## Tilley Award 2006

# **Application form**

Please ensure that you have read the guidance before completing this form. By making an application to the awards, entrants are agreeing to abide by the conditions laid out in the Guidance. Please complete the following form in full and within the word limit. Failure to do so could result in disqualification from the competition.

Completed application forms should be e-mailed to Tricia Perkins; patricia.perkins@homeoffice.gsi.gov.uk

All entries must be received by noon on Friday 28th April 2006. No entries will be accepted after this time/date. Any queries on the application process should be directed to Tricia Perkins on 0207 035 0262. Any queries regarding other aspects of the awards should be directed to Michael Wilkinson on 0207 035 0247 or Lindsey Poole on 0207 035 0234.

Title of the project	of the project Street Population (Street drinkers) in Camberweii	
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1. Details of application		
X Main award	Criminal Damage Award	Both Awards
Please tick box to indicate w damage award or both;	hether the entry should be considered for t	the main award, the criminal

Name of force/agency/CDRP: Southwark- Camberwell Green Safer Neighbourhood Team

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## 2. Summary of application

## Street Drinkers and Anti-Social Behaviour in Camberwell

#### Problem

This summary outlines an initiative to tackle street drinking related anti-social behaviour in Camberwell, which has been led by the Camberwell Green Safer Neighbourhood Team (CGSNT).

Camberwell has had street drinkers for years. What were once just the odd one or two street drinkers on the benches in Camberwell Green developed into groups of fifty congregated in the main public areas. The community had had enough and wanted the problem tackled once and for all.

Generally the drinkers' presence reduced the quality of life for people living, working or traveling through the area. They were anti-social, engaging in drug misuse, prostitution, begging and petty theft. They discouraged the public from using parks or other open spaces.

The complaints from the public placed the demand upon the following agencies:

The police, the local authority, and a dozen or so voluntary and statutory agencies in the area.

The aim was to provide a long term solution to street drinking related anti-social behaviour in Camberwell.

## Scanning /Analysis

Outreach workers were employed through funding by the local authority and Public meetings held to assess the scale and nature of the problem. The CGSNT identified and monitored individuals. This found that there were in excess of 120 street drinkers', with a hardcore of around 30 in the area most of the time. Most were engaged with service providers in Camberwell but lived outside the area. Many had housing, health and benefits issues.

The number and variety of service providers, and licensed premised in the area was highlighted as a contributory factor.

## Response

New protocols were set up between the various agencies involved and information exchange processes developed. Individuals were 'case conferenced' and their specific needs were addressed.

A process of escalating enforcement, which included Anti Social Behaviour interventions were applied where necessary. These measures were supported by Primary Care Trust and Local Authority service providers. A 'Wet Centre' was opened and environmental changes made.

#### **Assessment**

This initiative has been independently evaluated and hailed as a demonstration of successful partnership working. Street drinking has been substantially reduced in the area and the initiative has received great public support.

It has provided the template by which Southwark Safer Neighbourhood Teams, partners and the community work together.

It must, however, be stressed that the problem solving process to tackle this problem is ongoing.

# 3. Description of project

# Street Drinking in Camberwell

#### Introduction

Camberwell in South East London has at its heart one of the busiest traffic intersections in London. It is home to a multi-cultural community, a popular and successful shopping area and a thriving and expanding night-time economy.

The community spans most socio-economic groups, large local authority housing estates sit closely to fine privately owned Georgian terraces.

Camberwell hosts Kings College Hospital and one of the country's largest psychiatric hospitals, The Maudsley.

Camberwell is not without problems. There are high levels of social deprivation, social exclusion and unemployment. Crime has been high in the area and in 2000, it was identified by the Home Office, as being a Policing Priority Area. One of only five nationally.

Restructuring of council departments and the police in the last three years has led to the creation of Camberwell Community Council, Camberwell Green Safer Neighbourhood Team (CGSNT), Southwark Council's Community Safety Department and Neighbourhood Renewal.

The community now has specific bodies to direct their concerns towards, using the platforms of the Sector Working Group, Traders Association and the Safer Neighbourhood Community Panel.

### The Problem

Camberwell has been associated with street drinkers and vagrancy issues for decades. Workhouses and soup kitchens in the 1950's and 1960's were obvious draws. They have in the main now closed down but the presence of drinkers and vagrants on Camberwell Green has continued. Few homeless people remain in the area but the odd one or two drinkers who sat on the benches, were superseded by a much larger group congregating outside shops and restaurants.

Their behaviour was disorderly. They urinated, defecated and left litter in public places. They intimidated passers by, and obstructed the pavements. Some rough slept and begged at the bank cash points. Others engaged in open drug misuse and prostitution.

It was obvious that by their presence, other members of the community were discouraged from using parks or other open spaces. A large number of the street drinkers used drugs, and attended various services in Camberwell.

These individuals were also vulnerable. Many had been victims of assaults, theft, and drug related crime. They also had varying medical conditions, including mental health problems,

Concerns were raised over the number of service providers concentrated in Camberwell. These include: The Methadone scripting service at Marina House, the Maudsley Psychiatric Hospital (one of the largest in the country), the St Giles Centre that deals with alcohol additions and the Alcohol Rehabilitation Project (ARP). The list goes on.

A further concern raised by residents was around both the number and concentration of off-licenses and

outlets selling discounted high proof alcohol in Camberwell.

In late 2003 the community, through the Camberwell Sector Working Group, put forward their concerns in relation to Street Drinking to the Camberwell Community Council. They wanted an end to large groups of drinkers in the area, the anti-social behaviour, and the effects their presence had on businesses and visitors.

#### The Partners

In March 2004 a working group was set up consisting police and Southwark Council Community Safety. The aim of the group was to achieve a 75% reduction in the number of street drinkers gathering in Camberwell Green by April 2005 as compared to the previous year.

This group acknowledged that in order to achieve this aim, a number of partner agencies needed to be involved with the project. Robust mechanisms of accountability and transparency also needed to be established.

The initial list of partners were:

- Southwark Community Safety Unit
- Camberwell Green Safer Neighbourhood Team (CGSNT)
- Lambeth Police
- Camberwell Neighbourhood Renewal
- St. Giles Trust (Alcohol Addiction Centre)
- Marina House (South London and Maudsley SLAM)
- Methadone Maintenance Clinic (SLAM)
- Southwark Anti-Social Behaviour Unit (SASBU)
- St Giles Outreach Workers
- Peckham Licensing Officer/ Southwark Licensing Dept.
- Camberwell Community Council
- Southwark Drugs, Alcohol Advisory Team (DAAT)
- Alcohol Rehabilitation Project (ARP)
- Kings College Hospital PCT
- Camberwell Traders
- Camberwell Sector Working Group (CSWG)
- Camberwell Community Wardens (Southwark Council)
- Residents from Crawford Estate TA, Samuel Lewis Trust TA, Valmar Area TRA, Castle Mead TA, Poets Corner TA.
- Local Councillors

Two forums were established made up from these partner agencies.

The first was the Strategic Forum. This was held monthly and consisted of representatives from all our partners. Its role was to direct operations, oversee the project and keep all partners updated.

The second was the Operations Forum. This got together all the front line practitioners from various agencies, allowing confidential information sharing to take place with regard to specific individuals.

## Scanning

It was apparent from the outset that there was, or had been, various interventions taken by the partner

organizations to tackle the problems of street drinking in Camberwell. Most had been short term or quick fix solutions and the problems had never been looked at globally. Also, the problem crossed over into a neighbouring borough of Lambeth.

The police had really only dealt with street drinkers as either victims or perpetrators in matters arising around crime. They had never really tackled the anti-social behaviour associated with them.

The local authority had tried various measures to design out the problem. This had included replacing traditional park benches with a different designs and locating CCTV in the areas used by the drinkers to discourage them from behaving anti socially.

Various service providers had tried to establish behaviour contracts with clients, but this was never properly monitored or enforced.

What also became clear was that the information needed to ensure that any future interventions would be effective or sustainable, was incomplete. We needed the answers to two questions;

What were the factors that made street drinking such an age old problem in Camberwell?

Who were the individuals causing problems?

We looked at the various key locations and discussed what attracted the drinkers to them. The key locations were:

- Coldharbour Place, a footpath that runs from between Coldharbour Lane and Denmark Hill.
- Coldharbour Lane the disused 'Age Concern' building.
- Coldharbour Lane outside 'Nandos' restaurant.
- Camberwell Green and the bank cash points.

Coldharbour Place was a footpath leading from Coldharbour Lane to Denmark Hill. It was bounded by a building site and included an access road to the rear of some shops. Furniture was regularly fly tipped in the area. The building site was new key worker accommodation for Kings College Hospital.

The disused 'Age Concern' building in Coldharbour Lane became a regular haunt for drinkers. It had a large open garden area, which was very overgrown and shielded their activities from passers by and attracted drug misuse.

The area outside 'Nando's' restaurant in Coldharbour Lane had a low wall where the drinkers used to sit and congregate.

The forty seven off-licenses and licensed premised in Camberwell (not including the pubs and clubs) and the trading practices of some of these premises also contributed to the problem.

Outreach workers were employed from the St Giles Trust. Their role was to engage with the various groups of street drinkers in the area and to find out what their issues, needs, and concerns were. The St Giles Trust has been working with street drinkers and homeless people in Camberwell since the 1960's, so they were an obvious choice to conduct this work. These workers were funded through Neighbourhood Renewal.

The CGSNT, along with the Council Community Wardens created systems of intelligence gathering. Incidents of anti-social behaviour, crime, etc involving the street population were now logged, recorded and searchable. Patrolling, monitoring, and engagement with the groups increased.

It was discovered that there was over 150 street drinkers in Camberwell and that there was around thirty who were in the area everyday. On the whole, they were found to congregate in several key locations in Camberwell from around 9 am until early evening.

Initially there were difficulties around establishing the identity of individual street drinkers. Some gave false names, some gave nicknames and others refused. The CGSNT sought to take photographs of the street drinkers' and the relevant authorities were granted for overt photography.

Having photographed many of the key individuals we were able to clearly identify them. This coupled with the outreach work and the intelligence gathering we now had a clear picture of who we were dealing with, and what their circumstances were.

## **Analysis:**

Our findings were as follows:

- There was a hard core of around thirty drinkers who were visible in groups in Camberwell most days; these individuals were a magnet to others.
- 90% were white.
- 50% were female.
- 95% were housed.
- 94% lived outside the Camberwell SE5 area.
- 96% were poly substance abusers. (Involved in drug misuse, as well as drinking alcohol)
- 92% attended the methadone maintenance clinic at Marina House in Denmark Hill.
- 74% had major health issues.
- Many had never fully engaged with services, had issues around maintaining their tenancies, many on the brink of eviction. Many had benefit issues.

#### Other identified issues were:

- The drinkers did not necessarily want to street drink but had nowhere else to go.
- Many wanted to access services but were refused if they had been drinking.
- Many wanted to go into detox but never felt they had the necessary support.
- Many needed housing, benefits and health issues addressed but needed help.

### Further Scanning:

Part of our process was to find out how street drinking had been dealt with elsewhere. We looked at various schemes both nationally and internationally that had been used to tackle the problem of street drinking. We found that in Finsbury Park, in North London, they had what was known as a 'Wet Centre'. This was a place where drinkers could go and access help and assistance for many of the things that concerned them but also allowed them to take drink and drink on site. It also offered basic medical assistance, a hot meal and somewhere warm and dry. This centre had been running for sometime and was well received locally.

We also researched the experiences of supervised drug injection services in Switzerland and Australia.

# Response- Environment/Interventions/Diversions|:

Environmental changes

Having recognised that there were a number environmental issues that contributed to the problem, measures were identified to address them.

We worked with the Kings College Hospital Security Manager on our Operations Forum, to tidy up the area and install better lighting and CCTV. Liaison with the community wardens' ensured rubbish was cleared promptly. Street drinkers no longer gather there.

Attempts were made to encourage the redevelopment of the 'Age Concern' building and these are still in hand. As an interim measure however, The CGSNT cleared litter from the area and cut back the bushes and grass using the 'Community Payback Scheme'. This has tidied up the area no end; it is a clear open space and is now an asset rather than an eyesore. The drinkers have not returned to this area and the planting of thorny bushes by the low wall outside 'Nando's' restaurant has prevented them from sitting on it.

#### Off-Licenses

Concern has been raised by the public over the trading practices of the off-licenses and licensed premised in Camberwell. Operations with HM Customs, Trading Standards, and Environmental Health have taken place with a few successful prosecutions.

An off-license had its license revoked by police following its continual sale to people who were drunk, allowing people to consume alcohol on the premises and operating a credit system to the street drinkers.

In addition to this, the CGSNT invited all the licensees to two workshops at Camberwell Police Station to discuss street drinkers and the new licensing legislation. At this meeting were representatives from the Council Licensing Office, Police Licensing Officer, Trading Standards and the CGSNT

# The St Giles Wet Centre:

Our forums discussed two possibilities of either trialling a 'Wet Centre' or a 'Wet Garden'. This initially met with scepticism with the community generally. Mainly around location and whether it would just draw in more drinkers and make the problem worse.

After a couple of weeks research, a 'Wet Garden', an area of land where the drinkers could go, was discounted as there was difficulty finding a suitable location and there were concerns that it would not meet the needs outlined above which would lead to drinkers changing their behaviour.

The Forum felt strongly that a 'Wet Centre' would prove useful and funding was granted through Neighbourhood Renewal to pilot such a scheme initially for six months.

The St Giles Trust in Camberwell Church Street, Camberwell, was an obvious choice for a 'Wet Centre'. What was sought was a variation on their existing 'dry' Day Centre Drop In. The Trust had the relevant expertise, facilities and staff. Community concerns were more easily allayed as St Giles already dealt with this type of client.

The following proposals were agreed with regard to what the 'Wet Centre' would provide and how it would run:

- Six month trial.
- 'Invite only' for thirty individuals.
- To run every week on Tuesdays and Thursdays from 11am until 4pm.
- It would provide a freshly cooked hot meal.
- A nurse and chiropodist would be available.
- Workers on hand to give advice and help with housing, benefits, detox and health concerns.
- St Giles Trust would report back to, and be accountable to the Forums.

There would be regular public meetings and consultation.

The 'Wet Centre' opened at St Giles in September 2004. Those invited were the thirty or so individuals who were identified as being the 'hard core' of drinkers in Camberwell.

## Monitoring:

As previously mentioned, robust systems were implemented with regard to intelligence gathering. Added to this was a visual audit. This was conducted on the last full week of each month and was a simple head count of drinkers in the key locations.

A scheme of escalating enforcement was agreed upon at the outset, appropriate enforcement went hand in hand with offers of support and help. We were starting to give the individual choice with regard to their behaviour.

Criminal matters were dealt with in the appropriate manner but the basic tactic of dispersal was used. Groups were asked to move on, and individuals were directed towards the 'Wet Centre' when open.

What could be seen when the 'Wet Centre' opened was, that during the times it was open, there were less drinkers in the key locations. It was noted that those attending the 'Wet Centre' drank less, and coupled with a good meal were less drunk. Several drinkers who engaged with the 'Wet Centres' services reduced their drinking, sorted out health and housing, and stopped street drinking. Some entered into structured detox.

Unfortunately, when the 'Wet Centre' closed at 4pm many went out and continued to street drink, and stayed in the area later into the day.

### **Response- Enforcement**

In November 2004 it was decided it was time to go down the route of Anti-Social Behaviour Orders (ASBO's) with around twelve individuals. As there was now such a strong co-ordinated approach with regard to service providers and enforcement agencies, it was suggested that Acceptable Behaviour Contracts (ABC's) would be worthwhile.

# Acceptable Behaviour Contracts (ABC's):

We did not want to go for a purely draconian approach to enforcement. It was always about providing alternatives and support, enabling the individual to make informed choices as to their conduct. Because of the unique way all the service agencies were working together, it was thought that the use of Acceptable Behaviour Contracts (ABC's) would be an ideal way of defining for the individual the behaviour that was considered anti social/ unacceptable.

The CGSNT put together the ABC in partnership with Southwark's Anti-Social Behaviour Unit (SASBU). Approval was sought from all the partners and agreement was met. All the partners' corporate logos appeared on the contract.

Consideration was given to how these were to be issued and to whom. The following protocol was drawn up.

- Any individual who had come to notice for anti-social behaviour in relation to street drinking in the previous four weeks would be offered an ABC.
- Intel reports would be reviewed every two weeks.
- Those who refused an ABC would be referred for an ASBO.
- If the ABC was breached more than four times in the previous four weeks then an ASBO would be

sought.

- Each individual eligible for an ABC would be case-conferenced, with input from their key worker or the consultant psychiatrist from Marina House. To ensure that the individual was able to understand what it was that was being asked of them (cognitive ability).
- The ABC would be discussed with the individual prior to signing by their key worker, ensuring that
  they understood what was being asked of them and what help they would need to stick to the
  conditions imposed.
- That the signing of the ABC would be done when they were sober.

The contract prohibited them from the following:

- Not to drink alcohol in the street in Camberwell SE5.
- Not to congregate in groups in Camberwell SE5.
- Not to behave anti-socially (a further specific explanation of what was deemed anti-social was given)
- Not to be involved in the misuse of drugs.
- Not to commit crime.
- Not to act in a way, or to incite another, that would cause harassment, alarm or distress.

The defined area was the SE5 postal district. It was felt that it was easy to understand, SE5 being on all the road signs but it covered the Lambeth part of Camberwell. It also gave consideration to any displacement effect, covering nearby parks, housing estates and the hospital.

Twelve individuals were initially identified as needing ABC's. The above protocol was adhered to and by the end of January 2005 all twelve signed.

Since then an additional ten ABC's have been signed.

Many of them daily attended Marina House for a supervised dose of methadone. In order to receive their dose, a condition is t they have to be under the drink drive limit and are breath tested by staff. Therefore, most were approached for signing near this time so that they were fit enough to understand and agree to the conditions listed. Where additional health problems were identified, the contracts were signed in the presence of their key workers.

Anti-Social Behaviour Orders (ASBO's):

ASBO's were considered to be the last resort in dealing with street drinkers. We felt that sufficient help and support was available to prevent it getting this far.

It quickly became clear that the ABC process was effective in addressing behaviour. Only seven individuals have had to be dealt with by way of ASBO's.

The ASBO's were sought through Southwark Anti-Social Behaviour Unit. The SN Team provided all the evidence with supporting statements from the Traders Association and the Community.

When seeking these orders at court what shone through was the simplicity, transparency, support and fairness of the process.

To date a total of twenty two ABC's and seven ASBO's have been issued. Only four of the ASBO's have been breached. Three of the individuals received lengthy terms of imprisonment for the breaches. This may seem harsh but even those working closely with the individuals have stated that for those individuals,

it was what was needed for them to address their problems. The support of the outreach workers has extended to prison visits, tenancy sustainment, and detox.

The consistency of sentencing and the commitment to the project has maintained the integrity of the ABC/ASBO process.

## **Response- Other Measures:**

The police have developed a 'Radiolink' scheme. This is a radio system linking businesses, Kings College Hospital, Marina House, St Giles Trust to the CGSNT and the Council Community Wardens. It has proved invaluable for real time intelligence exchange around street drinker, as well as many other matters. It has been used to direct officers to ASBO breaches and was also used as the primary call to a murder in Butterfly Walk in August 2005. This system has been part funded by the Police, Neighbourhood Renewal and Kings College Hospital. The system is maintained by the CGSNT and licensed by Kings Security. Plans to extend it further and to link with the Borough's CCTV control room are currently being looked at.

When the measures to tackle off- licenses were looked at, this led to an advisor from the Peckham Town Centre Management team taking over the struggling Camberwell Traders Association.

### Other Related Work:

## Protocols

From the relationships formed during this process, CGSNT have set up protocols for dealing with homelessness and mental health in Camberwell with St Giles, St Mungo's and Community Mental Health Team.

Police have also developed behavioural and monitoring protocols with Marina House for the national pilot of a Heroin Injectable Service, the first in the UK, and one of only four similar projects worldwide.

## Together Action Zone's (TAZ's)

Our work around street drinking has formed the template of working on a whole host of problems across the Borough. Various Together Action Zone's or TAZs have been set up in each community council area to identify and address problems specific to their area.

Licensing issues have now been taken up as a separate problem to tackle under the TAZ working groups.

## Assessment

The 'Wet Centre' received great public support. Funding was found to extend the pilot period of six months to the end of October 2005. The centre was open for thirteen months in total.

The 'Wet Centre' proved a useful tool by which to measure the impact of various interventions. However, there were drawbacks. It proved counter productive for some of the clients who used to attend the 'dry' day centre prior to it being setting up, therefore the 'Wet Centre' kept them drinking. As previously mentioned very few lived in Camberwell SE5, in fact just one out of the thirty, it was found that it was unnecessarily holding people to the area. Finally there was the cost implication, and there was never an infinite pot of money to keep it going.

What has developed from the 'Wet Centre' is a better and more appropriate service. It now consists of outreach workers who offer help with tenancy sustainment. They also monitor and support those with ASBO's. This new service has run since April 2005 and ran alongside the 'Wet Centre' to overlap the closure period. This new service is funded through Neighbourhood Renewal.

This initiative has developed a sustainable scheme to solve street drinking related anti-social behaviour in

Camberwell. Despite new people turning up in the area on a daily basis, the systems that are in place are robust and consistent.

I have collated the number of incidents of Anti-Social behaviour, and the total number of drinkers involved

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November 2004 - Incidents= 28 Total Number of Drinkers=144
December 2004 - Incidents= 30 Total Number of Drinkers=145
January 2005 - Incidents= 45 Total number of Drinkers=140

November 2005 - Incidents= 11 Total number of Drinkers=26
December 2005 - Incidents= 10 Total number of Drinkers= 28
January 2006- Incidents= 9 Total number of drinkers= 26
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These figures show a significant reduction in the number of drinkers and the ASB calls for police service.

In July 2005, Neighbourhood Renewal commissioned an independent evaluation and published in September 2005. It commended the project as being an example of how multi-agency co-operation and co-ordination can work successfully.

The Camberwell Street Drinkers initiative has attracted attention from several other councils and contributed to Southwark Council achieving Beacon Status for Anti-Social Behaviour work. Officers from the CGSNT have lectured at seminars to council representatives from around the country.

Continued use of visual audits showed that the original aim, which was to reduce the figures by 75% by our target date of April 2005 was not achieved. By December 2005, however, the audits showed this figure had been substantially exceeded.

Between March 2004 and March 2005, there were on average fifty visible street drinkers in Camberwell. The drinkers were in the area between the hours of 9am to 8pm, seven days a week. In the last quarter of 2005, there were only five visible street drinkers in the area, drinking on two days a week.

This represents not only an 89% reduction in numbers of drinkers but also a 71% reduction in frequency of drinking.

Drinking in groups has stopped altogether in the key locations and there has been anecdotal evidence from the service providers that request for detox from the drinkers has more than doubled. Others, for the first time in their lives, have given up drinking.