

West Midlands Police and Crime Panel

Sexual Assault Referral Centres

10th March 2014, 2pm, Birmingham Council House

Introduction

- A.1 The aim of the agenda item is to consider the services provided by the Sexual Assault Referral Centres (SARCs) in the West Midlands. There are two centres run by Horizon; in Walsall and Birmingham. In addition victims in Coventry have access to the Warwickshire Blue Sky SARC.
- A.2 Key lines of enquiry are to understand:
- The Police and Crime Commissioner's (PCC's) role in the Sexual Assault and Referral Centres;
 - Regional working of the PCCs regarding this service;
 - How performance is being measured and who manages it;
 - How the PCC works with key stakeholders; and
 - How the PCC holds West Midlands Police to account for their work alongside the SARC – and progressing victims cases.

B Background

- B.1 In January 2013 Lisa Thompson, Chief Executive Officer, Rape and Violence Project asked a public question of the Panel:

“The current West Midlands Sexual Assault Referral Centre (SARC) (where people affected by sexual violence can report and receive support) has not met Government minimum service standards since at least 2009. How will the Police and Crime Commissioner and the Police and Crime Panel ensure that the new SARC provider, G4S, brings the SARC up to minimum standards and beyond when they take over the running of the SARCs this month?”

- B.2 The minutes of that meeting record that in reply, Councillor Jess Phillips explained that the SARC contract with G4S had been commissioned through the Birmingham and Solihull NHS cluster and therefore the Joint Commissioning Board was responsible for monitoring the contract. However, there was an operational and strategic element to the police role in the SARC, and therefore in the future, if responsibility for the contract transferred to the Police and Crime Commissioner (PCC), it would be within the Panel's remit to scrutinize it.
- B.3 Bob Jones, Police and Crime Commissioner, confirmed that he had initiated discussions with 3 neighbouring Police and Crime Commissioners to facilitate a coordinated approach to SARCs across

the region. He aimed to ensure that the service met the needs of victims, not the convenience of police boundaries.

- B.4 Lisa Thompson commented that there were 2 issues - whether the SARC met the minimum standards of the contract, or the minimum standards set by government. In her view, the SARC should meet minimum standards for victims.
- B.5 It was resolved that a report on the performance of the West Midlands Sexual Assault Referral Centre be presented to a future Panel meeting.

C Attendance

C.1 The following people have been invited:

- **Bob Jones, PCC**
 - **John Grayland, Public Health Commissioning Manager, NHS England**
 - **Joanna Hollinghurst – Centre Manager, Horizon SARC**

D Suggested Format

D.1 The following format is suggested for the debate – 30 minutes has been allocated:

1. **Introductions:** Each participant asked to introduce themselves and then each to make a short presentation about the lines of enquiry that relate to them.
2. **Questions:** To follow the lines of enquiry in section B, and other key issues for Panel Members.
3. **Conclusions:** Panel Chair and Members to sum up and, if required, make recommendations to the PCC.

E Appendices

Report from West Midlands PCC

Report from NHS England

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west midlands
police and crime
commissioner

**Police and Crime Panel
10 March 2014**

Sexual Assault Referral Centres Report to the West Midlands Police and Crime Panel

Report of West Midlands Police and Crime Commissioner

Purpose

1. At its meeting in January 2013, the Police and Crime Panel resolved that a report on the operation of Sexual Assault Referral Centres (SARCs) in the West Midlands would be presented to a future meeting. This report provides an update on how these services are provided and how performance is monitored.

Background

2. SARCs are specialist medical and forensic services for anyone who has been raped or sexually assaulted. They provide a one-stop service for medical care and forensic examination following assault/rape. Prior to April 2013 SARC provision including commissioning and procurement was funded through local partnerships which include representation from Health, Police and Local Authorities. From April 2013 NHS England took over commissioning with services transferring from previous SARC partnerships.

SARC services in the West Midlands

3. Since April 2013 SARC services within the West Midlands police area are delivered through Horizon SARC (G4S) which was commissioned by West Midlands Strategic SARC Board. SARC sites at Castle Vale and Walsall provide comprehensive services including forensic, health and crisis worker support services to victims. Performance is monitored and reviewed through national agreed monthly activity plans. This evaluation enables the development of a best practice model and timeline for forensic examinations which, in turn, all enhance productivity. Since April 2013, 310 victims (257adult/53 under 18yrs) have accessed Horizon with 74% police referred and the remainder self referred.

4. Adult and child victims of rape and sexual assault residing in Coventry can in addition to Horizon SARC access Blue Sky SARC in Nuneaton, which is funded by a partnership (WMP not included) including Coventry City Council. These partnership responsibilities are currently transferring to NHS England through novation. The SARC provides full adult and paediatric SARC services.
5. Whilst the West Midlands police area enjoys full adult SARC provision, there is currently no structured paediatric SARC provision. However, NHS England aim to have a regional paediatric SARC service commissioned and in place by the 1st April 2015. NHS England supported by West Midlands Police are working to have an interim paediatric SARC service implemented across the West Midlands police area to commence from April 2014.
6. Forensic medical examination (FME) provision for serious sexual offences was commissioned and is funded through the West Midlands Police and Staffordshire police joint health care contract which concludes in December 2015 (but which may be extended to 2017). Future commissioning will be managed by NHS England. The performance of the service providers Primecare is jointly managed and reviewed against an agreed performance framework by Staffordshire police and West Midlands police with support from NHS England.
7. Whilst NHS England takes responsibility for commissioning of SARC provision, there will be a close alignment needed between NHS England and the police to deliver services, which address both the victim's health and wellbeing needs and forensic opportunities to support criminal investigations. As key strategic partners for commissioning victims services, PCC's are important stakeholders in SARC and other sexual assault services where they can influence the health and criminal justice service needs in commissioning Sexual Assault services.
8. Monitoring of the SARC performance is currently undertaken by NHS England. The Commissioner is meeting with Sarah Forrest of NHS England on 31 March to discuss commissioning and this meeting will also provide an opportunity to discuss performance management and to explore where the boundaries of responsibility lie for commissioning of sexual assault referral services and the follow up services provided for victims. In addition to this, the Commissioner will attend a national event hosted by NHS England on 25 March which aims to discuss the new commissioning landscape for sexual assault referral services. Following on from these meetings and events, a further update could be provided to the Panel if required.

Report to: The West Midlands Police and Crime Panel
Report of: John Grayland, Public Health Commissioning Manager,
NHS England
Date: 10th March 2014

NHS and Sexual Assault Referral Centres

1. Introduction

This report provides a brief background of the Sexual Assault Referral Centres in the West Midlands covering the local authority areas of Birmingham, Solihull, Sandwell, Walsall, Dudley and Wolverhampton.

2. Performance of the SARCS.

NHS England collects a standard data set for the West Midlands SARC which is line with other data sets that have evolved across the 4 Police forces in our region. The data set covers a variety of activity measures including number of referrals and referral source, waiting times to be seen, preventative healthcare activities (such as PEPSE and Hepatitis B vaccination) ongoing referral to GUM and counselling services, patient demographical information. NHS England is a single organisation and is it anticipated that a national SARC data set will be developed – once this has been agreed (there is no confirmed timetable as yet) then all local SARC services will move to adopt this new model.

The lead contract manager for NHS England has confirmed that current performance is in line with expected standards although there remain ongoing challenges with the Forensic Medical Examiner (FME) rota and access times which form part of ongoing discussions with the Police (the commissioner). NHS England continues to work closely with the Police to support the Police custody healthcare contract.

Currently NHS England does not make the SARC performance data public however it is available to the Police through the following forums:

- a) Birmingham Strategic SARC Partnership Board – the PCCS office has recently been invited to attend this group.
- b) The Regional Strategic Board (which include the Police, NHS England and Public Health England representatives) which has oversight of all 4 SARCS

3 The role of West Midlands Police / the PCC in the SARCS

The Police/PCC have 3 key roles within SARC:

- a) The Police are the commissioners of the FME service which includes services into the SARCS.
- b) As a key partner in the commissioning of the SARC itself. The Police chair the local Birmingham Strategic SARC Partnership Board and are member of the newly established NHS England Regional SARC Board which oversees services in all 4 SARCS across the 4 Police force areas. In relation to the PCC a nominee from the PCCs office has agreed to become a representative of the local Birmingham Strategic SARC Partnership Board. (The Birmingham Strategic SARC Partnership Board meets quarterly, is chaired by the ACC and receives monitoring reports from the joint contract group (JCG) that meets monthly.)
- c) Going forward the PCC will have responsibility for locally commissioning most of the emotional and practical support services for victims of crime that are provided by the voluntary, community and social enterprise sector.

Sexual Assault Referral Centres

Report to the

West Midlands Police and Crime Panel

Additional Information to accompany report

The following additional information is provided to the Police and Crime Panel as a result of further information made available to the Police and Crime Commissioner over recent days. This information supplements the report already circulated to the Panel.

1. Custody Healthcare

The current strand of national work to improve custody healthcare started with the report from Lord Bradley in 2009, which recommended that the commissioning of healthcare in custody should transfer from police to NHS. West Midlands Police was one of the ten early adopters who ran a pilot of these new arrangements.

2. A new contract has just been commissioned by the NHS with the same provider as the previous contract – Primecare. The new contract is the same price but has some improvements over the previous one, most notably a new Clinical IT system used in the Doctor's Room in each custody suite which allows information sharing.

3. Legal Transfer of Custody Healthcare Commissioning Responsibility – When will it happen?

The aim is that all Forces and PCCs should have an effective arrangement in place with the NHS in their area so that the transfer takes place seamlessly, and a transfer take place at that point. In preparation for this, all Forces and their NHS partners have been required to produce a 'Statement of Readiness', setting out their readiness for the change. The Home Office has said that the legal transfer of commissioning responsibility will take place at some time in 2015/16, but with a target date of 1 April 2015.

Issues to discuss with Sarah Forrest

4. In the West Midlands region all four Forces/PCCs are now using Primecare for provision of custody healthcare. There is a proposal that the 4 PCCs from across the region or their representatives attend the Regional Custody Forum meetings which take place quarterly in order to discuss performance against the contract.
5. The contract for custody healthcare is likely to be re-negotiated in 2/3 years time the four PCCs and Forces should work together in the period leading up to this to determine if there is scope for all four areas negotiating a similar contract.

6. There exists a Statement of Readiness, which sets out the local readiness for the statutory transfer of commissioning responsibility. NHS commissioners would like all 4 PCCs to be happy with this statement of readiness, and will provide a copy for consultation.

7. **SARCs**

The main issue is the split of commissioning responsibilities within SARCS (eg to what extent the longer term therapeutic treatment should be commissioned by the NHS, and at what point PCC/victim commissioning should take over). This issue will be discussed in detail at a national SARC event on 25 March taking place in London.

8. The NHS budget for provision of paediatric SARC provision has increased in the West Midlands region, and NHS commissioners plan to consult PCCs on how to improve the provision.
9. There is an officer group called the Regional SARC Healthcare Board. An invitation has been extended for a WMOPC officer or Board member to join this Board, thereby improving the oversight and governance of the SARC arrangements.