most and least deprived communities is supported and reinforced by communities.

Following consultation in 2020 for the Joint Health and Wellbeing Strategy 2020-25 there was strong support for the priorities within the Strategy. There were 84 responses to the public consultation, and all three of the strategic priorities had high levels of agreement, over 95%, with the strategic priorities. Additional feedback from young people aged between 5-21 also agreed with the strategic priorities.

There was support for the wellbeing approach with members of the public keen to see partners working collaboratively and innovatively with local communities.

The health impacts of poverty were highlighted in the consultation and this was included in the 2020-25 JHWS and strengthened for the JHWS 2021-25 given the impact of financial insecurity and Covid-19.

The draft Joint Health and Wellbeing Strategy 2021-25 was again subject to public consultation via the Durham County Council website and included the Area Action Partnerships, Town & Parish Councils, Patient Reference Groups, Voluntary and Community Sector, Investing in Children, Durham Youth Council, Learning Disabilities Parliament, Disability Partnership, Carers, Young Carers, Age UK and Poverty Action Steering Group.

## **Our Vision**

The Health and Wellbeing Board's vision is underpinned by the JSNA and is:

**'County Durham is a healthy place, where people live well for longer'**

## **Our Strategic Priorities**

The Health and Wellbeing Board adopts a life course approach to its priorities, recognising the importance of mental health and wellbeing, physical activity and the social determinants of health cutting across all our priorities. These priorities are:

- Starting Well
- Living Well
- Ageing Well

## **Starting Well**

The experiences that children have early in their life play a key part in their health as adults. Nationally, it is estimated that 1 in 10 children have a mental health disorder and that a quarter of adults will experience at least one diagnosable mental health problem in their lifetime.

While we have made progress in recent years in providing opportunities for our children including a good level of development by the end of reception, reduction in teenage conceptions and levels of smoking our overall outcomes for children should and can be improved. This is even more important now as a result of the pandemic as some of our children have experienced bereavement and others traumatic experiences during the initial lockdown period causing worry, anxiety and fear of the future. Evidence suggests that vulnerable children and other children and young people with challenging home environments, are more likely than others to have had experiences during the pandemic associated with a risk to mental health and wellbeing such as loneliness, difficult relationships within the home and parental stress or poor mental health.

Children are affected by Domestic Abuse and alcohol and substance misuse in their households. Support victims and protect vulnerable people from harm (including those affected by domestic abuse) and alcohol and substance misuse reduction are priorities within the Safe Durham Partnership Plan. Actions within that plan will meet these priorities by working together with partners to address issues. This will include organisations represented on the Health and Wellbeing Board.

The Health and Wellbeing Board will work closely with children, young people and their families to ensure they start well and reduce health inequalities for children and their families.

## **Living Well**

We know that a good job, access to the natural environment, quality housing, opportunities for active travel, and access to leisure and cultural activities building our resilience to climate change impacts, as well as ensuring our communities have optimum physical health, mental health and wellbeing, have a positive influence on our overall health and wellbeing.

Good work is vital for people's health and wellbeing, impacting both directly and indirectly on the individual, their families and communities. Healthier, active and engaged employees are more productive and have lower levels of sickness absence. We know that almost 19% of sickness absence is due to mental health and over 15 million days are lost to depression every year nationally, and local people who have significant health issues need support to overcome the

barriers they face to accessing and retaining work. The Mental Health Strategic Partnership provides strategic coordination and leadership for the mental health agenda across County Durham.

The gap in the employment rate between those with a long-term physical or mental health condition, or with a learning disability and the overall employment rate is 12.9% which is not significantly different from England and has decreased over the last few years.

The gap in the employment rate between those with a learning disability and the overall employment rate is 73.5% which is significantly higher than England and has seen an increase over time.

Having access to a warm, comfortable and affordable place to live, our work and financial situation, eating well and staying active make a difference to our chances of remaining healthy and well during this time of life and into older adulthood. It is also recognised that many of the measures required to achieve the above will also help to tackle climate change.

The Health and Wellbeing Board is committed to shaping a healthy place which is smoke free, supportive of a healthy weight and gives access to physical activity opportunities with good homes.

### **Ageing Well**

People are now living longer than ever before. Someone aged 65 today can expect to live to 85, nearly ten years longer than their parents' generation. This increase in life span offers many great opportunities for individuals, families, local communities and the economy.

The Centre for Better Ageing frames older age groups in terms of "approaching later life" at 50 plus. Pension schemes define the ages of 60, or 65 for eligibility. The United Nations has not adopted a standard definition for older people, but generally refer to 60 plus as the older population.

The population size of County Durham has been steadily rising. The 2019 ONS estimated population of County Durham was 530,094 people, a rise of 0.6% from 2018 (3,100 people) and a rise of 7.4% (36,400 people) since 2001 (Durham Insights, 2020). ONS Predictions (2016) suggest, twenty years from now it is expected the number of people in County Durham over 50 will be 240,300, equating to 46% of the county's population (ONS, Population Projections by 2041, 2016).

With an increase in an ageing population there will also be an increase in those living with a range of health conditions and social care needs. Long-term conditions can affect people's ability to work, care for their families and contribute to their communities. It also places an increased demand on health and social care services.

Covid-19 has had a significant impact on our elderly population (70+). Many of our older population have been identified as being clinically vulnerable and required shielding during the lockdown restrictions and many older people report a reticence in wanting to leave the house. Increases in social isolation and loneliness for older people have been strongly associated with other common mental health problems including anxiety, depression, self-harm and in lesser numbers death by suicide. Adult and young carers have also been identified as high-risk groups, unable to sustain their own resilience to the impact of Covid-19 on their mental wellbeing.

The Mental Health Community Framework includes reference to specific work regarding those with learning disabilities who are ageing.

However, the response to Covid-19 has also highlighted some excellent examples of the contribution the ageing population can make to supporting our wider community. Many of the volunteers and mutual aid groups mobilised during the response to lockdown were manned by the over 50's. It is therefore vital that we positively embrace more people living longer and bring

increased opportunities for our residents within our local communities to lead a happy and fulfilled life.

We will also target approaches which enable our older people to remain independent and to lead lives with meaning and purpose and will ensure that when the time comes, people receive good quality end of life care and die with dignity.

### **Alignment with other key strategic plans**

The County Durham Health and Wellbeing Board takes a 'whole-system' approach to the health and wellbeing of our communities which requires coordination and collaboration across a wide variety of sectors. It is important that our priorities align to other plans to ensure our actions are delivered to meet the need of our local communities. Partners working across County Durham have developed a five-year County Durham Commissioning and Delivery Plan 2020-25 which identifies key programmes of work over the next five years for health and social care services. The plan reflects the life course approach of this strategy, and details system commissioning and delivery intentions across 22 chapters covering services from maternity to end of life. This provides the delivery plan for the health and care aspects of the JHWS.

County Durham is part of an Integrated Care Partnership which covers County Durham, Sunderland and South Tyneside which in turn is part of an Integrated Care System which covers the whole of the North East and Cumbria.

Collaborative working within the Integrated Care Partnership brings together health commissioners and providers to support the delivery of sustainable, safe and effective services through sharing best practice and the adoption of common pathways where this is in the interests of the communities that it serves. An integrated health and social care system has an important role to play in terms of early intervention by preventing or reducing needs from deteriorating by providing the right care at the right time in the community and putting more people in control of their health; supporting the whole person, across mental and physical health and not just treating symptoms.

County Durham, our 'place', has primacy and will be where the majority of services will continue to be commissioned, planned and delivered, whilst also recognising that we will work together with our neighbours at scale where this genuinely adds value. We must also recognise residents who are close to County Durham borders, who may belong to or have affinity with a neighbouring local authority, for example many residents who live in Easington will access health services in Sunderland, or people who live in Chester-Le-Street may work in Newcastle.

The JHWS is about long-term health improvement and reducing health inequalities including the social determinants.

Please refer to Appendix 1 to see how the Joint Health and Wellbeing Strategy aligns to other plans.

## **Our objectives**

We have chosen these objectives across our three strategic priorities, that are of importance given the impact they have on people's health and of where we want to be in 2025. The programme of integration and our system wide approach supports us to deliver on these objectives. We recognise these are challenging but by working together across our partnerships and local communities we can make a difference.

- Improve healthy life expectancy and reduce the gap within County Durham and between County Durham and England
- We will have a smoke free environment with over 95% of our residents not smoking and an ambition that pregnant women and mothers will not smoke
- Decrease overall levels of unemployment and specifically close the employment gap between the general population and those living with a long term physical or mental health condition, or with a learning disability
- Over 90% of our children aged 4-5 years, and 79% of children aged 10-11 years are of a healthy weight
- Improved mental health and wellbeing evidenced by increased self-reported wellbeing scores and reduced suicide rates
- Increase the number of organisations involved in Better Health at Work Award (to improve health and wellbeing interventions at work)

In order to reduce inequalities and improve wellbeing, we will expect that these are delivered according to the principles of the County Durham Approach to Wellbeing which encourages devolution, empowerment and coproduction, and the Marmot principle of proportionate universalism; ensuring that no-one is left behind.

### **What changes can you expect to see?**

Our ultimate goal is reducing the gap in healthy life expectancy within County Durham and between County Durham and England. This Strategy is focused on the foundations for achieving that goal and considers the impact of the Covid-19 pandemic on the health and wellbeing of our residents in County Durham. We have set out a number of changes you can expect to see throughout the course of this strategy to set the foundations for achieving this.

Please note that further detail and baseline figures can be found in the relevant strategy or performance management framework.

#### **By 2022:**

- Increasing the equity of cancer screening programmes
- 10% reduction in suicides
- Increased referrals and adaptations done by the warm and healthy homes programme
- Coming out of Covid-19: 2022 is a transition year depending on the outbreak control and vaccination plans
- Increase in the number of physical health checks for those people with a mental health condition or a learning disability
- Increased take up of leisure and physical activities
- All schools to have an identified mental health lead
- System-wide workforce able to engage local residents on financial issues including poverty reduction, debt, benefits, housing and employment.

#### **By 2023:**

- A reduction/downward trend in hospital admissions of children under 2 years of age, due to unintentional injuries
- Fewer approvals for takeaways near schools
- More businesses signing up to the Better Health at Work Award to improve health and wellbeing interventions at work
- More adult carers having carers assessments
- Improvements in the mental health and emotional wellbeing of children and young people, with an appropriate and accessible range of services across universal, targeted and specialist provision available for timely access

#### **By 2024:**

- More mental health and wellbeing champions across workplaces
- Children meeting their expected developmental outcomes at age 2 to 2.5 years will be 90%
- More cancers are diagnosed at Stage I and II and a higher proportion of cancers are diagnosed within 28 days
- Full implementation of the Community Mental Health Framework for adults and older people

#### **By 2025:**

- Improve healthy life expectancy and reduce the gap within County Durham and between County Durham and England
- We will have a smoke free environment with over 95% of our residents not smoking and an ambition that pregnant women and mothers will not smoke
- Decrease overall levels of unemployment and specifically close the employment gap between the general population and those living with a long term physical or mental health condition, or with a learning disability
- Over 90% of our children aged 4-5 years, and 79% of children aged 10-11 years are of a healthy weight

- Improved mental health and wellbeing evidenced by increased self-reported wellbeing scores and decreased suicide rates
- Increase the number of organisations involved in Better Health at Work Award to improve health and wellbeing interventions at work

## Strategic priority 1: Starting Well

### Why is this important?

Starting well begins with a baby's mother and family being healthy before, during and after pregnancy. The first 1001 day in a child's life is fundamental to providing the best start in life during which the foundations of a child's development are laid.

Childhood is the springboard to a successful adulthood. It is the foundation on which our lives are built. We will provide the best support to expectant mothers and mothers of new-born babies and their families. For our vulnerable children and families, we will provide a targeted offer of support to reduce inequalities and improve their health and wellbeing, including supporting our children and young people with Special Educational Needs and Disabilities to achieve the best outcomes.

Better outcomes for children cannot be achieved through health and social care service intervention in isolation. How children live, learn and play are all key drivers of healthy development. Other social factors including poverty, poor housing, unstable employment, poor access to green space and community connections act against the ability of parents and families to create a safe, healthy and nurturing environment for their children. Parenting and attachment are critical to a child's development and evidence shows children who are exposed to adverse events such as domestic abuse or alcohol misuse can be affected negatively, both physically and mentally, throughout their adolescence and into adult life. These factors all determine whether a child will be more likely to thrive and achieve their optimum potential in life.

We know that the needs of parents and the family environment have a significant impact on the life chances of the child, therefore our Early Help approach takes account of the whole family's needs. We want to better support families, to help them to cope with the difficulties they face and to support families to be resilient and thrive. We recognise the benefits of offering parents and carers help so they can better keep their children safe and support their health and development, so they in turn have the right environment to flourish into resilient adults. Universal and targeted Health Child Programme contacts, including home environment assessment, provide opportunities to identify where families need additional support to keep children and young people safe from harm.

We will improve health and wellbeing outcomes for all children and young people and help children and their families achieve and maintain their optimum mental and physical health, resilience and wellbeing. An important part of this is a focus on physical literacy, developing the fundamental movement skills that all children need, which gives them confidence to participate in different physical activities, sports, and games.

School holidays can be difficult for some families because of increased costs, such as food and childcare coupled with reduced incomes. For some children this can lead to a holiday experience gap, where children from disadvantaged families are less likely to access organised out of school activities and more likely to experience 'unhealthy holidays' in terms of nutrition and physical health and more likely to experience social isolation. In Durham, we recognise that providing enrichment activities and healthy food over the holidays can help pupils, including those with additional needs, return to school engaged, invigorated and ready to learn.

The Children and Young People's Strategy contains the priorities for improving services and life opportunities for children and young people. The Health and Wellbeing Board will provide strategic oversight to ensure that improved health and wellbeing outcomes of our children is delivered within this strategy, including reducing unacceptable inequalities, which our more vulnerable children encounter.

Strategic Priority 1	Starting Well: This priority covers the early years of life from conception to young adulthood and includes pregnancy, birth, and childhood	
Core Deliverables	<ul style="list-style-type: none"> <li>• Ensure immunisation rates are maintained</li> <li>• Support young adults with Special Educational Needs and Disabilities, and Care Leavers, up to age 25 to reduce inequalities and improve life outcomes through high quality transition work from children to adult services, planning with young people and their families, access to the 0-25 Emotional Resilience Service, and proactive contact from the 0-25 Family Health Service</li> <li>• Ensure our children and young people have a safe childhood through positive parenting work, promotion of resources to support managing common childhood illness and building resilience work with children and young people to promote safe relationships.</li> <li>• Continue to improve how, across the system we identify perinatal mental health issues during the antenatal period and embed appropriate pathways for support</li> <li>• Support the early identification of financial / employment issues for pregnant women and offer support for their financial circumstances</li> <li>• Develop whole system commission for wellbeing and mental health</li> <li>• Implement and embed the national trailblazer for mental health support teams in identified schools</li> <li>• Work within Education, Early Help, Inclusion and Vulnerable Children, Children’s Services and universal health services to improve the workforce’s ability to understand mental health, and where appropriate undertake a brief intervention and signpost or refer accordingly.</li> <li>• Support women to achieve a smoke free pregnancy through whole system change, tackling tobacco dependency in pregnancy as an addiction not a lifestyle choice</li> <li>• Support spatial policy and regeneration programmes which aim to improve health and reduce health inequalities</li> <li>• Develop and implement the Health and Wellbeing Framework for education settings to improve the health of children</li> <li>• Support women to initiate and continue breastfeeding their babies through the County Durham ‘Call to Action’. To change the culture of breastfeeding in our county, whilst promoting and maintaining UNICEF Gold Baby Friendly Accreditation within key services</li> <li>• Continue the countywide offer around physical activity and good nutrition including holiday activities specifically targeting vulnerable communities and health inequalities</li> <li>• Reduce preventable unintentional injuries among children and young people and reduce inequalities, through the implementation of the County Durham Prevention of Unintentional Injuries Framework</li> <li>• Consider a range of population approaches to improving children’s oral health across County Durham including community water fluoridation</li> <li>• Increase the roll out in schools of ‘cutting the cost of the school day’ (e.g. non branded clothing or trainers / affordable school uniforms / uniform swap shops / clothing grants / enriching holiday activities with food / free or subsidised school trips / free breakfasts for all to avoid stigma / provision of resources for learning at home)</li> <li>• Work better across children’s and adult services within our system as a whole to support the effective transition of identified vulnerable young people aged 14+ towards adulthood and their transition to adult services where required</li> <li>• Improve speech, language and communication outcomes for children across the County to support school readiness</li> <li>• Improve access to leisure, culture and enriched experiences</li> <li>• Increase the number of children and young people who take part in positive activities</li> <li>• Implement the approach to wellbeing which builds on the positive work in communities and involves communities in decisions about services</li> <li>• Incorporate digital approaches and virtual technologies to maintain full access to services for children, young people and families</li> </ul>	
Delivery plan mechanism	<ol style="list-style-type: none"> <li>1. <b>County Durham Tobacco dependency in Pregnancy steering group action plan</b></li> <li>2. <b>Children and Young People Mental Health, Emotional Wellbeing and Resilience Local Transformation Plan</b></li> <li>3. <b>County Durham Commissioning and Delivery Plan 2020-25</b></li> <li>4. <b>Special Educational Needs and Disabilities Strategic Partnership written statement of action</b></li> </ol>	<ol style="list-style-type: none"> <li>5. <b>Best Start in Life Steering Group action plan</b></li> <li>6. <b>Oral Health Framework</b></li> <li>7. <b>Unintentional Injuries Framework</b></li> <li>8. <b>Healthy Weight Alliance Framework</b></li> <li>9. <b>Poverty Action Steering Group Delivery Plan</b></li> <li>10. <b>Durham and Tees Valley Mental Health and Learning Disabilities Partnership plan</b></li> </ol>

## Case Study – Starting Well

### **Tackling Inequalities Fund (TIF) (managed by the Active Partnership, County Durham Sport).**

The Sport England Tackling Inequalities funding programme focusses on the negative impact of Covid-19 and the widening of the inequalities in sport and physical activity, as the result of a survey conducted during the pandemic. The survey highlighted gaps in activity levels across existing disadvantaged groups who are suffering most from the pandemic and suggested that Covid-19 was likely to have a significant impact on their ability to be active.

The funding aims to minimise the impact of Covid-19 on activity levels in these groups ensuring the physical activity participation inequality gap doesn't widen during this period by providing funding to organisations and community groups working with the Sport England target audience to remain connected and keep them active during the pandemic restrictions and recovery stages.

£150,000 was secured and 21 community organisations across the County have been supported through this funding programme which has had a significant impact on people's ability to stay active during the pandemic, providing a positive impact on physical and mental wellbeing along with reducing social isolation.

During the pandemic Seaham Harbour Support Services have been supporting families at crisis point *'The TIF funding has helped to bring people together through physical activity, the equipment was well received and engaged young teenagers who would usually sit on digital devices.'*

Feedback from families and young people:

*'what an amazing morning'*

*'they all had a great time and are asking to do it again'*

*'this is the first time I've taken my kids, I was uncertain, but the staff were experienced in working with children with disabilities and were fantastic – they made adaptations for us to ensure we were able to join in'*

*'thank you for a fun, relaxed session'*

*'such a fun and different morning'*

*'I'm so glad we booked a second go as my daughter's confidence has grown so much'*

*'it was lovely to see my son so relaxed and happy canoeing on the water'*

### **Area Action Partnerships (AAPs)**

AAPs have funded projects that positively impact on the health and wellbeing of our communities, for example sports packs were delivered to family homes which included skipping ropes, bats and balls, throwing scarves etc along with a packed lunch. To further encourage families to engage with each other in physical and mental activity, the project included the following large items that were delivered individually on a rotation programme for 4 days a week: Connect 4, Noughts and Crosses, Cricket Set, Volleyball net and bat, Badminton racket and shuttlecock, Chess and Jenga.

Feedback from families and young people:

*'The activities provided have been fantastic'*

*'Thank you for our new hula hoops, fruit and veg also our fun bat and balls. Kids love them'*

*'Just want to say thank you to u all for everything you have done for the kids during the Pandemic, you have sent packs after packs to keep the kids busy and plenty of fresh fruit and veg'*

## Strategic priority 2: Living Well

### Why is this important?

Good health is important at any age. While the length of life of local people continues to increase, the years that people can expect to live a high quality of life sees significant differences across County Durham. The gap between the most deprived and least deprived areas within County Durham is 8.1 years for men and 6.9 years for women. This coupled with an ageing population, physical inactivity and people living with a range of health conditions can affect people's ability to work and contribute to their communities and has an impact on our health and care services.

We will work with businesses to help create a healthy community by offering quality employment and creating healthy workplaces to help ensure they retain their staff, attract new talent and help to keep the communities they work within, healthier. We will also support businesses to implement effective preventative strategies, not only to promote better physical and mental health but also help avoid the costs of absenteeism and reduced productivity which are associated with poor mental health and / or long-term conditions.

It is important that we focus on improving the mental health and wellbeing of our population, as well as focusing on businesses. Significant work is currently being undertaken to address the mental health and emotional wellbeing needs of individuals, families and local communities including reducing self-harm and suicide prevention. Activity has been accelerated to address the direct and indirect impacts of Covid-19.

The links between an improved environment and improved health and wellbeing are clear. We will work with partners and communities to maximise the quality of our local environment and clean air, with opportunities to be physically active and achieve a healthy weight. We will encourage transport choices that are the most sustainable by improving the attractiveness of these modes of transport for everyday journeys. The Health and Wellbeing Board will provide strategic oversight to ensure that improved health and wellbeing outcomes for our residents are delivered within this strategy, including promoting high quality natural and formally managed open spaces for recreation, food growing and exercise. We will work with partners to put support in place to encourage sustainable 'active travel', modes of transport that use the human body as power, such as cycling and walking, to get from place to place. These actions will also help to address climate change and aid recovery from the pandemic.

Housing condition can influence our physical and mental health, for example, a warm and dry house can improve general health outcomes and specifically reduce respiratory conditions and good housing promotes positive mental health. To address the existing and future needs of older people and people with disabilities, it is important that sufficient homes are delivered of an appropriate type and standard, which is reflected in the County Durham Plan.

We will enable our local communities to increase people's skills, knowledge and confidence to look after their own health and wellbeing. We will encourage people to eat healthily by promoting the five a day message and increase their physical activity.

In County Durham, we recognise that for many people not smoking, having a healthy weight, being physically active, drinking moderate levels of alcohol and having good and supportive relationships is not a choice but shaped by the environment in which they live. We will adopt a 'settings' approach which creates an environment for healthy behaviours, including schools, workplaces, green spaces, community centres and primary care so people can live well.

Alcohol and substance misuse causes harm to people's health including their mental health and can impact on the ability of individuals to access or sustain employment. However, alcohol and substance misuse related incidents have a much wider effect on communities, such as public order, criminal damage and violence offences. Therefore, it has been agreed that alcohol and substance misuse reduction is a priority within the Safe Durham Partnership Plan although partner across the Safe Durham Partnership and Health and Wellbeing Board will work together to address alcohol and substance misuse reduction.

Partners will work together to reduce alcohol and drug misuse, campaigning in partnership for changes in the law around minimum unit pricing and tackling the organised crime groups who supply illegal drugs. Preventing further misuse of drugs and alcohol is also an area of focus for the Health and Well Being Board.

We will strive to shift the culture and influence policy and legislation to support improving people's health, for example, minimum unit pricing for alcohol.

**Strategic Priority 2**

**Living Well: This priority covers adulthood, from leaving school/university to retiring and includes our working life**

<p><b>Core Deliverables</b></p>	<ul style="list-style-type: none"> <li>• Work with a range of partners to deliver Making Every Contact Count to enable every contact to be a healthy contact.</li> <li>• Ensure adult focussed services consider the adult within a parenting role (children and young people under 19) how their additional needs impact on their children</li> <li>• Ensure opportunities for service users and their carers to be involved in the development and co-production of services are maximised</li> <li>• Implement the approach to wellbeing which builds on the positive work in communities and involves communities in decisions about services</li> <li>• Develop a healthy settings approach to support health improvement and reduced health inequalities across a range of settings, including early years schools, workplaces, pharmacies, leisure facilities and voluntary and community sector organisations</li> <li>• Better identify the rate of self-harm and reduce the levels of suicide across County Durham taking proactive action together through the Suicide Prevention Alliance to reduce this</li> <li>• Work together across our system to implement the national Community Mental Health Framework, transforming our offer and improving access to appropriate services based on need</li> <li>• Reduce the prevalence of harm caused by smoking through tobacco control measures and redesigning the stop smoking service to improve the services to tackle tobacco-related ill health</li> <li>• Develop a Sexual Health Strategy for County Durham to ensure equitable access and a strategic focus on reducing sexually transmitted infections and good contraceptive health</li> <li>• Support the drive for a minimum unit price for alcohol to create a County Durham that has reduced harm from alcohol</li> <li>• Increase the use of active travel to encourage physical activity (including cycling and walking) to reduce traffic emissions related respiratory illness and carbon emissions</li> <li>• Increase the uptake of national/local screening programmes and work to address inequalities in access and outcomes</li> <li>• Help people to manage their own long-term conditions including diabetes and respiratory conditions through self-management programmes through a range of methods, including digitally, to access advice, self-help in minor illnesses and health (including mental health) promotion</li> <li>• Attract more businesses and the voluntary and community sector to participate and achieve the Better Health at Work award to improve health and wellbeing interventions at work</li> <li>• Increase the number of organisations using the volunteering kite mark, which is managed by Durham Community Action</li> <li>• Work with communities to develop targeted strategies to provide better support for vulnerable population groups, for example, those with learning disabilities, autism or BAME (including GRT) communities</li> <li>• Consider Census 2021 data to identify BAME communities and the support needed</li> <li>• Ensure procurement processes encourage providers to have a focus on health and wellbeing within the workplace</li> <li>• Work with the Economic Partnership to maximise local opportunities for economic and job development, including apprenticeships, with a focus on closing the gap in employment opportunities for those with a long-term health condition or disability.</li> <li>• Implement initiatives to support individuals to develop healthy eating habits and take part in physical activity</li> <li>• Contribute to the implementation of the Housing Strategy (which includes the strategic approach to addressing homelessness) where this relates to housing and health include accommodation services for people with the most complex needs</li> <li>• Raise awareness of benefits to health from the perspective of an appropriate work life balance, in helping manage stress and anxiety</li> <li>• Work with the Environment and Climate Change Partnership to align health and climate change communications and awareness raising events</li> <li>• Work with the Environment and Climate Change Partnership to deliver measures in the Climate Emergency Response Plan which benefit improved health and health equity</li> </ul>	
<p><b>Delivery plan mechanism</b></p>	<ol style="list-style-type: none"> <li>1. <b>Tobacco Control Alliance Action Plan</b></li> <li>2. <b>Healthy Weight Alliance Action Plan/Physical Activity Strategy Committee Framework</b></li> <li>3. <b>Think Autism in County Durham</b></li> <li>4. <b>Durham and Tees Valley Mental Health and Learning Disabilities Partnership</b></li> </ol>	<ol style="list-style-type: none"> <li>5. <b>Mental Health Strategic Plan</b></li> <li>6. <b>Sexual Health Strategy (when completed)</b></li> <li>7. <b>County Durham Commissioning and Delivery Plan 2020-25</b></li> <li>8. <b>Poverty Action Steering Group Delivery Plan</b></li> <li>9. <b>Climate Emergency Response Plan</b></li> </ol>

## Case Study – Living Well

### Active Places

Active Places (Sport England funded, and managed by the Active Partnership, County Durham Sport) is a pilot programme running in Shildon and Deerness Valley to build healthier, more active communities. It supports residents to increase and sustain their activity levels to benefit from improved physical and mental wellbeing and to address social isolation. The priority is tackling inactivity and inequality and focusing on engaging people who do less than 30 minutes a week of sport or physical activity.

This is an exciting opportunity to bring about real change, improving physical health and wellbeing and bringing people together, inspiring people to be active and provide accessible, enjoyable and sustainable opportunities to participate.

Residents who participated in the Active Places programme said:

*'I've done 20 minutes continuous exercise and I absolutely love it! I'm out in the fresh air, had a bit chatter and exercised! I can't believe I'm still exercising a week later. So much fun!'*

*'My fitness deteriorated in the first lockdown and I struggled with day to day tasks like walking up the stairs and getting dressed. 8 weeks on from starting and I exercise 3/4 times a week, 10 minutes jog to the park, 10 minutes exercise and 10 minutes jog/walk home. I can feel my fitness has improved, I'm stronger, have more stability and everything is easier.'*

*'I feel much better! I'm just enjoying the time to switch off from the world. Things are quite high pressure from me (besides the pandemic) and that's likely to continue so it's really a welcome diversion.'*

### Area Action Partnership - Community Pantry

AAPs have developed a number of food related projects to support communities, particularly during the pandemic. One example is a Community Pantry funded with Councillors Neighbourhood Budget monies, which operates on a pay as you feel model using surplus food donated from organisations including FareShare, local businesses, the Co-op and members of the public.

*"We are incredibly grateful to everyone who is giving their time to support this and their communities, proving that help will always be on hand."*

### **Strategic priority 3: Ageing Well**

#### **Why is this important?**

Ageing well is something that happens throughout our lives, not just in old age: Starting and Living Well contribute as much if not more to ageing well as anything that happens later in life.

Older people in the county play a vital role in contributing to the life of their communities, and increasing numbers are continuing in paid employment well past State Pension age as well as volunteering and playing an active role in their local communities. However, older people can also be at increased risk of poverty (including fuel and food poverty) and more vulnerable to cold and heat extremes because of climate change. We need to work closely with the Poverty Action Steering Group and ensure the best possible take up of benefits and other types of financial support to improve people's daily lives and their health and wellbeing.

However, with age comes the increased likelihood of living with one or more long term conditions and/or sensory impairment. We will integrate commissioning between health and social care for more effective integrated service delivery where it makes sense to do so. We will seek to understand the opportunities at every stage of the development and delivery of joined up health and care services.

Older people have an increased risk of dementia and large numbers of older people live with depression and are also vulnerable to social isolation and rural isolation.

We will work with communities to target approaches which enable our older people to remain independent and to lead physically active lives with meaning and purpose and will ensure that when the time comes, people receive good quality end of life care and have a good death. We will also target support for their carers and families.

<b>Strategic Priority 3</b> <b>Ageing Well: This priority covers additional actions in later life, noting that ageing begins at birth</b>		
<b>Core Deliverables</b>	<ul style="list-style-type: none"> <li>• Promote the uptake of the vaccinations including flu, pneumococcal and shingles through marketing campaigns and collaborative, place-based working across County Durham</li> <li>• Review and strengthen the County Durham Dementia Strategy, particularly in regard to prevention</li> <li>• Ensure dementia is identified and diagnosed at an early stage and families, carers and communities are helped to manage their condition</li> <li>• Consider how Dementia Friendly Communities will be sustained/further developed post Covid-19</li> <li>• Continue to work with partners and providers to reduce the incidence of falls and fractures in older people through age appropriate development in the built environment, training and digital technology</li> <li>• Refresh and implement the Falls Prevention Strategy</li> <li>• Work with providers to increase the offer of fit for purpose sustainable housing stock to enable occupancy of residents into later years</li> <li>• Develop housing and care options specifically to meet the needs of the older and disabled people within our communities</li> <li>• Increase the scale and integration of out of hospital services, based around communities and improve population health outcomes</li> <li>• Ensure the frail elderly are able to live well at home for as long as possible and receive high quality, consistent levels of service</li> <li>• Increase referrals and adaptations done by the warm and healthy homes programme</li> <li>• Support carers in their caring role so they are able to maintain their own health and wellbeing</li> <li>• Support community connectivity and the approach to wellbeing to help address social isolation and loneliness</li> <li>• Consider rural proofing for health in policy, planning and commissioning of services</li> <li>• Implement the approach to wellbeing which builds on the positive work in communities and involves communities in decisions about services</li> <li>• Work with Primary Care Networks to ensure social prescribing provides sufficient opportunities for people to access the local, community-based help they need</li> <li>• Improve the end of life pathway to ensure providers aspire to delivering support to people at the end of their life to deliver personal, bespoke care</li> <li>• Identify opportunities for intergenerational experience, learning and skills sharing in communities</li> <li>• Undertake Health Equity Audit of Care Connect with a view to making the most of opportunities to promote health and wellbeing</li> <li>• Explore opportunities to promote Making Every Contact Count in domiciliary care</li> <li>• Ensure work on economic inclusion takes account of the greater proportion of older people in the population in addition to those with mental ill health, learning disabilities and those with long term conditions</li> <li>• Develop and implement an Active Ageing Strategy</li> </ul>	
<b>Delivery plan mechanism</b>	<ol style="list-style-type: none"> <li>1. <b>County Durham Commissioning and Delivery Plan 2020-25</b></li> <li>2. <b>Housing Strategy</b></li> <li>3. <b>Falls Prevention Strategy</b></li> <li>4. <b>Mental Health Strategic Plan</b></li> </ol>	<ol style="list-style-type: none"> <li>5. <b>Dementia Strategy</b></li> <li>6. <b>Palliative and End of Life Care Strategy</b></li> <li>7. <b>Poverty Action strategy</b></li> <li>8. <b>Ageing Well Strategy</b></li> </ol>

## Case Study – Ageing Well

### Dementia Adviser Service

The Durham Dementia Adviser Service is commissioned by DCC and delivered by Alzheimer's Society. It supports people living with Dementia and their carers by providing advice and support and by connecting them with their communities. This helps to build support networks round the family to increase their future resilience, so they know where to turn to when they need support.

They support people through the diagnosis process and right through their journey where they are required. There is no limit as to how many times people can go back into the service as it's recognised that people's needs change over time.

They aim to take a holistic approach and to improve people's wellbeing through their interventions and to help reduce stigma by awareness raising and increasing understanding. They also strive to reduce social isolation which can be very common when people receive a diagnosis as they are likely to stop doing all the activities they previously enjoyed for fear of stigma. Carers also experience high levels of social isolation with little opportunity for respite and the service aims to connect them with groups and organisations that can help.

Residents who used the Dementia Adviser Service said:

*'Thank you so much for your help and advice, especially the telephone calls'*

*'What a difference one call can make, I could cry with how much relief I feel after talking with you'*

*'You have been an absolute star; I have been completely lost and you have been able to guide me to where I need to be. I don't like to burden people with my worries, but you have lightened my load and put me in touch with people who can help me. Thank you'*

## **Performance Management Framework**

The Health and Wellbeing Board have developed a high level objectives framework to measure the success of achieving the priorities and the vision in this strategy. Delivery of the actions in this strategy is undertaken by the Health and Wellbeing Board working with other partnerships and the Board's subgroups.

## Enabling factors

There are a number of enabling factors that are relevant to all actions in this strategy to ensure that it is delivered, which have been developed using our approach to wellbeing (A2W).

- **Leadership and Advocacy (A2W: Working better together)**
  - Make health and wellbeing everyone's business through cross-sector capacity building
  - Promote key health messages through strategic influence, advocacy and PR
- **Whole System Approach (A2W: Working better together)**
  - Multiagency working across County Durham to achieve the best outcomes to address health and wellbeing needs in an efficient and sustainable way
  - Commission and deliver high quality, safe and integrated health and wellbeing services
  - Strong partnership governance arrangements
  - Effective communications and information sharing across partners and communities
- **Strategic focus on prevention and early help (A2W empowering communities and being asset focused)**
  - Encourage a resource shift towards prevention and early intervention for people to remain as independent as possible making the best use of resources
  - Adopt a whole family approach and recognising the roles played by carers and significant others
- **Performance management and intelligence (A2W: using the evidence base - underpins the approach and why we are doing things)**
  - Use Joint Strategic Needs Assessment and Durham Insight to support analytical view of priorities for health
  - Population Health Management
  - Use the best available evidence to address local needs including accessing data to identify areas where targeted intervention is required to inform commissioning decisions
- **Targeted Approach (A2W: Building Resilience and helping the most disadvantaged and vulnerable)**
  - Appropriate, systematic, coordinated and targeted interventions to improve the health and wellbeing of the most and disadvantaged groups fastest
- **Community Engagement (A2W: Doing with - Not to, and empowering communities)**
  - Meaningful engagement with local communities, patients, service users, carers and the public in commissioning and delivery of health and wellbeing services
  - Empowering and enabling communities and individuals to take responsibility for their own health and wellbeing
- **Workforce (A2W: building resilience – applicable to our workforce as well as our communities)**
  - Ensure staff have the right knowledge, skills and competencies including appropriate IT skills in response to the increased use of technology as a result of the Covid-19 pandemic.

- **Co-production (A2W: Doing with - Not to)**
  - Services are co-designed and co-produced with the people who need them, as well as their carers
- **Equitable access (A2W: Working better together)**
  - Everyone has the same opportunities to access health and social care services

The JHWS evidences sharing decision making with communities when designing and developing services for those who need them.

## Appendix 1: Joint Health and Wellbeing Strategy priorities and alignment to other Strategic Partnership Plans

<b>Joint Health and Wellbeing Strategy 2021 – 2025: Starting well</b>	<b>County Durham 5 Year System plan 2020 - 2025</b> <ul style="list-style-type: none"> <li>• Prevention</li> <li>• Children and Young People’s Strategy</li> <li>• Children and Young People’s mental health</li> <li>• Learning Disabilities</li> </ul>	<b>Children and Young People’s Strategy 2019 – 2022</b> <ul style="list-style-type: none"> <li>• Young people gain the education, skills and experience to succeed in adulthood</li> <li>• All children and young people have a safe childhood</li> <li>• Children and Young People enjoy the best start in life, good health and emotional wellbeing</li> <li>• Children and young people with SEND achieve the best possible outcomes</li> </ul>	<b>Safe Durham Partnership Plan 2021 – 2025</b> <ul style="list-style-type: none"> <li>• Supporting victims and protect vulnerable people from harm</li> </ul>
<b>Joint Health and Wellbeing Strategy 2021 – 2025: Living well</b>	<b>County Durham 5 Year System plan 2020 - 2025</b> <ul style="list-style-type: none"> <li>• Primary care</li> <li>• Urgent care treatment centre review</li> <li>• Development of place based 0-25 services</li> <li>• Workforce</li> <li>• Out of hospital care</li> <li>• Urgent &amp; emergency care</li> <li>• Planned care</li> <li>• Mental Health</li> <li>• Learning Disabilities</li> </ul>		<b>Safe Durham Partnership Plan 2021 – 2025</b> <ul style="list-style-type: none"> <li>• Promote being safe and feeling safe in your community</li> <li>• Reduction of alcohol and substance misuse</li> </ul>
<b>Joint Health and Wellbeing Strategy 2021 – 2025: Ageing well</b>	<b>County Durham 5 Year System plan 2020 - 2025</b> <ul style="list-style-type: none"> <li>• End of Life</li> <li>• Dementia</li> </ul>		

العربية (Arabic) (中文 (繁體字)) (Chinese) اردو (Urdu)  
polski (Polish) ਪੰਜਾਬੀ (Punjabi) Español (Spanish)  
বাংলা (Bengali) हिन्दी (Hindi) Deutsch (German)  
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## Appendix 3: Joint Health and Wellbeing Strategy Consultation Overview

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- 1 There were 47 responses to the public consultation. Between 75% and 98% of respondents agreed with each of the separate six objectives chosen across the three priorities.
- 2 Investing in Children hosted two Agenda Days with a range of young people to gather their views. Nine young people aged between 16–21 provided feedback on the JHWS. The young people agreed that the strategic priorities were correct as they covered the life course, and they provided the following feedback:

- Young people agree that Mental Health should be a priority, especially given the impact of the pandemic as it has been difficult throughout the pandemic for young people to maintain routines and enjoy aspects of normal life. The restrictions have made accessing help and support more problematic and have made young people feel isolated from friends and family, whether this is physical isolation or due to restricted access to technology. Young people feel that Mental Health services should be more accessible and should be in an open and comfortable environment.

Mental Health is identified in the JHWS as a priority across all age groups, and the Children and Young People’s Mental Health, Emotional Wellbeing and Resilience Local Transformation Plan (LTP) is one of the delivery plan mechanisms in the JHWS. The LTP contains detailed actions for children and young people to support their emotional wellbeing and resilience.

- Concerns about unemployment were raised, and the young people felt there should be support for them to get an apprenticeship or a job. One of the core deliverables in the JHWS is to work with the Economic Partnership to maximise local opportunities for economic and job development, including apprenticeships. An Economic Strategy is also in development which will incorporate this.
- Access to sexual health services, information about the LGBT+ community, and education were all flagged as separate concerns as young people are not able to access the help and support in these areas as freely as they would pre-pandemic.

One of the core deliverables in the JHWS is to develop a Sexual Health Strategy for County Durham to ensure equitable access and a strategic focus on reducing sexually transmitted infections and good contraceptive health.

Durham County Council have a contract with Humankind who provide friendly and practical support for young people who identify as LGBT+. They offer lots of connectivity online due to the pandemic, and moving forward, blended services (a combination of online and face to face services) will continue to provide support as lockdown restrictions are eased.

Schools across the County have provided remote learning for the majority of students, whilst schools have remained open for vulnerable young people who need to attend. To ensure learning could continue, laptops were provided to young people who did not have access to digital devices.

- The young people agreed that physical health has been impacted as people across all age groups have become less physically active and suggested that more opportunities for exercise which is fun and appealing are created.

Lots of work has taken place to encourage physical activity to continue, and examples of the projects funded through the Tackling Inequalities Fund, and through Area Action Partnerships are included in JHWS.

The Active Partnership School Games is an online resource, which is a way for children to get physically active and engage in new activities and support the values of the school games programme. The resource is being distributed by County Durham Sport via social media.

Mobile physical activity sessions funded through the Tackling Inequalities Fund (TIF) have provided families on GRT sites with access to robust physical activities which get people of all ages back to being active.

- The young people acknowledged that obesity in children is in the strategy and suggested that children who are underweight should also be a concern, especially given the number of families who are living in poverty.

It is acknowledged that obesity is referenced in the strategy, however this is in relation to a specific performance measure. The objectives in the JHWS refer to children and young people

being a 'healthy weight', which addresses overweight and underweight.

The HENRY (Health, Exercise and Nutrition for the Really Young) approach will also be rolled out across County Durham over the next few years by the 0-25 Family Health Service. This approach works in partnership with families to make and sustain positive lifestyle changes, including diet, routines and physical activity, which impact through childhood to adulthood, supporting healthy weight.

- Young people suggested that the promotion of foodbanks and requests for help/donations for the food banks should be promoted.

Poverty, including food poverty is included in JHWS and the work of the County Durham Community Hub supports this. Durham County Council also regularly ask staff to contribute to local food banks throughout the year as well as more timely specialist requests, for example at Easter and Christmas

The Area Action Partnerships have funded a community kitchen, and projects such as the REfUSE 'pay as you feel' Café are in operation across the County, where the ultimate aim is to minimise food waste and abolish food poverty.

3 A range of comments were also provided as a result of the consultation, details of the changes made to the JHWS in response to these are outlined below.

- We were asked 'what does increase the number of organisations involved in Better Health at Work Award mean' and have expanded the term in the JHWS to make this clearer.
- We were asked 'what is meant by physical literacy', so the terminology in the JHWS has been expanded to explain this.
- We were asked 'what does cutting the cost of the school day mean' and have included examples of this in the JHWS.

4 Through the consultation, the following were raised as gaps in the JHWS:

- Alcohol and Drugs, Anti-Social Behaviour and Domestic Violence were highlighted as gaps. These issues are specifically addressed within the Safe Durham Partnership Plan. Alcohol,

substance misuse and domestic violence are referenced in the JHWS due to the impact they have on people's health, including their mental health, but it is to note that these are addressed elsewhere.

- Reference to the 'Leisure Transformation Consultation and Strategy' was mentioned, however this strategy will help achieve the actions within the JHWS around physical activity, the outside environment and healthy weight.
- A number of responses highlighted that affordability around transport and access to leisure facilities was an issue. This will be addressed through the Physical Activity Framework currently in development and also through the Poverty Action Steering Group.
- Black and Minority Ethnic communities was highlighted as a gap, however the JHWS clearly identifies that the ongoing pandemic has impacted disproportionately on our BAME community, and lockdown has had a higher impact on BAME communities. The JHWS states that we will work with communities to develop targeted strategies to provide better support for vulnerable population groups, which includes BAME communities.

The GRT community is County Durham's biggest ethnic minority group. There is a GRT Executive Group and an affiliated action plan for GRT communities on our permanent sites and temporary stop overs sites. A contract is also in place for GRT communities regarding access to services, however the JHWS acknowledges that in County Durham, the impact of Covid-19 on Gypsy, Roma Travellers communities requires further investigation.

There is focus on ensuring equity in the uptake of Covid-19 vaccinations, with a regional group focused on this. It is also a key area of action for the local Immunisations Board.

A core deliverable has been included in the JHWS stating that we will consider Census 2021 data to identify BAME communities and the support needed. Although work will take place to address these issues it will take time to get a better understanding of need.

- Feedback indicated that LGBT+ was missing, and that people were not able to access the help and support from LGBT+ services as freely as they would pre pandemic.

As previously noted, we have a contract with Humankind to provide support, which has continued throughout the pandemic and will continue as a blended approach as lockdown restrictions ease. Young people from an LGBT+ group were included in the IIC Agenda Days.

- Parenting / teenage pregnancy is highlighted as a gap. This is included in the JHWS but has not been identified as a priority area as we have made progress in recent years in reducing teenage conceptions, and a range of work continues to support this, as outlined below:

The One Point Service in collaboration with key partners such as Durham Works deliver a Young Parents programme, funded by Public Health, on an annual basis to a target number of 70 young parents.

Harrogate and District NHS Foundation Trust 0-25 service have delivered the Vulnerable Parent Pathway, which is being updated and renamed as Enhanced Parenting Support Pathway and will include additional support to a young unsupported parent. The One Point Service co deliver this programme providing additional help and support at key points.

The One Point Service delivers a range of evidence based parenting programmes such as Triple P, Strengthening Families and Incredible Years and also works with a range of partners including the Youth Justice Service, and Child and Adolescent Mental Health Services (CAMHS) to provide parenting support.

- Consultation feedback recognises a gap for older people who have retired and mentions a gap around participation in groups within their communities. This is recognised throughout the JHWS through our Approach to Wellbeing and the work with VCS organisations around empowering communities.

An Ageing Well Strategy is also in development, which will encompass this and will look at expanding integration, the approach to active ageing and how older people can continue to make positive contributions to society, which has already begun to be evidenced through the Covid-19 Pandemic response within communities. The Ageing Well strategy will have a positive impact on older people across the board.

County Durham Sport is part of 'Live Longer Better', a national network of Sport England Active Partnerships, working together to prevent and mitigate isolation, increase physical and mental activity to increase resilience, promote knowledge and understanding about living longer better among older people and the wider population to counteract the detrimental effects of ageism, and reduce the risk of and delay or prevent dementia. The network hosts regular events, to hear from a range of voices and to discuss relevant issues.

The project will prompt a conversation on changing the culture around ageing in the region, moving away from a system where ageing is seen as a problem to one where ageing is understood as a normal set of biological processes that can be positively influenced by physical activity.

- Levels of exercise amongst children, young people and young adults, as well as access to free healthy lifestyle choices and activities was identified as a gap, however the JHWS prioritises the importance of exercise throughout the life course. The JHWS also identifies that we will work with partners to put support in place to encourage sustainable 'active travel'.
- It is noted in the feedback that there is a gap in communication with communities, however this is addressed as part of the Approach to Wellbeing, especially around the Community Champions programme and the evolving County Durham Together work. Mutual Aid groups have already been established in communities to provide support in response to the pandemic, which has increased resilience and self-reliance and the work of the County Durham Together Community Hub will continue to build on this moving forward.
- Addressing inequalities in County Durham was highlighted as a gap, yet this is picked up throughout the JHWS.
- The consultation feedback suggests that we are missing how the school curriculum can support the health and wellbeing agenda, however the JHWS clearly references how we will work with schools around the following:
  - Child poverty / cutting the cost of the school day/ holiday activities with food
  - Improved speech, language and communication needs to support school readiness
  - Active 30 programme for physical activity in schools

- Identified mental health leads in schools / national trailblazer for mental health support teams in identified schools
- Fewer applications for take-aways near schools

Sport England is also investing £10.1m of government money to help more schools open their facilities to the public once the coronavirus pandemic is over, and County Durham will receive £138,000 to be managed by the Active Partnership, County Durham Sport.

- Feedback also indicates that we need to include how we will embed climate change impacts in the JHWS and how the Climate Emergency Response Plan outcomes will be built into the JHWS outcomes. The JHWS has been updated to include climate change and the benefits to health and wellbeing and how the Health and Wellbeing Board will work with the Environment and Climate Change Partnership to realise these benefits.
- Reference to Place Based approaches was made in the consultation. This approach is used across County Durham in a variety of different arenas, for example through Children and Young People Early Help Services and through community safety activities.

## 5 General feedback from the consultation included the following:

- The JHWS demonstrates good partnership working.
- Performance measures are not included in the JHWS.
  - There are six high level objectives on which the strategy will be measured. In addition, the JHWS states that a performance management framework will be developed and used to measure success of the JHWS as we move forward.
  - It is anticipated that the Health and Wellbeing Board will receive an annual update on the six objectives in the JHWS (based on a set of KPIs). In addition, thematic updates going to the Health and Wellbeing Board will include relevant performance data.
- Concerns are shared around the support that will be needed post Covid-19 and how communities can achieve this

- This is a priority in the strategy and is referenced throughout.
- Feedback asks how we are ensuring we do not work in silos
  - The JHWS Strategy Development Group who have overseen the development of the strategy is a multi-agency group, and the Strategic Planning Group is sighted on the JHWS to ensure alignment to other relevant plans and strategies. All partners on the Health and Wellbeing Board are asked to sign up to the JHWS as the strategic, multi-agency, placed based document.

## Durham County Council Equality Impact Assessment

**NB:** The Public Sector Equality Duty (Equality Act 2010) requires Durham County Council to have ‘due regard’ to the need to eliminate unlawful discrimination, harassment and victimisation, advance equality of opportunity and foster good relations between people from different groups. Assessing impact on equality and recording this is one of the key ways in which we can show due regard.

### Section One: Description and Screening

<b>Service/Team or Section</b>	Neighbourhoods and Climate Change
<b>Lead Officer</b>	Andrea Petty, Strategic Manager
<b>Title</b>	Joint Health and Wellbeing Strategy 2021-2025
<b>MFTP Reference (if relevant)</b>	N/A
<b>Cabinet Date (if relevant)</b>	
<b>Start Date</b>	October 2020
<b>Review Date</b>	To be reviewed in line with the JHWS (2021-2025)

### Subject of the Impact Assessment

Please give a brief description of the policy, proposal or practice as appropriate (a copy of the subject can be attached or insert a web-link):

The County Durham’s Health & Wellbeing Board (HWB) has a legal responsibility to work in partnership with Clinical Commissioning Groups (CCGs) to prepare and deliver a Joint Health and Wellbeing Strategy (JHWS). This is a statutory duty under the Health and Social Care Act 2012.

The JHWS is informed by Joint Strategic Needs Assessment (JSNA)<sup>1</sup>, which is part of Durham Insight. This evidence base is an assessment of the current and future health, wellbeing and social care needs of residents in County Durham.

The Joint Health and Wellbeing Strategy (JHWS) 2020-25 outlines a vision where we would like to see County Durham to be heading in terms of our physical & mental health and wellbeing, whilst closing the gap in health inequalities across County Durham, and between County Durham and England. The vision for the Board is that:

***“County Durham is a healthy place, where people live well for longer”***

<sup>1</sup> <https://www.durhaminsight.info/jsna/>

The HWB agreed the JHWS 2020-25 in March 2020, to provide a holding position for a year while work was undertaken on the County Durham Vision 2035, the Marmot 10 year review, and the NHS health inequalities paper.

At that time we could not foresee the impact the global Coronavirus pandemic would have on our services and communities across the County.

Unfortunately, Covid-19 has impacted disproportionately on certain people across the County, particularly our older population, people with existing/underlying health conditions such as diabetes and obesity, our Black, Asian and Minority Ethnic (BAME) populations as well as those living and working in more disadvantaged circumstances. It has had a direct impact on our communities in terms of their health and also a wider indirect impact instigated by lockdown on mental wellbeing across the whole life course, exasperating issues and widening health, social and economic inequalities.

Although recovery will take years, our partners will continue to work together to prevent health and wellbeing inequalities widening even further, and the actions in the JHWS 2020-25 and JHWS 2021-25 support our approach in how we deliver health and social care services in these unprecedented times.

In response to Covid-19, County Durham Together was developed as an overarching approach to support communities.

In March 2020, a Health Impact Assessment (HIA) for health inequalities during Covid 19 was undertaken to provide a 'snapshot' insight into the direct and indirect impact of lockdown on inequalities. It focused on the following areas:

- Socio-economic factors - poverty reduction
- Mental health and emotional wellbeing
- Community assets and community mobilisation
- Inclusion of vulnerable groups

The findings and recommendations from the HIA have been integrated into the JHWS 2021-25, and incorporated into the HWB work programme to ensure action is taken.

The County Durham Vision 2035 was written together with partner organisations and the public. It provides strategic direction and enables us to work more closely together, removing organisational boundaries and co-delivering services for the benefit of our residents. This vision is structured around three ambitions which are:

- More and Better jobs
- People live long and independent lives
- Connected communities

The JHWS will form part of the delivery mechanism for the Vision, with the objectives contained under the vision ambition "People live long and independent lives" which have a health focus being the responsibility of the Health and Wellbeing Board, as well as also working with other partnerships on shared priorities and cross-cutting issues.

The Health and Wellbeing Board will deliver the following objectives under the vision ambition 'People will have long and independent lives':

- Children and young people will enjoy the best start in life, good health and emotional wellbeing
- Children and young people with special educational needs and disabilities will achieve the best possible outcomes
- We will promote positive behaviours
- We will tackle the stigma and discrimination of poor mental health and building resilient communities
- Better integration of health and social care services
- People will be supported to live independently for as long as possible by delivering more homes to meet the needs of older and disabled people

In addition, we will work closely with the Environment and Climate Change Partnership who will deliver on the objective to create a physical environment that will contribute to good health and the Economic Partnership to ensure young people have access good quality education, training and employment.

As mentioned above, the HWB will not just fulfil the objectives in the Vision but also has a duty to meet our statutory obligations under the Health and Social Care Act 2012.

The HWB has three strategic priorities over a life course, which set out what we will focus on to make County Durham a healthy place. These priorities are:

- Starting Well
- Living Well
- Ageing Well

Based on evidence, we have chosen the following objectives across our strategic priorities, that are of importance given the impact they have on people's health and wellbeing, and of where we want to be in 2025:

- Improve healthy life expectancy and reduce the gap within County Durham and between County Durham and England
- We will have a smoke free environment with over 95% of our residents not smoking and an ambition that pregnant women and mothers will not smoke
- Decrease overall levels of unemployment and specifically close the employment gap between the general population and those living with a long term physical or mental health condition, or with a learning disability
- Over 90% of our children aged 4-5 years, and 79% of children aged 10-11 years are of a healthy weight
- Improved mental health and wellbeing evidenced by increased self-reported wellbeing scores and reduced suicide rates
- Increase the number of organisations involved in Better Health at Work Award

Who are the main stakeholders? (e.g. general public, staff, members, specific clients/service users):

Residents of County Durham: All groups within the population of County Durham including service users, carers, patients and people with disabilities.

## Screening

Is there any actual or potential negative or positive impact on the following protected characteristics?

Protected Characteristic	Negative Impact Indicate: Y = Yes, N = No, ? = unsure	Positive Impact Indicate: Y = Yes, N = No, ? = unsure
Age	N	Y
Disability	N	Y
Marriage and civil partnership (workplace only)	N	N
Pregnancy and maternity	N	Y
Race (ethnicity)	N	Y
Religion or Belief	N	Y
Sex (gender)	N	Y
Sexual orientation	N	Y
Transgender	N	Y

Please provide **brief** details of any potential to cause adverse impact. Record full details and analysis in the following section of this assessment.

The Strategy is aimed at improving health outcomes across the county, based on need identified in the JSNA and HIA. We do not anticipate any negative impacts in the implementation of this strategy although our priorities will impact certain groups differently, in order to address identified health gaps.

The Covid-19 pandemic has had negative impact on the groups identified in the JHWS as those who have health inequalities.

This strategy therefore focuses on the areas that are of the most significant importance given the impact they have on people's health and of where we want to be in 2025. It does not cover 'all' aspects of health and wellbeing, and it is to be noted that some areas are also addressed in other plans and strategies.

How will this policy/proposal/practice promote our commitment to our legal responsibilities under the public sector equality duty to:

- eliminate discrimination, harassment and victimisation,
- advance equality of opportunity, and

- foster good relations between people from different groups?

The JHWS aims to improve health and wellbeing for all sections of the community which is beneficial to all protected groups and helps us to pay due regard to the public sector equality duty. The strategy is the vehicle which provides commissioners with a focussed number of strategic objectives and actions, helping to advance equality of opportunity where possible.

This is especially important as we move into the recovery phase from Covid-19.

Although beneficial to all, objectives are likely to have particularly positive impact for vulnerable groups in relation to age (younger and older age groups), pregnancy and maternity, sex (both men and women), mental health and disability.

The strategy will help partners to understand, identify and improve services for people from the different protected groups and eliminate discrimination whilst promoting equality for people who live, work and study in County Durham.

## Evidence

What evidence do you have to support your findings?

Please **outline** your data sets and/or proposed evidence sources, highlight any gaps and say whether or not you propose to carry out consultation. Record greater detail and analysis in the following section of this assessment.

### Data

Durham Insight website<sup>2</sup> – JSNA data analysis has been used in developing the strategic aims and objectives of the strategy. The info contained within the strategy, using JSNA/Durham Insight data, provide context.

The HIA provided valuable data, which has been used to influence the JHWS, and support the priorities and objectives.

### Engagement and consultation

Work has taken place with partners throughout 2020/21 to develop the JHWS, and the draft strategy has been shared within individual partner organisations. A full public consultation has also taken place from January 2021 to February 2021. Feedback has been used to amend the draft strategy and as a basis for analysis as contained in this equality impact assessment.

We have also utilised the extensive consultation which was undertaken as part of the County Durham Vision. This included support for the relationship between the environment and climate change and health and opportunities for ‘active travel’ and the priority of reducing self-harm and suicide prevention which are included in actions within the JHWS.

<sup>2</sup> <https://www.durhaminsight.info/>

The need for integrated commissioning and pooled budgets where possible was highlighted and partners working across County Durham have developed a five-year County Durham Commissioning and Delivery Plan 2020-25 which identifies key programmes of work over the next five years for health and social care services.

There were also comments in the vision consultation of how the evidence base of the JSNA is crucial in formulating plans and work to achieve our overarching objective to improve life expectancy, healthy life expectancy and the life expectancy/healthy life expectancy gap between the most and least deprived communities is supported and reinforced by communities.

Following consultation in 2020 for the JHWS 2020-25 there was strong support for the priorities within the Strategy. There were 84 responses to the public consultation, and all three of the strategic priorities had high levels of agreement, over 95%, with the strategic priorities. Additional feedback from young people aged between 5-21 also agreed with the strategic priorities.

There was support for the wellbeing approach with members of the public keen to see partners working collaboratively and innovatively with local communities.

The health impacts of poverty were highlighted in the consultation and this was included in the 2020-25 JHWS and strengthened for the JHWS 2021-25 given the impact of financial insecurity and Covid-19.

The draft Joint Health and Wellbeing Strategy 2021-25 was again subject to public consultation via the Durham County Council website and included the Area Action Partnerships, Patient Reference Groups, Voluntary and Community Sector, Investing in Children, Learning Disabilities Parliament, and Carers, including young carers.

### **Consultation Update February 2021**

The second round of public consultation closed on 21 February 2021. High level consultation analysis has been used to update this equality impact assessment.

There were 47 responses to the public consultation.

- **Improve healthy life expectancy and reduce the gap within County Durham and between County Durham and England** 98% of people who took part in the public consultation strongly agreed / agreed that this should be a priority.
- **We will have a smoke free environment with over 95% of our residents not smoking and an ambition that pregnant women and mothers will not smoke** 91% of people who took part in the public consultation strongly agreed / agreed that this should be a priority
- **Decrease overall levels of unemployment and specifically close the employment gap between the general population and those living with a long term physical or mental health condition, or with a learning disability** 95% of people who took part in the public consultation strongly agreed / agreed that this should be a priority

- **Over 90% of our children aged 4-5 years, and 79% of children aged 10-11 years are of a healthy weight** 89% of people who took part in the public consultation strongly agreed / agreed that this should be a priority
- **Improved mental health and wellbeing evidenced by increased self-reported wellbeing scores and reduced suicide rates** 95% of people who took part in the public consultation strongly agreed / agreed that this should be a priority
- **Increase the number of organisations involved in Better Health at Work Award** 75% of people who took part in the public consultation strongly agreed / agreed that this should be a priority

79% of respondents were residents in County Durham, 13% represented an organisation, 4% were local councillor/committee members, 2% were CCG governing body members, 2% were local health group members.

In response to consultation feedback the following changes to the strategy were made

- We were asked 'what does increase the number of organisations involved in Better Health at Work Award mean' and have expanded the term in the JHWS to make this clearer.
- We were asked 'what is meant by physical literacy', so the terminology in the JHWS has been expanded to explain this.
- We were asked 'what does cutting the cost of the school day mean' and have included examples of this in the JHWS.

Dialogue has taken place with a number of children and young people aged 16-21 years within County Durham through Investing in Children agenda days. Children and Young People from different groups within Investing in Children, including nine young people from different areas across County Durham, have had the opportunity to have their voice heard and views listened to. This enabled us to evaluate children and young people's perceptions of current issues within education, health, special needs/disabilities and emotional wellbeing.

### Screening Summary

On the basis of this screening is there:	Confirm which refers (Y/N)
Evidence of actual or potential impact on some/all of the protected characteristics which will proceed to full assessment?	Y
No evidence of actual or potential impact on some/all of the protected characteristics?	N

### Sign Off

Lead officer sign off: Andrea Petty, Strategic Manager Partnerships	February 2021
Service equality representative sign off: Mary Gallagher, Equality and Diversity Team Leader	February 2021

## Section Two: Data analysis and assessment of impact

Please provide details on impacts for people with different protected characteristics relevant to your screening findings. You need to decide if there is or likely to be a differential impact for some. Highlight the positives e.g. benefits for certain groups, advancing equality, as well as the negatives e.g. barriers for and/or exclusion of particular groups. Record the evidence you have used to support or explain your conclusions. Devise and record mitigating actions where necessary.

Protected Characteristic: <b>Age</b>		
What is the actual or potential impact on stakeholders?	Record of evidence to support or explain your conclusions on impact.	What further action or mitigation is required?
<p>The strategy aims to reduce inequality, where possible, by addressing identified health and wellbeing priorities which is positive across all age groups.</p> <p>The Health and Wellbeing Board will work closely with children and young people to ensure they start well and health inequalities are reduced for children and their families.</p> <p>Approaches towards improved employment opportunities, living in a health promoting environment, quality housing and opportunities for active travel, as well as ensuring communities have optimum mental health and wellbeing, will have a positive influence on overall health and wellbeing in relation to age. Approaches will aim to increase healthy life expectancies.</p> <p>Targeted approaches will enable older people to remain independent and to lead lives with meaning and</p>	<p>The JHWS has been developed through analysis of a variety of data sets.</p> <p>Headline HWB evidence for County Durham in terms of age includes:</p> <p>Life expectancy and healthy life expectancy for both men and women in County Durham is lower than the England average.</p> <p>Life expectancy is 8.8 years lower for men and 6.6 years lower for women in the most deprived areas of County Durham than in the least deprived areas.</p> <p>There are 101,500 children aged 0-17 living in County Durham, with a further 49,800 young people aged 18 – 24.</p> <p>As at December 2020:</p> <ul style="list-style-type: none"> <li>○ 1,648 CYP are known to early help,</li> <li>○ 1,952 are Children in Need,</li> <li>○ 963 are Children Looked After,</li> <li>○ 469 CYP are subject to a current Child Protection Plan, and</li> </ul>	

<p>purpose. People will receive good quality end of life care.</p> <p>Social isolation/loneliness in older people will be addressed. Technology will support older people at risk of falls.</p> <p>The Children and Young People's Strategy provides focus and clarity on the priorities for improving services and life opportunities for children and young people. The Health and Wellbeing Board will provide strategic oversight to ensure that improved health and wellbeing outcomes of our children is delivered within this strategy, including reducing unacceptable inequalities, which our more vulnerable children encounter like unintentional injuries in the home or being an unhealthy weight.</p>	<ul style="list-style-type: none"> <li>○ 3,704 CYP (aged 0-25) have an Education, Health and Care Plan</li> </ul> <p>Childhood obesity is worse than the England average and is increasing. 1 in 10 (10.7%)</p> <p>There are over 110,000 residents aged 65 and over in County Durham. ONS Projections suggest that to 2035 the number aged 65+ will increase by 31% and the number aged 85+ will increase by 82%.</p> <p>35% of the county's over 60 population live in income deprived households (IDAOP, IMD2019). That's around 47,500 older people.</p> <p>Over 30,000 people aged 65+ live alone.</p> <p>Over 5,000 County Durham residents have a dementia diagnosis. However, it is estimated that the actual number of people over the age of 65 with dementia is closer to 7,300, this is predicted to increase 52% to over 11,000 by 2040 (POPPI).</p> <p>The risk of dying from the Covid-19 virus is highest in the elderly or those with underlying health conditions, however the risks are found to be higher in males than females; higher in those living in the more deprived areas than those living in the least deprived; and higher in those in Black, Asian and Minority Ethnic (BAME) groups than in White ethnic groups</p> <p><b>Consultation respondents</b></p>	
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	<p>Age range of public consultation respondents:</p> <ul style="list-style-type: none"> <li>• 3% were aged 25-34</li> <li>• 15% were aged 35-44</li> <li>• 26% were aged 45-54</li> <li>• 26% were aged 55-64</li> <li>• 26% were aged 65-74</li> <li>• 5% were aged 75+</li> </ul> <p>Engagement with children and young people through Investing in Children Agenda Days included nine young people aged 16-21 from the eXtreme and Health groups. All young people agreed with the strategic priorities, and provided feedback on how they feel these could be delivered.</p>	
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<b>Protected Characteristic: Disability</b>		
What is the actual or potential impact on stakeholders?	Explain your conclusion considering relevant evidence and consultation	What further action or mitigation is required?
<p>The strategy aims to reduce inequality where possible, by addressing identified health and wellbeing priorities, which is positive for people with disabilities.</p> <p>Many disabilities can be prevented or delayed by delivering this strategy. For example, through taking action via healthy weight initiatives and supporting people into and retaining meaningful employment.</p>	<p>The JHWS has been developed through analysis of a variety of data sets.</p> <p>Census data shows the County has a high disability rate compared to the rest of England, at around 18% of the working age population.</p> <p>Headline HWB evidence for County Durham in terms of health conditions and disability includes:</p> <p>Prevalence of hypertension, COPD, cardiovascular disease, diabetes, stroke and coronary heart disease are higher in County Durham than England.</p> <p>Estimated levels of excess weight in adults (aged 18+)</p>	<p>Reasonable adjustments where required including publication of easy read version of the strategy.</p> <p>Examples of action and/or delivery mechanisms in terms of disability includes:</p> <p>-We will look to close the employment gap for those living with a long term health condition, learning disability, or in contact with secondary mental health services</p>

	<p>and physically active adults (aged 19+) are worse than the England average.</p> <p>Over 5,000 County Durham residents have a dementia diagnosis. However, it is estimated that the actual number of people over the age of 65 with dementia is closer to 7,300, this is predicted to increase 52% to over 11,000 by 2040 (POPPI).</p> <p><b>Mental health:</b></p> <ul style="list-style-type: none"> <li>• 1 in 4 adults experiences at least one diagnosable mental health problem in their lifetime (approx. 100,000 adults)</li> <li>• In any one week, 1 in 6 adults will experience symptoms of depression or anxiety.</li> <li>• 1 in 10 children have a mental health condition</li> </ul> <p>The risk of dying from the Covid-19 virus is highest in the elderly or those with underlying health conditions, however the risks are found to be higher in males than females; higher in those living in the more deprived areas than those living in the least deprived; and higher in those in Black, Asian and Minority Ethnic (BAME) groups than in White ethnic groups</p> <p><b>Consultation respondents</b> 15% of respondents to the public consultation considered themselves to be a disabled person.</p>	
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Protected Characteristic: <b>Marriage and civil partnership (workplace only)</b>		
What is the actual or potential impact on stakeholders?	Explain your conclusion considering relevant evidence and consultation	What further action or mitigation is required?
N/A		

Protected Characteristic: <b>Pregnancy and maternity</b>		
What is the actual or potential impact on stakeholders?	Explain your conclusion considering relevant evidence and consultation	What further action or mitigation is required?
<p>The strategy aims to reduce inequality, where possible, by addressing identified health and wellbeing priorities which is positive in relation to pregnancy and maternity.</p> <p>Example of potential positive impact includes:</p> <p>Increased breastfeeding friendly venues and organisational workplaces across County Durham that meet UNICEF Baby Friendly Initiative Standards.</p> <p>Reduction in smoking of pregnant women and parents/carers of children and young people.</p>	<p>The JHWS has been developed through analysis of a variety of data sets.</p> <p>Headline HWB evidence for County Durham in terms of pregnancy and maternity includes:</p> <p>Estimated smoking prevalence has increased for 2019 from 15% to 17%, or by around 12,000 residents since 2017</p> <p>Levels of breastfeeding are worse than the average for England</p>	<p>We will have a smoke free environment with over 95% of our residents not smoking and an ambition that pregnant women and mothers will not smoke</p> <p>A core deliverable in the JHWS is that we will Continue to improve how, across the system we identify perinatal mental health issues during the antenatal period and embed appropriate pathways for support</p> <p>Support women to initiate and continue breastfeeding their babies through the County Durham 'Call to Action'.</p>

Protected Characteristic: <b>Race (ethnicity)</b>		
What is the actual or potential impact on stakeholders?	Explain your conclusion considering relevant evidence and consultation	What further action or mitigation is required?
<p>The strategy aims to reduce inequality, where possible, by addressing identified health and wellbeing priorities which is positive and will be beneficial to all.</p> <p>Poor mental health can be linked to ethnicity especially where people experience racism, discrimination and isolation because of their race or ethnicity. One of the priority areas of the strategy is addressing mental health and this is therefore positive.</p>	<p>For those respondents that completed consultation equality monitoring, none identified as BAME.</p> <p>Census data shows that 98% of the County's population is white British.</p> <p>BAME people often face individual and societal challenges (racism, discrimination, economic disadvantages and mental health stigma)<sup>3</sup> that can affect mental health.</p> <p>The risk of dying from the Covid-19 virus is highest in the elderly or those with underlying health conditions, however the risks are found to be higher in males than females; higher in those living in the more deprived areas than those living in the least deprived; and higher in those in Black, Asian and Minority Ethnic (BAME) groups than in White ethnic groups</p> <p><b>Consultation respondents</b> 95% White British, 3% White Other, 3% Arab or Middle Eastern</p>	<p>A core deliverable in the JHWS is to work with communities to develop targeted strategies to provide better support for vulnerable population groups, for example, those with learning disabilities, autism or BAME (including GRT) communities</p>

Protected Characteristic: <b>Religion or belief</b>		
What is the actual or potential impact on stakeholders?	Explain your conclusion considering relevant evidence and consultation	What further action or mitigation is required?
<p>There is no specific impact or consultation feedback in relation to religion or belief.</p>	<p>Census data shows that 73.2% of the County's population have a religion with</p>	

<sup>3</sup> <http://www.irr.org.uk/research/statistics/health/>

	<p>Christianity being the highest proportion (72%). Around 21% have no religion or belief.</p> <p><b>Consultation respondents</b> 59% of respondents were Christian, 3% Muslim and 38% had no religion.</p>	
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Protected Characteristic: <b>Sex (gender)</b>		
What is the actual or potential impact on stakeholders?	Explain your conclusion considering relevant evidence and consultation	What further action or mitigation is required?
<p>The strategy aims to reduce inequality, where possible, by addressing identified health and wellbeing priorities which is positive in relation to sex, both male and female.</p> <p>Although impact on sex is similar to that identified for age, it is likely to be disproportionate in terms of sex. For example, ensuring healthy starts in life for children and young families, and improved housing, is positive to both men and women but likely to be more beneficial to women who generally have the main family care responsibilities.</p> <p>As women's life expectancy is longer any improvements in support for older people will also be particularly positive for women.</p> <p>Action on reducing risk taking behaviours (smoking, alcohol and substance misuse) and reduction of suicide rates will be of greater positive impact to men who are disproportionately impacted.</p>	<p>The JHWS has been developed through analysis of a variety of data sets.</p> <p>Headline HWB evidence for County Durham in terms of sex includes:</p> <ul style="list-style-type: none"> <li>• Life expectancy and healthy life expectancy for both men and women in County Durham is lower than the England average.</li> <li>• Life expectancy is 8.8 years lower for men and 6.6 years lower for women in the most deprived areas of County Durham than in the least deprived areas.</li> </ul> <p>The risk of dying from the Covid-19 virus is highest in the elderly or those with underlying health conditions, however the risks are found to be higher in males than females; higher in those living in the more deprived areas than those living in the least deprived; and higher in those in Black, Asian and Minority Ethnic (BAME) groups than in White ethnic groups</p>	

	<p>Evidence suggests suicide rates are significantly higher for men.<sup>4</sup></p> <p><b>Consultation Respondents</b> Female 58% Male 42%</p>	
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Protected Characteristic: <b>Sexual orientation</b>		
What is the actual or potential impact on stakeholders?	Explain your conclusion considering relevant evidence and consultation	What further action or mitigation is required?
<p>The strategy aims to reduce inequality, where possible, by addressing identified health and wellbeing priorities which is positive and will be beneficial to all.</p> <p>Poor mental health can be more prevalent for lesbian, gay and bisexual (LGB) people. One of the priority areas of the Joint Health and Wellbeing Strategy is addressing mental health and this is therefore positive.</p>	<p>National evidence suggests a connection between poor mental health and LGB with 24% of LGBT people having accessed mental health services<sup>5</sup>.</p> <p><b>Consultation respondents</b></p> <ul style="list-style-type: none"> <li>• 34% of respondents identified as heterosexual/straight</li> <li>• 3% identified as gay women/lesbian</li> </ul>	<p>Examples of action and/or delivery mechanisms in terms of sexual orientation include: More MH and wellbeing checks across work places</p> <p>Improvements in the mental health and emotional wellbeing of children and young people, with an appropriate and accessible range of services across universal, targeted and specialist provision available for timely access</p> <p>Improved mental health and wellbeing evidenced by increased self-reported wellbeing scores and decreased suicide rates</p>

<sup>4</sup> <https://www.equalityhumanrights.com/en/britain-fairer/britain-fairer-2018-supporting-data>

<sup>5</sup> <https://www.gov.uk/government/publications/national-lgbt-survey-summary-report>

Protected Characteristic: <b>Transgender</b>		
What is the actual or potential impact on stakeholders?	Explain your conclusion considering relevant evidence and consultation	What further action or mitigation is required?
<p>The strategy aims to reduce inequality, where possible, by addressing identified health and wellbeing priorities which is positive and will be beneficial to all.</p> <p>Evidence suggests a connection between poor mental health and transgender status. One of the priority areas of the strategy is addressing mental health and this is positive.</p>	<p>National evidence suggests a connection between poor mental health and LGB with 24% of LGBT people having accessed mental health services<sup>6</sup>.</p> <p>For those respondents that completed consultation equality monitoring, none identified as trans.</p>	

### Section Three: Conclusion and Review

#### Summary

Please provide a brief summary of your findings stating the main impacts, both positive and negative, across the protected characteristics.

The JHWS will aim to work across a life course to reduce the gap in healthy life expectancy across County Durham and between County Durham and England. This has positive impacts across the protected characteristics.

Will this promote positive relationships between different communities? If so how?

Yes, the strategy will build on what is already taking place within the County and the approach to wellbeing will further harness the number of assets communities have available to them that help maintain and build their resilience and which in turn can protect challenges to their health or wellbeing. Covid Community Champions will also support this role in ensuring correct key messages are shared in a timely way.

#### Action Plan

Action	Responsibility	Timescales for implementation	In which plan will the action appear?
Public Consultation	Partnerships	Feb 21	JHWS 2021-25

<sup>6</sup> <https://www.gov.uk/government/publications/national-lgbt-survey-summary-report>

Make appropriate amends to strategy based on consultation feedback	Partnerships	Feb-Mar 21	JHWS 2021-25
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**Review**

Are there any additional assessments that need to be undertaken? (Y/N)	N
When will this assessment be reviewed? Please also insert this date at the front of the template	2025

**Sign Off**

Lead officer sign off: Andrea Petty, Strategic Manager, Transformation & Partnerships	February 2021
Service equality representative sign off: Mary Gallagher, Equality and Diversity Team Leader	February 2021

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**Cabinet**

**16 June 2021**

**Area Action Partnerships and Member  
Neighbourhood Budgets - Proposed  
Operating Arrangements 2021/22**



**Ordinary Decision**

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**Report of Corporate Management Team**

**Alan Patrickson, Corporate Director of Neighbourhoods and  
Climate Change**

**Councillor Elizabeth Scott, Cabinet Portfolio Holder for Economy  
and Partnerships**

**Electoral division(s) affected:**

Countywide

**Purpose of the Report**

- 1 This report sets out the proposed approach for Area Action Partnership (AAP) Boards and Teams to return to a greater local presence as the County emerges from the effects of the COVID – 19 Pandemic. It details the funding to be allocated to AAPs and Elected Members this year and sets out how that will be managed, including some proposed changes to the requirements and procedures around the allocation of that funding to ensure AAPs comply with best practice and the Council's procedures.

**Executive Summary**

- 2 As the country continues its efforts to tackle the COVID -19 pandemic and return to a semblance of 'normal life,' arrangements are being put in place to ensure AAPs can safely connect and be accessible to local communities. These arrangements will build on the lessons learnt during the last year and recognise that an immediate return to a pre-COVID way of working will neither be possible or desirable. However, the report outlines what steps will hopefully be taken in the coming months to return to a greater community presence.

- 3 Despite having to adapt to new ways of working during the pandemic, AAPs have played a vital role in supporting individuals and communities to deal with the many impacts it has had on life since the first lockdown. AAP teams were instrumental in setting up and staffing the COVID telephone helpline established by the Council and subsequently oversaw the allocation of funding to support hundreds of local projects that provided vital support to thousands of vulnerable people. In recognition of that role, as well as the previous eleven years of work, AAPs have been allocated additional funds to support communities to recover as well as tackle the Council's aim to revitalise towns and villages. The report details these funds and proposes how they will be managed and sub-divided between the AAP Boards and Elected Members.
  
- 4 AAPs have been operating for over 12 years and have achieved many successes, including supporting thousands of local projects, securing millions of Pounds in matched funding, inputting into many consultations by the Council and its partners and critically, supporting Elected members in their roles as community champions. Recently there have been a number of changes to the Council's operating procedures and regulations, as well as in the broader 'support community', that the report proposes need to be reflected in the procedures for AAPs. These include changes to:
  - the declaration of interest in relation to Neighbourhood Budget;
  - the required make-up of management committees for applicant organisations.
  
- 5 The report concludes by recognising that as we hopefully move out of lockdown, the full effects of the pandemic on communities is not known, and further changes may be required to ensure the AAPs can maximise their impact as efficiently as possible.

### **Recommendation(s)**

- 6 Cabinet is recommended to note the content of this report and to agree:
  - (a) that AAP Terms of Reference be amended in order to allow provision for AAP Board meetings to be held as hybrid meetings, should individual boards agree to do so;
  - (b) the proposed amalgamation of the five budget headings: DCC Area Budget, Older People's Social Isolation Fund, Youth Grant, Welfare Reform Grant and the £100,000 COVID Recovery grant into a single 'Area Budget' Fund of £244,902 per AAP, of which a minimum of £125,000 will need to be defrayed in the current financial year;

- (c) that each Elected Member's Neighbourhood Budget will be enhanced with a one-off allocation of £10,000 for spend to support the revitalisation of towns and villages, with the funding awarded to AAPs reduced to £210,000 to offset these amendments;
- (d) the capacity for Elected Members to spend on small projects (between £100 to £999) be increased to £3,000 per annum for the period up to 31 March 2023;
- (e) the proposed information requirements from Elected Members if they intend to roll forward unspent Neighbourhood Budget allocations beyond year two of their period of office;
- (f) to the introduction of a new Area Budget / Neighbourhood Budget Application form;
- (g) that work will be carried out with the nominated AAP Chairs to develop the criteria for a Countywide AAP fund;
- (h) the changes to the Declaration of Interest process for Councillors when proposing schemes for Neighbourhood Budget spend in order that it is in line with the member Code of Conduct.

## Background

- 7 AAPs are familiar with working to agreed priorities based on local need. Since 2009 they have focused activity on what matters most within that respective community evidenced through local research and engagement. During 2020/21, Area Action Partnerships (AAPs) provided a rapid response function to support our wider communities in need. Through an additional £1.4 million response funding allocation from the Council, AAPs provided support to those who have been detrimentally impacted due to the effects of COVID-19.
- 8 In addition, over the last year, AAPs continued their “Business as Usual” work including project development for Area Budget, holding regular online board and other community meetings, consultation on various topics, developing a countywide fund to support wide reaching project activity, producing 14 Countywide events and supporting our elected members with their final year of Neighbourhood Budget spend prior to the May 2021 elections.
- 9 In 2021/22, the role of the AAPs has been enhanced further by aligning dedicated funding pots that will drive their work along specific lines. This includes Towns & Villages funding, money from the Department for Education (DfE) for Holiday Activities with Healthy Food, Community Recovery funding as well as the annual core budget AAPs traditionally receive.
- 10 Extra staff resources have been recruited to support this additional work across AAPs, primarily funded from the Government’s Control Outbreak Management Fund (COMF).
- 11 To enable this range of project activity to be delivered effectively, as well as implement some changes to ensure AAP regulations accord with Council procedures, as well as best practice, the report proposes a number of changes to the operation of AAPs and Neighbourhood Budgets.

## AAP Priorities

- 12 In 2020/21, due to the unprecedented impact of the pandemic, it was agreed that each AAP’s Area Budget allocation should be aligned to one broad priority focus of COVID-19 Recovery. Within this single focus, AAP Boards were able to address a wide range of issues around the broad themes set out below:
  - (a) Employability initiatives;
  - (b) Advice and Guidance;

- (c) Mental Health & Wellbeing;
  - (d) Organisational sustainability;
  - (e) Food provision and support;
  - (f) Social Isolation;
  - (g) Support for the Voluntary and Community Sector, or
  - (h) Support to small businesses (through a third party, not-for-profit).
- 13 As the work of AAPs commences in 2021/22, given the allocation of additional funds to address Town and Village revitalisation, Community Recovery and Holiday Activities with Healthy Food, it is appropriate that Boards will derive local priorities around these three themes and will work with Board members to establish the associated task and finish groups to oversee their work. In terms of further priorities to be addressed over the next year, normally at this point, an AAP will have had the benefit of a broad community consultation exercise to help shape their thinking on their focus for the year. However, given the impact of the pandemic, it has not been possible to carry out that exercise for boards to consider.
- 14 Whilst the choice of the priorities to be addressed is a decision to be made by each board, and is within their gift, it is proposed that they give careful consideration to adding substantially to these three themes. This is proposed as AAPs have reduced time to address a broad range of topics in a year following an election, the lack of up-to-date community priority data and the scale of the resources and their associated timeframes for spend (as explained later in this report).
- 15 If boards agree to progress on these three broad themes for 2021, this will be on the basis that community consultation is carried out during the Autumn on local priorities (to help shape priorities for 2022/23 as well as the towns and villages work). It is also proposed that to ensure maximum flexibility for AAP Boards during 2021/22, the Community Recovery theme (based on the broad headings outlined in paragraph 8), is bolstered by the inclusion of the criteria 'emerging community issues'. This wording mirrors that within our elected members' Neighbourhood Budget guidance and will allow AAP Boards the flexibility to consider and respond to key community issues as and when they arise.

## **AAP Boards**

- 16 It is essential that boards remain the decision-making body for AAPs and work has continued extremely successfully during 2020/21 using a

virtual platform. Overall, attendance from board members has been high, separate consultation/focus groups have been organised and AAPs contributed to 14 Countywide events which were also well attended. AAPs have embraced virtual working and there has no perceived adverse effects on productivity or decision-making capability. However, it is recognised that in line with national and corporate guidance, plans to return to face to face working and staff presence within localities will need to be prepared.

- 17 As we work towards holding board meetings in public again, AAPs are seeking advice from IT colleagues to develop a hybrid approach to meetings which consists of a mix of people meeting in person and other board members or presenters attending virtually. Some of our board members may still wish to attend virtually and the best ways to ensure we have maximum board and community involvement whilst allowing people to access in the way they feel most comfortable, are being explored. Alongside this, advice is also being sought on the mobile technology to deliver the best experience for meetings once community venues are used again.
- 18 During 2020/21 many AAP Boards made the decision to move to earlier meetings. This was due to a number of reasons including many board representatives working from home and a 6 – 8pm meeting time was difficult due to immediate home responsibilities. AAP Co-ordinators will be encouraging their boards to move back to an evening meeting time. This will ensure that as many sectors of the community can access our meetings if they wish to do so. Discussions on these themes will form part of the AAP Co-ordinators report at the upcoming AGMs (June/July 2021).

### **AAP Locality Bases**

- 19 In accordance with corporate advice, AAP teams are planning to return to their locality bases from July 2021. In line with that advice, it is envisaged AAP support staff will implement a hybrid form of office / homeworking. This will always be in line with corporate guidance.

### **AAP Governance**

- 20 AAPs have a suite of governing documents including Terms of Reference and Code of Conduct etc, which will need revising in light of corporate guidance on new ways of working going forward ie hybrid working and meetings. These revisions are proposed to take place during 2021/22 and will involve wider community and Elected Member representation alongside officers to develop the proposed changes.

## Core AAP Area Budget

- 21 Over recent months a light touch internal review of the AAP funding process has been carried out. One of the initial findings of that review was that AAPs have lots of distinctive budget areas that often have their own 'call-out' and application process. This is often driven by the reporting and monitoring arrangements attached to the various funding allocations. This can cause confusion for applicants and for AAP Boards when projects are sub managed within smaller budget amounts.
- 22 AAPs currently receive £100,000 from the County Council in the form of an Area Budget to support the delivery of their local priorities.
- 23 In addition to this, AAPs have historically received a number of distinct budgets from various internal service groupings who are seeking to achieve their objectives through investment in local community initiatives. These include:
- £25,000 Older Persons Social Isolation Fund from Adult and Health Services;
  - £9,902 Youth Fund Grant from Children and Young People's Services to align to organisations who support youth delivery;
  - £10,000 Welfare Assistance Scheme Grant funding to tackle poverty issues.
- 24 In 2021/22 AAPs will also receive Community Recovery Funding of £100,000 each. This funding has come to AAPs from the Local Council Tax Support grant the Council will receive in the current year.
- 25 This gives each AAP a Core Budget sum of £244,902 made up of the following funding streams;
- |                                    |          |
|------------------------------------|----------|
| AAP Area Budget (DCC)              | £100,000 |
| Older People Social Isolation Fund | £25,000  |
| Youth Grant                        | £9,902   |
| Welfare Assistance Grant           | £10,000  |
| COVID Restoration Grant            | £100,000 |
- 26 Taking on board the findings from the review, having these budgets aligned as part of one amalgamated 'Area Budget' will enable AAPs to reduce the amount of project call outs and give them flexibility to fit proposed projects against a greater range of themes rather than having to allocate a finite amount of funding to a particular topic.

- 27 Previous experience shows that AAPs consistently allocate funding to these key elements of community life across County Durham; Young People, Older People and Social Isolation, and widespread Welfare Reform projects. The proposal to amalgamate the funds is therefore not expected to change what types of projects AAPs fund, but it will give them more flexibility about how they manage that process. Often the projects funded fit multiple outcomes.
- 28 It is therefore recommended that we formally classify these five budget areas as an amalgamated Area Budget for 2021/22 of £244,902.
- 29 The proposed introduction of a new electronic Application Form will also make this transition easier in terms of managing the grant application process and gaining monitoring data to report on outcomes achieved through this funding.

### **In year spend**

- 30 It has been confirmed that £125,000 of the above funding; the £25,000 Older Persons Social Isolation element and the £100,000 Community Recovery Funding have been made available from budgets that need to be spent this financial year and as such AAPs will need to evidence defrayed spend by the year end. This will be communicated to AAP Boards to ensure they are able to deliver on this commitment.
- 31 With regard to the remainder of the combined Area Budget allocation, it is proposed AAPs are given the flexibility of being able to carry forward any uncommitted resources into the 2022/23 financial year to ensure they have the resources to address emerging issues.
- 32 It is recognised that AAPs have additional distinct budgets to manage as set out below that it is proposed are kept separate from the £244,902 'Area Budget' allocation given their focus and origin of the funding.

### **Towns and Villages Funding**

- 33 Cabinet on 10 February 2021 agreed an allocation of £4.2 million for AAPs to fund the wider corporate objectives of improving Towns and Villages across County Durham and the broad criteria for the fund as set out in Appendix 2. This was confirmed in the MTFP11 and 2021/22 budget setting report to County Council on 24 February 2021.
- 34 Further consideration has been given to this decision, and in order to ensure a greater focus is given to the funding of community 'town and villages' themed projects across the county in every electoral division, it is proposed that each AAP is allocated £210,000 to manage (rather than the £300,000 originally allocated) and that each elected member is allocated a one-off additional £10,000 to their Neighbourhood Budget

allocation of £19,400 this year. In terms of this additional allocation to members, it is proposed that, unless there are exceptional circumstances, spend will be broadly in line with the criteria set out in Appendix 2. Taking into account the size of the allocation per member and AAP, it is proposed the minimum spend to ensure impact should be set at £5,000 and that there is no requirement for a specified matched funding target against the member allocations.

- 35 It is further proposed that given the neighbourhood Budget is effectively increased by 50% for the current year, the capacity for members to spend their core (£19,400) budget on smaller projects (between £100-£999) is increased by the same proportion, from a total of £2,000 to £3,000. It is recommended that this increase applies to the period up to 31 March 2023.
- 36 Staff from the Council's Regeneration, Economy and Growth (REG) service grouping will attend AAP Board meetings from July to present Towns and Village related information to AAP Boards and Elected Members to help them make investment decisions. This will include local data, details of relevant projects being developed by the Council and other partners in their locality and also new opportunities that Boards may wish to consider supporting. AAP Boards will make recommendations for schemes they want to support and those will go through the existing sign-off and approval process that has been adopted for all other AAP activity.
- 37 It is not anticipated that the Towns and Village budget allocations will be fully defrayed within this financial year. Following the election, as highlighted earlier, there will be a shorter administrative year for AAP Boards and Elected Members and it is important to ensure that projects are developed in a coherent manner and they have the time to undertake consultation and engagement with the community in determining their local priorities. This will be further supported by the input of REG colleagues through the Board process.
- 38 Principal AAP Coordinators will attend the Towns & Village Working Group to shape this work and discuss scheme ideas with REG colleagues. The first meeting of this group took place on 12 May 2021.
- 39 As highlighted earlier, a dedicated team of Officers is being created to help manage this funding (financed primarily by Covid funding) and the recruitment of that team is underway.

### **Holiday Activities with Healthy Food**

- 40 In February 2021, the Council received final notification from the Department for Education (DfE) that it would receive £2,383,860 for the

delivery of a Holiday Activities with Healthy Food (HAWHF) programme in 2021.

- 41 £525,000 has been allocated to AAPs for the local delivery of the programme. This will run similarly to the programme in 2020 and will target smaller locally based partners/providers. Individual allocations have been based on the number of Free School Meal (FSM) eligible children per AAP area and child poverty rates for 5-15 year olds. An uplift of funding has also been allocated to Teesdale and Weardale to account for the rural nature of each of these AAPs.
- 42 The amounts allocated per AAP are summarised in Appendix 3. Funding amounts range from £118,541 for East Durham AAP to £18,016 for Weardale AAP.
- 43 AAP Boards are aware of this funding and work has already commenced to allocate the funding as it was available to support activities from Easter 2021.
- 44 As with delivery in 2020, the whole application, approval and monitoring process was done within AAP Teams for the Easter 2021 period. Moving forward, there will be additional staff to support the AAP Funding Team to carry out this work for the summer holiday period and beyond. These staff are funded by the DfE and available Covid funding.
- 45 Children's and Young People's Services will lead on the overall co-ordination of the programme and ensure that DfE requirements are met. There will be some community development resource as part of this team that will work closely with local AAP teams.
- 46 In April 2021, AAPs were also notified that they would be receiving £95,188 for HAHF delivery in the May and October half-terms. This was money that was allocated internally by the Council and is separate to the DfE funding, however, to ensure consistency, it was decided to allocate funding to each AAP on the same basis as the DfE funding.

### **Countywide Community Recovery Fund £300,000**

- 47 A £300,000 budget for Countywide activity is also available across the 14 AAPs and funded from Covid funding available in 2021/22. A countywide fund was originally established during the height of the pandemic in 2020 to respond to approaches for organisations working across multiple AAP areas. This was positively received by AAPs in recognition of the cross-boundary work, particularly from organisations that cover many localities.

- 48 A Panel of the 14 AAP chairs was created to manage this process. This panel met on 4 occasions during 2020/21 and allocated funding of £344,298 to 6 countywide projects.
- 49 It is proposed that this process will continue in 2021/22 and there is the opportunity to enhance the approach that has been taken and formalise arrangements of this group and create clearer terms of reference that cover multiple areas including charring arrangements and how we open up this funding stream across the County to ensure a clearer application process.
- 50 We propose to work with the 14 AAP chairs once in place at the respective AAP AGMs to gain their input through a co-production approach and will report back to AAPs once this process is complete.

### **Neighbourhood Budget**

- 51 Councillors currently receive £19,400 each per year for the development of local projects in their ward areas. This is split into a capital and revenue allocation. As highlighted in paragraph 34, it is proposed that this is further enhanced with a one-off allocation of £10,000 to address towns and villages revitalisation.
- 52 Since 2009 Members have been able to carry this budget over on a yearly basis as long as it is allocated by the end of their electoral cycle.
- 53 It is recognised that Members have funded an impressive range of schemes across multiple priority areas for their communities, bringing in over £41m in match funding since 2009.
- 54 The challenge for the AAPs and the Council in delivering the projects is that the spend profile of this funding has been heavily weighted towards the final year of an election cycle when the members often have a significant amount of resources to allocate. Data from 2020/21 shows that 26% of the 4-year budget was allocated between June 2020 – Dec 2020 and 19% of the 4-year budget was allocated in the final quarter in the run up to the pre-election period.
- 55 The impact on AAPs is that they have a large volume of projects to develop, appraise and issue grant offer letters for within a very tight time frame. There is also a knock-on impact to the delivery organisations and with many members supporting projects delivered by Council service areas this puts further pressure on other areas of the Council.
- 56 It is recognised that members require a degree of flexibility with this budget allocation and often they roll money forward into future years to make a larger contribution to a significant local project.

57 In order to allow this flexibility but provide greater clarity on proposals to enable early work to commence on their development, it is proposed that there is a checkpoint stage after year two and also year three of the electoral cycle. At these points, unless there are exceptional circumstances that have impacted on a members ability to develop project proposals (such as a long term illness), carryover between the years two and three and years three and four would only be allowed if the member has a clear spending plan for what they want to allocate the funding for. A Project Proposal Form will be developed for AAP Teams to discuss ideas with individual members to get clear details on planned future schemes. It is proposed that this only comes in after year two to recognise that members have a shorter year this year with the May election and new members will need to undergo training on the rules surrounding the Neighbourhood Budget. This will effectively shorten the financial year and limit the project development timeframe.

### **New Application Form**

58 Work has been undertaken to update the application form for Area Budget and Neighbourhood Budget applications over £1,000 after feedback that some users were struggling with the PDF format due to software issues and not being able to access and save information into the previous form. The decision to move an electronic online format hosted on our CRM system links well with the Council plan to make all PDF documents accessible (in line with national accessibility requirements) and was a recommendation of a recent review of AAP processes.

59 This format also affords us the option of making further improvements and changes down the line with the possibility of a case management system being introduced in the future.

60 The change is timely as it not only coincides with the new cohort of elected members, it is also being introduced at a time when we are moving away from the “All together” of the previous County Vision to the new corporate priorities of more and better jobs, connected community and people living long and independent lives, alongside the Excellent Council theme. This gives AAPs the opportunity to link their reporting priorities and KPIs to the new Council Vision ambitions. The new form will enable AAPs to evidence their support of the vision by logging outputs and outcomes against these ambitions.

61 Benefits to the user include:

- the users will see a more professional user-friendly form which will be accessed from the Council’s ‘Do it Online’ platform which will be familiar to many users;

- the questions and information requested will all be familiar to regular applicants;
- the requirement to complete all fields and upload supporting documents with the application will result in a quicker turnaround time as time won't be lost while AAP staff chase up missing information. It will however require applicants to have these in place at the point of application;
- the form will also highlight the minimum application thresholds which is a shift from applicants being able to apply for amounts of funding under the set limits. Again, when necessary and in exceptional circumstances lower amounts will be accepted but will require discussion with the AAP and Funding Team prior to submission;
- in order to align with requirements of other major funding bodies, the form now asks for:
  - applicant organisations to have a minimum of three unrelated people on their management committees;
  - for applicants to declare if any of the contactors, suppliers or consultants they wish to appoint using the grant funding are linked to themselves, for example close friends or relatives, or if there is any financial link such as ownership of these suppliers. In which case, they will need to seek four quotes for the contract, even if it is under £5,000.

## **Terms of Reference Amendments – Councillor Declaration of Interests**

62 AAPs regularly review their Terms of Reference and particularly in light of recent national focus on influence by Councillors, it is now proposed that we make a change to the declaration of interest process to ensure this is more aligned to the Council's Member Code of Conduct that Councillors are familiar with.

63 The current guidance AAPs are working to states:

*Declaration of Interest: A Councillor is regarded as having an interest in any business which may affect the wellbeing (financial or otherwise) of a body of which he/she is a member. Any question of advancing money to such a body would normally give rise to a prejudicial interest and any Member who advances such a proposal for approval must declare a personal prejudicial interest. Do you have a personal prejudicial interest in this project? Please indicate yes or no below.*

- 64 The proposed change will bring the guidance to members in line with the current terminology used in the Members Code of Conduct will focus on if the Councillor has ‘disclosable pecuniary interest’ or an ‘other relevant interest’ in a project. Training on these terms is provided to Elected Members by the Council’s Legal and Democratic Services Department and it is suggested that in these cases the Councillor cannot fund an organisation for which they have a disclosable pecuniary interest through their Neighbourhood Budget. It is proposed the guidance on Neighbourhood Budget application forms is amended as set out below (along with some clear examples of what constitutes each type of interest) and will apply to all new Neighbourhood Budget application forms following this Cabinet decision.

*Declaration of Interest: Do you have a disclosable pecuniary interest or other relevant interest in this project? Please indicate in the table below.*

*Any councillor having a disclosable pecuniary interest in an organisation is prohibited from allocating Neighbourhood Budget funds to any project delivered by or in connection with that organisation.*

*Where a Councillor has an other relevant interest the application needs to be approved by the appropriate AAP. Full guidance on interests is contained in the Members Code of Conduct”*

- 65 This change will not limit the ability of a Councillor to support an organisation where they are only involved in a voluntary / community capacity. For example, a community centre management committee or through a role as a school governor. In those situations, the Councillor would declare they have a relevant interest, and in line with the current practice the project will be required to be signed off by a Head of Service or Corporate Director as outlined in our current Neighbourhood Budget Scheme of Delegation. The change would only impact Councillors where they have a disclosable pecuniary interest.

## **Conclusion**

- 66 AAPs have been a key mechanism for engaging and empowering communities over the last twelve years, and over the extremely challenging period of the pandemic, have been instrumental in providing support to the vulnerable. Prior to the onset of COVID – 19, work had commenced to consider if enhancements could be made to AAP processes, and that work has been enhanced by lessons learnt during the pandemic.
- 67 This report proposes a number of changes that will ensure that AAPs, alongside Elected Members, are best placed to support our communities to recover and re-build. However, it is also recognised that there is an ongoing need to explore, alongside AAP Boards and

Elected Members, further enhancements to ensure AAPs can be as effective as possible going forward.

**Author(s)**

Gordon Elliott, Head of Partnerships and Community Engagement.  
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## **Appendix 1: Implications**

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### **Legal Implications**

The report identifies proposed changes to the Terms of Reference in relation to Councillors declaration of Interest on Neighbourhood Budget projects. Discussion have been entered into with Legal Services and they have proposed revised wording to reflect the changes we are proposed regarding pecuniary interests.

### **Finance**

The report doesn't seek any additional budget allocations to support AAP activity. All of the budget streams referenced in the report are already approved in line with the Council's budget setting process. The report does however outline a planned change to the way the budgets are managed at an AAP level and includes changes to the budget allocations for investing the funding provided in support of towns and villages revitalisation.

Previous reports to Cabinet and Council had allocated £300,000 to each AAP. The proposals in this report seek to reduce that to £210,000 per AAP and provide each elected member with an additional one-off allocation of £10,000 to augment their core Neighbourhood Budget allocations.

£125,000 of the funding allocated to AAPs: the £25,000 Older Persons Social Isolation element and the £100,000 Community Recovery Funding needs to be defrayed this financial year and as such AAPs will need to evidence defrayed spend by the year end.

Appendix 2 sets out details of the funding allocations to individual AAPs with regards to the Holiday Activities with Food grant funding that has been received and will be administered by AAPs this year.

### **Consultation**

No implications identified.

### **Equality and Diversity / Public Sector Equality Duty**

Not applicable.

### **Climate Change**

Not applicable.

### **Human Rights**

Not applicable.

## **Crime and Disorder**

Not applicable.

## **Staffing**

Additional staff are being recruited to support the Towns and Villages and the Holiday Activity with Healthy Food programme. The costs of these staff is primarily met from external funding reserves.

## **Accommodation**

The accommodation need for the 6 extra Town and Village staff has been highlighted with the Office Accommodation Team.

## **Risk**

The funding allocated to AAPs this year is significant and higher than normal. There are risks over the capacity and ability to effectively administer these funding streams within the existing support staffing complement and to address this additional temporary staffing is being recruited to assist the core team.

The proposals set out in this report seek to streamline and simplify the application and approval process and as such should produce some efficiencies and address the issues caused by significant proportions of spend being incurred in the last year of a members term of office.

The proposals with regards to the changes to the declaration of interest will bring this in line with the Member Code of Conduct provisions and as such address an inconsistency and risk in the current arrangements.

## **Procurement**

The funding that is managed by AAPs is allocated in terms of grants and in accordance with advice provided by Procurement following the Council's contract procedure rules.

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## **Appendix 2 - Towns & Village Programme Proposed Criteria (information taken from MTFP Cabinet Report)**

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### **The general principles for this investment fund are:**

- (a) the funding can be used for both capital and revenue;
- (b) schemes funded should have a clear exit plan and not create an ongoing expectation of support longer term;
- (c) although the funding is allocated next financial year, there is no need for AAPs to have it all allocated or spent next year and they are free to profile this as they see fit;
- (d) AAPs will have the flexibility to innovate so there will be some flexibility but within criteria established for these allocations (see below);
- (e) application of the funding will be collated alongside the schemes overseen by the Towns and Villages Co-ordination Group;
- (f) given the level of interest in this subject at the recent Autumn AAP consultation events, it is anticipated there may be a need for some further engagement with communities as to how it could be best used in an AAP area based on the areas it can be applied to;
- (g) the over-riding aim of the funding is to have a meaningful impact, and in order to ensure the public see a real difference, AAP Boards therefore should cap any spend on feasibility studies to a maximum of £30,000. In addition, given the availability of this funding offers a significant opportunity for AAPs, it is proposed that unless there are exceptional circumstances, projects supported should have a minimum contribution from this fund of £10,000 and that they seek to achieve a match funding rate of at least 30%.

AAPs will be free to develop a programme of works that meet the particular needs and priorities of their areas and in common with the approach taken to use of their Area Budget, they will be provided with the scope to innovate. However, the investment of this funding will be within the criteria that is signed off and agreed by Cabinet. As a steer for the utilisation of this funding, AAPs will be encouraged to consider investment in the following potential initiatives (note that the decision to go ahead with any local scheme will be shaped by the need to avoid duplication with other schemes).

## **Scheme Criteria**

- a. Localised environmental maintenance/enhancements.
- b. Enhancing community resilience.
- c. Time-limited financial support for current town and village centre businesses to maintain their presence in a locality.
- d. Time-limited support to assist with attracting new users/businesses to a centre.
- e. Projects that build on a centre's ability to attract new users to a location e.g. through the improvement of a visitor experience or development of an area's tourism potential.
- f. Accessibility improvements in order that more people can travel to (e.g. public transport/parking), and within (e.g. disabled access enhancements) a centre.
- g. Improvements to connectivity (walking and cycling).
- h. Improved IT connectivity for businesses and visitors.
- i. Public realm improvements, including addressing 'grot spots' and parking issues on estates that impact on their open space areas.
- j. Initiatives to improve public safety in order that people feel more secure when living in or visiting a location.
- k. The creation of a vibrant community hub within a town or village centre.

## **Additional Information**

Bids for funding will be made through the established AAP funding process.

Given the scope of the Towns and Villages programme and the established process of local priority setting and resourcing, higher value projects may be developed drawing together existing AAP allocations and the uplifted Towns and Villages element.

An important element of the Towns and Villages programme is the ongoing commitment to regular engagement with each AAP by the Regeneration Economy & Growth Service to identify larger scale regeneration needs and opportunities outside of the scope of the AAP allocations. These sessions as well as participation in AAP Priority Task Group Meetings which align with the core Towns and Villages themes will enhance and embed the activity at an AAP level, in line with the principles established in the Towns and Villages Cabinet reports.

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## Appendix 3

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### Holiday Activity with Food Funding across AAPs

AAP	Pupils living in County Durham attending schools in the County				% of children aged 5-15 living in the top 30% most deprived areas		AAP funding
	Eligible for FSM		All Pupils	%Total FSM	Count	%	Amount
	No	Yes					
3 Towns	2860	1139	3999	6.61%	2415	68.2%	£33,028
4 Together	1767	778	2545	4.51%	1619	79.0%	£22,560
Bishop Auckland and Shildon AAP	4620	2059	6679	11.94%	4801	87.0%	£59,705
Chester-le-Street and District AAP	5798	1384	7182	8.03%	2706	41.5%	£40,132
Derwent Valley Partnership	4911	1233	6144	7.15%	1329	21.8%	£35,754
Durham Area Action Partnership	5918	1062	6980	6.16%	1548	23.5%	£30,795
East Durham AAP	10093	4088	14181	23.71%	8718	71.6%	£118,541
East Durham Rural Corridor	2939	800	3739	4.64%	1704	50.7%	£23,198

	Pupils living in County Durham attending schools in the County				% of children aged 5-15 living in the top 30% most deprived areas		AAP funding
	Eligible for FSM		All Pupils	%Total FSM	Count	%	Amount
AAP	No	Yes					
Great Aycliffe and Middridge Partnership	2813	1124	3937	6.52%	1991	53.7%	£32,593
Mid Durham AAP	3923	874	4797	5.07%	1781	42.9%	£25,344
Spennymoor AAP	2586	700	3286	4.06%	1301	46.5%	£20,298
Stanley AAP	3622	1505	5127	8.73%	4001	86.3%	£43,641
Teesdale AAP	2267	393	2660	2.28%	356	12.9%	£21,396
Weardale Action Partnership	698	104	802	0.60%	28	3.2%	£18,016
<b>County Durham</b>	<b>54815</b>	<b>17243</b>	<b>72058</b>	<b>100.00%</b>	<b>34,298</b>	<b>52.9%</b>	<b>£525,000</b>

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**Cabinet**

**16 June 2021**

**Review of DLI Collection Archive and  
the Future of the DLI Building and  
Grounds**



**Ordinary Decision**

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**Report of Corporate Management Team**

**Amy Harhoff, Corporate Director of Regeneration, Economy and  
Growth**

**Paul Darby, Interim Corporate Director of Resources**

**Councillor Elizabeth Scott, Cabinet Portfolio Holder for Economy  
and Partnerships**

**Councillor Richard Bell, Deputy Leader Cabinet Portfolio Holder for  
Finance**

**Electoral division(s) affected:**

Countywide

**Purpose of the Report**

- 1 The report sets out proposals to review the options for the display of Durham Light Infantry (DLI) collection, archive, building and grounds.

**Executive summary**

- 2 The Council's Joint Administration has requested a review of the proposed arrangements for the care, storage and display of the Durham Light Infantry Collection, archive, museum building and grounds. This is a key priority to review and ensure that the proud and significant military history of County Durham is recognised.
- 3 On 21 October 2015, Cabinet agreed to new arrangements for the storage and display of the DLI collection which included the storage of items at the Sevenhills facility and proposals for the loan of items to a number of venues including Palace Green Library, Bishop Auckland Town Hall, Spennymoor, Newton Aycliffe and Seaham.

- 4 This was part of an approach to widening the exposure of the history of the DLI to wider groups whilst also achieving medium term financial plan (MTFP) savings.
- 5 More substantive arrangements for a permanent display were agreed by Cabinet on 17 January 2018 where, as part of consideration of a report on the development of the Aykley Heads site as a Strategic Employment Site and the relocation of the DCC Headquarters to the city centre, the new History Centre development, which includes a permanent display for DLI collection, was agreed.
- 6 Subsequent to that report, further updates on the development of the History Centre have been considered by Cabinet on 17 October 2018 and 16 January 2019.
- 7 The new History Centre has a capital budget of £19.6 million for the renovation and the addition of an extension to the Grade II listed building where the centre will be located. Kier Construction Limited was awarded the contract following competitive procurement and commenced on site on in April 2021.
- 8 The Joint Administration is seeking to review the options for the future storage, care and display of the DLI collection. An options appraisal will be produced to include a full assessment of opportunities, costs, risks and other funding availability. This will also include an impact assessment on the plans for the new History Centre, with the outcome considered by Cabinet by September 2021.
- 9 Since the moving of the DLI Collection to Sevenhills, the former DLI Museum building has been vacant, and its future has yet to be determined. A full condition report will be developed, to understand the options available. Interim measures to improve the area will be undertaken.

### **Recommendation(s)**

- 10 Cabinet is recommended to agree:
  - (a) that an options appraisal for the future display and storage of DLI collection is prepared; and
  - (b) that a further update report is provided to Cabinet by September 2021.

## **Background and Review of Storage and Display of DLI Collection**

- 11 The Council agreed to build and operate a dedicated museum to the Durham Light Infantry Regiment and the creation of an Arts Centre at Aykley Heads in Durham in 1967. An agreement was made with the DLI Trustees that DCC would care for their heritage collection and create the museum. The DLI Trustees and other interested parties will be consulted as part of the review.
- 12 Prior to the museum being constructed, the collection had been at the DLI Depot at Brancepeth Castle and then temporarily stored at the Bowes Museum. Unlike the majority of regimental and corps museums, the DLI Museum was not funded by the Ministry of Defence.
- 13 In 2014 Cabinet agreed to review the opening hours and operation of the DLI museum and art gallery and MTFP savings of £105,000 were realised.
- 14 Cabinet agreed on 21 October 2015 to a number of recommendations in relation to the future display and storage of the DLI collection. MTFP savings of £241,000 were then factored into the budgets from 2016/17 from the closure of the museum and relocation of the DLI archives and collection.
- 15 The recommendations included the closure of the DLI museum on the Aykley Heads site and investment in appropriate storage and care and a loan strategy for display of the collection which would facilitate a wider audience being aware of the history of the DLI.
- 16 As part of the initial review of priorities and in setting the strategic direction of the Council for the next four years, it is proposed to review the options for the display, care and storage of the DLI collection.
- 17 The review will reconsider the options available for display, storage and care of the collection as well as any financial, legal and value for money issues associated with the options considered.

## **Conclusion**

- 18 The Joint Administration is seeking to review the options for the future storage, care and display of the DLI collection. An options appraisal will be produced to include a full assessment of opportunities, costs, risks, other funding availability. This will also include an impact assessment on the plans for the new History Centre, with the outcome considered by Cabinet by September 2021.

## **Background papers**

- Future DLI Museum Arrangements – Report to Cabinet 21 October 2015
- Aykley Heads Strategic Employment Site, DCC Headquarters Full Business Case and Future options for the County Archive – Reports to Cabinet 17 January 2018 (Part A and Part B reports);
- Durham History Centre Update – Report to Cabinet 17 October 2018
- Durham History Centre – Next Steps – Report to Cabinet 16 January 2019

## **Other useful documents**

None.

## **Author(s)**

Amy Harhoff

Tel: 03000 276333

Paul Darby

Tel: 03000 261030

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## **Appendix 1: Implications**

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### **Legal Implications**

The report sets out a proposed review of the proposed arrangements for displaying and storing the DLI collection. Any legal implications of alternative uses will be set out in subsequent reports.

### **Finance**

As with legal implications, the financial and value for money implications of any options will be set out in subsequent reports.

A capital budget of £19.6 million was established for the construction of the new History Centre with plans in place for a permanent exhibition of the DLI collection. Kier Property Developments Limited was awarded the contract following a competitive procurement exercise and commenced on site in April 2019.

In 2014/15 MTFP savings of £105,000 were achieved from a review of the opening hours and operation of the former DLI Museum at the Aykley Heads site. In 2016/17 further MTFP savings of £241,000 were achieved from the closure of the Museum and relocation of the DLI archives and collection.

### **Consultation**

Not applicable at this stage, though there will be a need to engage with a range of stakeholders as part of the options appraisal

### **Equality and Diversity / Public Sector Equality Duty**

Not applicable at this stage.

### **Climate Change**

Not applicable at this stage but will be considered if any alternative options are considered in further detail.

### **Human Rights**

Not applicable at this stage.

### **Crime and Disorder**

Not applicable at this stage.

### **Staffing**

Not applicable at this stage at this stage but will be considered in future reports as required.

## **Accommodation**

Not applicable at this stage but will be considered as part of consideration of future options.

## **Risk**

Risk assessments of alternative options will need to be considered, including an impact assessment on the plans for the new History Centre. Risks will include financial and reputational risk assessments of each of the options considered.

## **Procurement**

Not applicable at this stage but will be considered as part of consideration of future options.

**Cabinet**

**16 June 2021**

**Review of Durham County Council  
Headquarters**



**Ordinary Decision**

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**Report of Corporate Management Team**

**Amy Harhoff, Corporate Director of Regeneration, Economy and Growth**

**Paul Darby, Interim Corporate Director of Resources**

**Councillor James Rowlandson, Cabinet Portfolio Holder for Resources, Investments and Assets**

**Councillor Elizabeth Scott, Cabinet Portfolio Holder for Economy and Partnerships**

**Councillor Richard Bell, Cabinet Portfolio Holder for Resources**

**Purpose of the Report**

- 1 The report sets out proposals to review the options for use of the newly constructed Durham County Council Headquarters (HQ) at The Sands in Durham City and to set out an approach for reviewing the options for the Council's HQ functions.

**Executive summary**

- 2 This report reflects Durham County Council's newly appointed Joint Administration's commitment to review the options for Durham County Council's Headquarters including reviewing the use of the newly built HQ building on The Sands in Durham City and having regard for the growth and employment opportunities at Aykley Heads in Durham City. The review will be undertaken as quickly as possible whilst ensuring appropriate due diligence is in place.
- 3 The decision to relocate the Council's HQ to a new building at The Sands in Durham City and to develop Aykley Heads as a strategic employment site was agreed by Cabinet on 17 January 2018 in a report entitled "Aykley Heads Strategic Employment Site, DCC HQ Full

Business Case and Future Options for the County Archive.” Cabinet also considered an exempt report on the same date which set out the outcome of the procurement exercise to construct the new HQ including the costings for the development.

- 4 The 17 January 2018 reports were preceded by earlier reports considering the strategic need for development and the outline business case for the proposals.
- 5 The construction of the new HQ building has a capital budget of £49.1 million. Kier Construction Limited was awarded the contract following a competitive procurement exercise and subsequently work on site commenced in 2018. The building is substantially built with practical completion expected in October 2021.
- 6 The Joint Administration is seeking to:
  - review the options for utilising the new building at The Sands, Durham City. Work on considering options will commence immediately on agreement of this report and will include a site visit to the new building by lead Members;
  - consider the options for the location of HQ functions taking account of the review of the new building and assessing the options for the existing HQ site at Aykley Heads as well as considering any post-Covid recovery issues;
  - ensure that the strategic employment site proposals for Aykley Heads are fully considered as part of the review;
  - report back to Cabinet at the earliest opportunity, and not later than September 2021.
- 7 An options appraisal will be prepared which will include a full assessment of opportunities, costs, risks, and the implications of any proposals that are proposed to be brought forward.

### **Recommendation(s)**

- 8 Cabinet is recommended to agree:
  - (a) that an options appraisal as set out in paragraph 6 is prepared; and
  - (b) that a further update report is provided to Cabinet, at the latest by September 2021.

## **Background and Review of New HQ Options**

- 9 The Joint Administration is committed to reviewing the options for use of the newly constructed Durham County Council Headquarters (HQ) at The Sands in Durham City and to set out an approach for reviewing the options for the Council's HQ functions.
- 10 There have been a number of detailed reports to Cabinet which have set out the background and decisions in reaching the current position of the Council's existing proposals to redevelop the Aykley Heads site as a strategic employment site in anticipation of attracting new high paid jobs to the county as well as setting out proposals to relocate the county Archives to a new History Centre at Mount Oswald.
- 11 Specifically, the decision to relocate the Council's HQ to a new building at The Sands in Durham City and to develop Aykley Heads as a strategic employment site was agreed by Cabinet on 17 January 2018.
- 12 The January 2018 report was the third in a series of reports presented to Cabinet with reports prior to that considering the strategic (need for the development) and outline business case (options appraisal to achieve the objectives and aims agreed as part of the strategic business case) for these proposals. These reports set out the background to the decisions that have been taken by Cabinet and on which plans have been progressed to date.
- 13 The new HQ has been designed to replace the existing County Hall site with a smaller, more modern and efficient building. It has been designed for flexible working with appropriate collaboration and meeting space.
- 14 Staff currently working out of the existing County Hall building that were not aligned to the new HQ were to be accommodated in the other strategic sites across the county and this part of the relocation has been implemented.
- 15 The construction of the new HQ building has a capital budget of £49.1 million. Kier Construction Limited was awarded the contract following a competitive procurement exercise and work commenced on site on 2018. The building is in the final stages of build, with practical completion estimated in October 2021. Medium Term Financial Plan (MTFP) savings of £275,000 per annum are currently anticipated from the relocation to the new HQ and are factored into MTFP11 from 2022/23 onwards.
- 16 As part of the initial review of priorities and in setting the strategic direction of the Council for the next four years, the Joint Administration

is proposing to review all options for the use of the new building, including its proposed use as a new HQ for the Council.

## **Conclusion**

17 The Joint Administration is seeking to

- review the options for utilising the new building at The Sands, Durham City. Work on considering options will commence immediately on agreement of this report and will include a site visit to the new building by lead Members;
- consider the options for the location of HQ functions taking account of the review of the new building and assessing the options for the existing HQ site at Aykley Heads as well as considering any post-Covid recovery issues;
- ensure that the strategic employment site proposals for Aykley Heads are fully considered as part of the review;
- report back to Cabinet at the earliest opportunity, and not later than September 2021.

## **Background papers**

- Aykley Heads Strategic Employment Site, DCC Headquarters Full Business Case and Future options for the County Archive – Reports to Cabinet 17 January 2018 (Part A and Part B reports);
- Update on the Office Accommodation Programme and Outline Business Case for a New Headquarters – Reports to Cabinet 13 July 2016 (Part A and Part B reports);
- Update on Office Accommodation Programme and release of Aykley Heads Strategic Employment Site for Economic Regeneration – Report to Cabinet 15 July 2015.

## **Other useful documents**

- Local Plan – Adopted by Full Council October 2020

## **Author(s)**

Amy Harhoff

Tel: 03000 276333

Paul Darby

Tel: 03000 261030

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## **Appendix 1: Implications**

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### **Legal Implications**

The report sets out a proposed review of use of the newly constructed HQ building. Any legal implications of alternative uses will be set out in subsequent reports.

### **Finance**

As with legal implications, the financial and value for money implications of any alternative use options will be set out in subsequent reports. Any external consultancy or other support required to support the options appraisal will be funded from contingencies. These costs are not known at this stage and will be included in subsequent reports.

The construction of the new HQ building has a capital budget of £49.1 million. Kier Property Developments Limited was awarded the contract following a competitive procurement exercise and commenced on site on 2018. The building is in the final stages of build, with practical completion estimated in October 2021, as is expected to come in on budget at this stage.

MTFP savings of £275,000 per annum are currently anticipated from the relocation to the new HQ and are factored into MTFP11.

### **Consultation**

Not applicable at this stage, though there will be a need to engage with a range of stakeholders as part of the options appraisal.

### **Equality and Diversity / Public Sector Equality Duty**

Not applicable at this stage.

### **Climate Change**

Not applicable at this stage but will be considered if any alternative use options are considered in further detail. Impact (if any) on car usage and travel will be fully considered as part of the options appraisal.

### **Human Rights**

Not applicable at this stage.

## **Crime and Disorder**

Not applicable at this stage.

## **Staffing**

Not applicable at this stage but will be considered as part of consideration of alternative uses.

## **Accommodation**

Not applicable at this stage but will be considered as part of consideration of alternative uses.

## **Risk**

Risk assessments of alternative uses will need to be considered carefully as part of the options appraisal, including an impact assessment on the plans for developing the Aykley Heads site. Risks will include financial and reputational risk assessments of each of the options considered.

## **Procurement**

Not applicable at this stage but will be considered as part of consideration of alternative uses.