

## Community Safety Select Committee

A meeting of the Community Safety Select Committee was held on Thursday 26 June 2025.

**Present:** Cllr Mrs Ann McCoy (Chair), Cllr Jim Beall (sub for Cllr Barbara Inman), Cllr Carol Clark (sub for Cllr Bob Cook), Cllr John Coulson, Cllr Lynn Hall (sub for Cllr Jason French), Cllr Shakeel Hussain, Cllr Katie Weston

**Officers:** Mandy MacKinnon (A,H&W); Louise Hollick (ChS); Aishah Waithe, Gary Woods (CS)

**Also in attendance:** None

**Apologies:** Cllr Bob Cook, Cllr Jason French, Cllr Barbara Inman, Cllr Alan Watson

### **CSS/7/25 Evacuation Procedure**

The evacuation procedure was noted.

### **CSS/8/25 Declarations of Interest**

There were no interests declared.

### **CSS/9/25 Minutes**

Consideration was given to the minutes of the Community Safety Select Committee meeting which was held on 22 May 2025 for approval and signature. A query was raised in relation to the following item:

- Action Plan for Agreed Recommendations – Review of Welcoming and Safe Town Centres: With reference to the early impact of *Operation Shield*, clarity was sought on whether local businesses had experienced their busiest day or, in fact, their busiest week (given how footfall was sometimes presented) – it was confirmed that officers had reported that the measure stated was ‘day’.

In related town centre matters, Members were saddened to learn of River Island announcing that it would be leaving Stockton High Street (Wellington Square). The Committee acknowledged that it was disappointing to lose any shops, though expressed confidence that new businesses would continue to be attracted to town centre spaces.

AGREED that the minutes of the Committee meeting held on 22 May 2025 be approved as a correct record and signed by the Chair.

### **CSS/10/25 Scrutiny Review of Children affected by Domestic Abuse**

The first evidence-gathering session for the Committee’s review of Children affected by Domestic Abuse considered submissions from Stockton-on-Tees Borough Council (SBC) departments, Public Health (Adults, Health and Wellbeing), and Early Help,

Safeguarding and Children in our Care (Children's Services). Prior to these presentations, the Committee was reminded of the links to key documents within the covering report for this item, including:

- Home Office: *Domestic Abuse – Statutory Guidance* (July 2022)
- GOV.UK: *Victims in their own right? Babies, children and young people's experiences of domestic abuse* (part 3: opportunities to identify and intervene early)
- Stockton-on-Tees Domestic Abuse Strategy 2022-2028
- SBC Children and Young People Select Committee – *Scrutiny Review of Domestic Abuse and its Impact on Children* (2019-2020) (final report and subsequent Action Plan in relation to the agreed recommendations).

## SBC PUBLIC HEALTH

Introduced by the SBC Strategic Health and Wellbeing Manager, information was provided as follows:

- Defining domestic abuse: The Domestic Abuse Act 2021 stated that domestic abuse involved any single incident or pattern of conduct where someone's behaviour towards another was abusive, and where the people involved were aged 16 or over, and were or had been personally connected to each other (including relatives and intimate relationships). The different types of abuse comprised psychological, physical, sexual, financial and / or economic, emotional, and controlling and / or coercive behaviour. A significant change in the law had led to children being recognised as victims in their own right if they saw or heard domestic abuse. It was also important to distinguish that abusive behaviour directed at those aged 16 or over was deemed 'domestic abuse' but was categorised as 'child abuse' when directed at those under 16 years.
- Prevalence of domestic abuse: According to the Crime Survey for England and Wales (2024), approximately one in five (20.5%) people aged 16 years and over had experienced domestic abuse since the age of 16 years – this equated to 33,508 people in Stockton-on-Tees given its 16 years+ population was estimated to be 163,456 (ONS population estimates, June 2023). An estimated 4.8% (7,845) of people aged 16 years and over (6.6% of women and 3.0% of men) had experienced domestic abuse in the last year.
- Domestic abuse in Stockton-on-Tees: Several statistics were highlighted in relation to the extent of domestic abuse within Stockton-on-Tees. During 2023-2024, there were 5,225 recorded 'incidents' of domestic abuse across the Borough and 3,907 recorded domestic abuse 'crimes', with 17% of all crimes recorded by Cleveland Police during this period being domestic abuse-related. The Stockton-on-Tees rate of 26 domestic abuse incidents and crimes per 1,000 population was slightly higher than the England and Wales average (24) but less than the North East average (32).

From a Local Authority perspective, during 2023-2024, 1,010 referrals into SBC Children's Services had domestic abuse listed as the reason for contact, with 25% of referrals made to SBC Children's Services over this period being domestic abuse-related (a reduced percentage compared to 2022-2023 when this was around a third). The gender split of domestic abuse victim-survivors was 73%

female: 27% male, 40% of domestic abuse incidents involved a repeat victim, and 64% of victims were unsupportive of prosecuting their abuser.

- Domestic abuse is a crime: Crime data from the Home Office for the year ending March 2024 showed the number of domestic abuse-related incidents and crimes recorded by the police. Of the over two million estimated victims, 851,062 'crimes' and 499,366 'incidents' were documented, though the number of suspects referred, charged, and offenders convicted was very low by comparison.
- The impact of domestic abuse: A range of potential consequences following experiences of domestic abuse were listed, from fear, anxiety and depression through to suicide. Specific impacts during pregnancy were outlined (it was estimated that 30% of domestic abuse began in pregnancy), as were the effects throughout different child phases (infants, toddlers, primary school age). It was also noted that domestic abuse was present in 52% of child deaths, and that 50% of children accessing Child and Adolescent Mental Health Services (CAMHS) were victim-survivors of domestic abuse.
- Local Authority duties: Councils were required to undertake a range of tasks in relation to the issue of domestic abuse, with the Domestic Abuse Act 2021 requiring the provision of safe accommodation (refuges, dispersed properties, sanctuary support (known locally as 'Safe at Home')) which was facilitated via the production of a safe accommodation needs assessment and subsequent strategy to influence commissioning. Other key Local Authority obligations involved leading on a domestic abuse partnership with other organisations (in Stockton-on-Tees, this was done via the Domestic Abuse Steering Group), working with organisations that can represent the voice of victim-survivors (Harbour fulfilled this role locally), allocating the role of a Domestic Abuse Co-ordinator, and responding to the Domestic Abuse Commissioner.
- Domestic Abuse Commissioner: Dame Nicole Jacobs began this role in 2019 which was granted additional powers in 2021. With regional offices across the UK, the Commissioner had published a policy paper in April 2025 which reflected the voice of those children and young people who had experienced domestic abuse.
- Stockton-on-Tees Domestic Abuse Strategy 2022-28: Three key elements in relation to the local vision were outlined – everyone experiencing domestic abuse is listened to, supported and protected to live their life free from abuse; all victims of domestic abuse have access to inclusive, quality, affordable and appropriate safe accommodation and support; perpetrators of domestic abuse are held to account and supported to change their behaviour.
- Commissioned service: Harbour: SBC commissioned Harbour as the local domestic abuse support service whose offer included a GP Independent Domestic Violence Advocate (IDVA), a children's team and a Child IDVA (to ensure the voice of the child was heard), and the provision of safe accommodation. Harbour and SBC Children's Services worked together to jointly plan support and develop the workforce.

Emphasising that the Committee's review of this scrutiny topic was an important piece of work which aligned with the Council's belief that every child should have the best possible start in life, Members commended the detailed presentation and the inclusion of extensive data which highlighted the seriousness and extent of this type of abuse.

From a local perspective, the Committee was particularly shocked that 64% of victims were unsupportive of prosecuting their abuser, and wondered what proportion of these cases involved victims who had children and whether they were aware of the possible impact of domestic abuse upon their child. The victim-survivor gender-related statistics were also queried, with Members suggesting that the male figure (27%) may be an underestimate due to a reluctance to come forward and report their experience.

Continuing with the focus on data, the Committee noted the labelling of cases as either 'crimes' or 'incidents' and felt this needed further probing to establish how instances of domestic abuse were determined / recorded. SBC officers referenced the Council's involvement in work being undertaken on a Tees Valley-wide basis (led by the Office of the Police and Crime Commissioner for Cleveland) around perpetrators of domestic abuse.

Switching attention to the impact of exposure to domestic abuse on children, the Committee felt it would be useful to understand how well self-harm was investigated / identified as this could sometimes be a symptom which remained hidden – it was subsequently noted that Tees, Esk and Wear Valleys NHS Foundation Trust (TEWV) was included on the list of anticipated contributors to this review. Members were also keen to unpick the statistic that 50% of children in CAMHS were victim-survivors of domestic abuse.

Links between the rise in alcohol consumption / substance misuse and domestic abuse were discussed, with SBC officers acknowledging that these factors were interconnected, and that settings where such behaviour was entrenched were more likely to see exploitation occur (it was also noted that alcohol and drugs could be used as a coping mechanism). Whilst domestic abuse could be a compounding factor in areas of deprivation, it was, however, prevalent across all communities.

Further reflections on the effects of exposure led Members to query if any information was available on the likelihood of a child going on to become a perpetrator if they themselves had experienced domestic abuse in their formative years. The Committee also recognised the need to understand the causes of domestic abuse as well as its subsequent impact.

Questions on commissioned services were then raised, with the Committee asking how much of the Public Health budget was spent on local organisations to provide support in relation to domestic abuse. SBC officers confirmed that the annual spend was around £500,000 which was part-funded via the Public Health grant and a 'safe accommodation' grant. Regarding Harbour, Members were informed that further details around their offer and how this was financed could be obtained directly from them when they provided their contribution to this review.

Committee comments concluded with a request for further statistics on domestic abuse prevalence over a longer period of time to ascertain its trajectory (SBC officers stated that an increase in recorded incidents may be reflective of more individuals reporting cases (as opposed to a rise in prevalence) which was to be welcomed), and praise over the involvement of health organisations in local partnership arrangements as this was where many experiences of domestic abuse could be identified. Members also spoke of their personal involvement in supporting those who had been abused, noting that women were often reluctant to seek help until their child / children became affected, and were also liable to return to their partner despite being abused by them.

## SBC EARLY HELP, SAFEGUARDING AND CHILDREN IN OUR CARE

A presentation was given by the SBC Assistant Director – Early Help, Safeguarding and Children in our Care which focused on the following:

- Children's Social Care (legal framework): Relevant legislation on this scrutiny topic involved the legal recognition of children as victims within Section 3 of the Domestic Abuse Act 2021 (as outlined in the previous presentation), as well as the requirements under the Children Act 1989 which placed a duty on Local Authorities to safeguard and promote the welfare of children in need (i.e. a child requiring support and protection because their health or development was likely to be significantly impaired without such intervention, or because they had a disability).

The Children Act 1989 included an escalating scale of obligations, from the provision of services (Section 17), the need to investigate if a child was suspected to be suffering or likely to suffer significant harm due to domestic abuse (Section 47), and the provision of accommodation for children in need in specific circumstances (Section 20), through to a Care Order (a legal order made by a family court under Section 31 of the Children Act 1989, this placed a child under the care of a Local Authority, giving them shared parental responsibility with the child's parents).

- Working Together framework: The Working Together to Safeguard Children 2018 (updated in 2020 and 2023) guidance was statutory and set out how all organisations and agencies (not just social care and the police) should work together to safeguard and promote the welfare of children in England. Key principles included a child-centred approach, a whole-family focus, and multi-agency collaboration, with specific regard to domestic abuse (stating that practitioners should continue to expand their understanding of domestic abuse and the impact it had on children).
- Information sharing to safeguard children (multi-agency work): Guidance clarified that the Data Protection Act 2018 and General Data Protection Regulations (GDPR) did not prevent the sharing of information for the purposes of keeping children safe. Fears about sharing information must not be allowed to stand in the way of the need to promote the welfare and protect the safety of children.

All partners had a responsibility to have written safeguarding policies, and staff should be trained to identify the signs of abuse and harm for children. Where there were concerns for a child's wellbeing, a referral should be made to children's social care (through the Stockton-on-Tees Children's Hub (CHUB)). Partners should attend multi-agency meetings to share information, participate in safeguarding planning, and contribute to assessments and support plans.

- Stockton context (domestic abuse referrals): Data on contacts to the Stockton-on-Tees CHUB for 2024-2025 indicated that 989 domestic abuse-related referrals were received in relation to children up to 16 years-old (around 25% of the total number of referrals received (just under 4,000)). Of these 989, 384 involved children aged five or under, and 99 were unborn or under one year-old.

As outlined in the accompanying table, the police was by far the biggest referrer, submitting 485 (49%) of all referrals relating to domestic abuse (it was noted that SBC and Cleveland Police were currently undertaking a joint pilot involving daily

'pitstop' meetings to triage domestic abuse referrals – this identified anything considered medium-risk and above, and also involved Harbour). Referrals from other organisations / agencies were very dispersed, with some, arguably, not as high as they perhaps should be.

- Early help support: A number of options existed locally to support families with children in the early stages of their lives – this included the commissioned service, Family Action (outreach volunteers providing community support (e.g. food parcels, signposting to other services), four Family Hubs across the Borough (offering a range of parental support, group sessions and programmes – engagement workers were also in place to encourage access), the Family Solutions Teams (senior family workers providing 1:1 help to develop plans, visit homes, and work directly with children), and the SBC Project and Interventions Service (family group conferencing and therapeutic support, featuring an established model which identified extended family / friends / distant relatives to allow the family unit to develop its own support plan).

As part of the current support offer, the Family Hub programmes including an element on 'nurturing' which covered the emotional wellbeing of the family, communicating / negotiating with a child, and how to keep a child safe and supported. The 'keeping your child in mind' principle was also highlighted – this aimed to give parents a better understanding of their own behaviour and the behaviour towards their partner, and the impact this could have on their child / children.

- Social work interventions: Further to the earlier section around legislative considerations, potential involvement of social workers was outlined which included children and families assessments (completed within 45 days), Child in Need plans, Child Protection plans (under Section 47 requirements), Pre-Proceedings plans under Public Law Outline (PLO), and Child in our Care (CIOC) planning. Interventions for any of these situations would include referrals to Harbour, direct work with the child (obtaining their 'voice' if old enough), home visits, observations of the child with parent(s), parenting work, assessments, and referrals for other interventions such as substance misuse or mental health (often reflecting case complexity). Child in Need and Child Protection planning involved regular multi-agency partnership meetings.

The Committee began its response by enquiring whether *Operation Encompass* (helping children who experience domestic abuse and aiming to reduce the long-term impacts by providing early intervention and support) was still an active initiative. SBC officers confirmed that it continued to exist, though Members noted recent challenges which emerged due to the loss of (and subsequent delays in replacing) dedicated police personnel.

Comments and questions on the theme of multi-agency working saw the Committee again commending the emphasis on local organisations and agencies talking to each other. However, Members sought clarity on what was in place (in terms of monitoring and evaluation) to provide assurance that the overarching 'system' around the issue of domestic abuse was working. It was noted that the Committee would have the opportunity to scrutinise both the Stockton-on-Tees Domestic Abuse Steering Group and the Hartlepool and Stockton-on-Tees Safeguarding Children Partnership (HSSCP) as part of this review.

Analysing the referral data, the Committee wondered if safeguarding-related assessment tools used by the Council and its partners included specific references to domestic abuse so that professionals were aware of the signs they should be looking out for. Members also felt that the statistics for the EDT (Emergency Duty Team) – 27 for the 2024-2025 period – should be checked to see which organisation made the original referral (as the EDT would have merely forwarded this on).

Regarding social work interventions, the Committee asked what the timescales were in relation to the Section 47 duty and what happened to the child during this process. SBC officers stated that there was a statutory timeframe of 15 days to complete an investigation and decide if a child protection conference was required (though this was often determined within 15 days). Any investigation involved seeing the child by themselves and was a joint operation with the police. A family and child safety plan would be created and followed during this process.

Members drew attention to those families who were more transient and queried how organisations / agencies monitored those who did not remain in one place for very long. SBC officers provided assurance that if a family / child moved into the Borough from a neighbouring Local Authority, they would 'transfer in' (SBC would take responsibility for any existing plan). However, it was acknowledged that the Council may initially be unaware of some families / children who arrived into the locality from other areas.

Bringing the item to a close, the Committee thanked SBC officers for their presentations which had provided an important initial overview around this scrutiny topic and prompted several areas of follow-up for the remainder of the review's evidence-gathering phase.

## SCOPE AND PROJECT PLAN

It was proposed, and subsequently agreed, that representatives of the local Domestic Abuse Steering Group, the Domestic Abuse Commissioner's Office (regional lead), and Harbour would be invited to provide information at the next evidence-gathering session in July 2025.

AGREED that the information provided by SBC departments, Public Health (Adults, Health and Wellbeing), and Early Help, Safeguarding and Children in our Care (Children's Services) be noted.

## **CSS/11/25 Chair's Update and Select Committee Work Programme 2025-2026**

### CHAIR'S UPDATE

The Chair had no further updates.

### WORK PROGRAMME 2025-2026

Consideration was given to the Committee's current work programme. The next meeting was due to take place on 31 July 2025 where the second evidence-gathering session for the Children affected by Domestic Abuse review would be held. In addition, the first progress update on the Action Plan which was agreed following the Committee's previous review of Outdoor Play Provision would be presented (this had

been pushed back a month so the scheduled discussions at Cabinet earlier in July 2025 could be relayed / reflected upon as part of the update).

AGREED that the Chair’s Update and Community Safety Select Committee Work Programme 2025-2026 be noted.

Chair: .....