



# **Scrutiny Review 2023-24:**













# **Multi-agency response to complex Anti-Social Behaviour**

**REPORT OF THE  
POLICY AND PERFORMANCE SCRUTINY COMMITTEE**

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April 2024

# Policy and Performance Scrutiny Committee 2023-24 Membership

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	<b>Councillor Paul Convery (Vice-Chair)</b> Caledonian ward		<b>Councillor Jason Jackson</b> Holloway ward
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	<b>Councillor Benali Hamdache</b> Highbury Ward		<b>Councillor Angelo Weekes</b> Mildmay ward

## Acknowledgements

**The Committee would like to thank all the witnesses who gave evidence to the review:**

Local residents for their contributions to the focus group and survey

Councillor John Woolf – Executive Member for Community Safety

Besserat Atsebaha – Director of Community Safety, Security and Resilience

Daniel Lawson, Assistant director – Civil Protection

Rosalind Hick – ASB Programme Manager

Johnathon Gallagher – Head of Community Safety

Andrew Morgan – Community Safety Officer

Officers supporting the High Risk MARAC process

Ian Swift – Director of Housing Operations

Sinem Yanik, Head of Housing Partnerships, and the Housing Intensive Team

Kevin Livingston, Street Population Co-ordinator, and the Street Outreach Team

Members of the Housing Association Liaison Group

Chief. Supt. Andy Carter – Metropolitan Police

Supt. Jack May-Robinson - Metropolitan Police

Members of the Safeguarding Adults Board

Miriam Bullock – Deputy Director of Public Health

Liz McGrath – Clinical Director, Camden & Islington NHS Trust

Jane Palmer, Criminal Justice Pathways Co-ordinator, Camden & Islington NHS Trust

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## Committee Support

Jonathan Moore, Deputy Head of Democratic Services & Governance

# Contents

<b>PAGE NUMBER</b>	<b>CONTENT HEADINGS</b>
<b>5</b>	<b>Executive Summary</b>
<b>7</b>	<b>Summary of evidence &amp; main findings</b>
<b>26</b>	<b>Recommendations</b>
<b>35</b>	<b>Conclusion</b>

# Executive Summary

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## Multi-agency response to complex Anti-Social Behaviour 2023-24 Scrutiny Review

The Policy and Performance Scrutiny Committee reviews one main topic each year, considering the performance of local services and making recommendations to the Executive on opportunities for improvement. For the 2023-24 municipal year, the topic was 'multi-agency response to complex anti-social behaviour'. The review commenced in July 2023 and concluded in March 2024.

The aim of the review was to review the local arrangements for managing anti-social behaviour, particularly in relation to complex cases that involve joint-working between council services, Police, housing providers, social care, mental health services, and other agencies. While the Committee appreciates the impact that low-level ASB, such as graffiti and occasional noise nuisance, can have on communities; the focus of the review was on complex instances of anti-social behaviour where issues may be entrenched and perpetrators and victims may have multiple complex needs. These cases may involve joint working between the Community Safety team, the Police and others in the criminal justice system, the council's Housing services and Housing Associations, social care, mental health and addiction services, and other local services.

The following objectives were agreed for the review:

- To evaluate the current framework for joint working between agencies on complex cases of anti-social behaviour, to assess the strengths of our current approach, and to consider how this can be developed further.
- To understand the challenges faced in managing complex cases of anti-social behaviour, and how these can be overcome.
- To consider how the council communicates and engages with local residents on issues related to anti-social behaviour and to review how to best support local communities affected.
- To assess the council's work in tackling the root causes of anti-social behaviour, early intervention approaches, and how partner organisations, including the voluntary sector, can contribute to this.
- To consider how the local response to anti-social behaviour supports the council's objective of tackling inequality.

This review was carried out with reference to the council's mission to provide 'a safe place to call home', in particular the vision that:

*Residents feel safer in their neighbourhoods, parks and town centre and appreciate that the root causes of anti-social behaviour (ASB) in public spaces are routinely and actively tackled and managed by landlords, the council and police. They are also empowered and confident enough to contribute to resolving ASB issues.*

*(Islington Together 2030 Plan)*

The Committee considered a wide range of evidence in carrying out its review. Members held a focus group with local residents and also held a survey to understand residents' views and perspectives of anti-social behaviour. The Committee met with a wide range of council officers from the Community Safety and Housing Operations teams.

Evidence was received from key partner organisations, including the Metropolitan Police, and Camden and Islington NHS Foundation Trust, who provide mental health and drug and alcohol addiction support services in the borough. The Committee also considered evidence from Public Health on how the council could take a 'public health' approach to anti-social behaviour.

Committee Members led a discussion on anti-social behaviour at a Housing Association Liaison Group meeting, which is attended by major social landlords in the borough. Members also attended a meeting of the Safeguarding Adults Board, to hear how agencies work together to protect vulnerable people who may be both victims and perpetrators of anti-social behaviour. A visit was held with the Street Outreach Team, to see first-hand how officers engage with the street homeless population and the support that is provided to both safeguard their welfare and reduce ASB.

Several common themes emerged from the evidence. These include:

- i. Anti-social behaviour is best addressed through a holistic approach, considering the needs of both perpetrators and victims when seeking to reduce risk and harm;
- ii. The importance of early intervention in ASB issues, resolving issues before they escalate;
- iii. The impact of the housing crisis and an escalation of needs in general needs housing;
- iv. Strong and resilient communities can help to prevent anti-social behaviour, or mitigate the impacts through improved relations and understanding between residents;
- v. The need for robust partnership working on a local level to facilitate an integrated response to anti-social behaviour;
- vi. How improved IT systems can support more efficient and effective ways of working, and contribute to better outcomes through the use of robust data;
- vii. That further developing communication with residents could lead to better reporting, build confidence and manage expectations in terms of the response and expected timelines.

In considering all of the above, the Committee concluded that Islington Council should aspire to take a "public health" approach to anti-social behaviour, focused on early intervention, robust use of data and reducing risk and harm. The Committee has made several recommendations which seek to develop this approach.

The evidence received by the committee highlighted several areas of good practice in the council's work to respond to complex anti-social behaviour, in particular the strength in partnership working arrangements, and the commitment and focus of staff in achieving the best results for residents. The committee's recommendations are intended to help further develop this work.

The Committee would like to place on record its thanks to all of those who contributed to the review, and recognise the contribution of staff working in challenging and complex circumstances to respond to instances of anti-social behaviour, which can have a significant impact on the quality of life of local people.

# Summary of evidence

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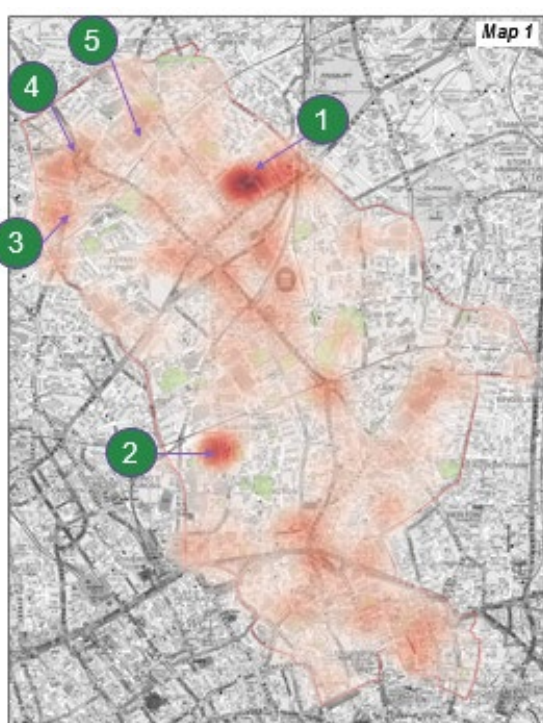
## 1. Evidence: Introductory Presentation Committee Meeting, 21 September 2023

- 1.1. Councillor John Woolf, Executive Member for Community Safety, Besserat Atsebaha, Director of Community Safety, Security and Resilience, Daniel Lawson, Assistant Director – Civil Protection, and Rosalind Hick, ASB Programme Manager, presented to the Committee on the council's response to complex ASB. The presentation included a detailed introduction and overview of ASB in Islington; including hotspot data, governance, and the ASB Programme currently underway to develop the council's approach to managing ASB.
- 1.2. The Executive Member commented on the importance of getting the basics right in terms of case management and reporting mechanisms. It was important to remember that ASB was subjective and different activities may have different impacts on different residents. The council did not have the same powers to intervene as the police, but could tackle ASB effectively by having clear and consistent policies, procedures and practices. The Executive Member highlighted Islington's commitment to early intervention, the need to take a contextual approach, and commented on the need for a zero-tolerance approach to anti-social behaviour.
- 1.3. The Committee heard that anti-social behaviour had been identified as one of the highest priorities for residents as part of the Let's Talk Islington public consultation. In July 2020, an independent ASB review was commissioned with Housing Quality Network (HQN) to ensure that the council was delivering for residents. 37 recommendations were identified in this report, and subsequently a corporate restructure was carried out, creating a Community Safety, Security & Resilience (CSSR) department. The aim was to bring services together in order to provide a one-council approach to deal with the root causes of ASB, avoiding silo-working and duplication. The Council launched its ASB Programme in January 2023 to build on the recommendations of the HQN report.
- 1.4. It was explained that several council services contributed to the ASB response. This was led by Community Safety, Security and Resilience in partnership with Housing services, Children's Services, though targeted work with young people who may be perpetrating ASB, as well as the provision of diversion activities, and Adult Social Care, through supporting vulnerable people who may be both perpetrators and victims of ASB.
- 1.5. The Committee considered how the council logs and responds to reports to ASB, and how the local response is led through a multi-agency approach. The Committee noted the governance structure of local multi-agency meetings, and also noted the statutory Community Trigger process which allowed residents to call for a review of persistent ASB issues if they felt these were not being addressed sufficiently.

1.6. Officers summarised the latest ASB data. Reports of ASB increased significantly in 2020 and 2021; this increase was attributed to the Covid-19 pandemic, with the council receiving reports of breaches of lockdown restrictions, while also receiving an increase in other calls from residents who were spending more time at home than they would have previously. However, 2022 saw the lowest levels of ASB reporting in the five year period with the introduction of a weekly multi-agency meeting to address issues quickly.

1.7. The Committee considered data on ASB hotspots and the most frequent categories of ASB. A hotspot was classified as an area with six or more reports of ASB. These changed frequently, however some areas were persistently classified as hotspots, particularly town centres, transport hubs, and parks during summer. Officers presented data from January to June 2024, which highlighted that reports of noise accounted for 1,440 (23.7%) of the 6,058 reports to date, and neighbour issues accounted for (58.3%) of reports.

Public Space ASB Category	Number of Reports to Police and Islington Council ASB Team (exc. Day Time Housing Reports)				
	2018	2019	2020	2021	2022
ASB Nuisance	845	952	1,646	1,169	708
Begging / Vagrancy	753	955	828	370	390
Rowdy Or Inconsiderate Behaviour	5,100	4,186	10,370	5,827	4,721
Drugs	1,828	1,929	3,127	1,901	1,933
Fireworks	157	140	226	200	160
Prostitution Related Activity	39	21	38	25	18
Street Drinking	133	93	153	67	47
Vehicle Nuisance / Inappropriate Use	676	455	491	467	311
<b>Total</b>	<b>9,531</b>	<b>8,731</b>	<b>16,879</b>	<b>10,026</b>	<b>8,288</b>



- 2022 ASB Hotspots**
1. Andover Estate  
(274 calls and 75 actions)
  2. Bemerton Estate  
(213 calls and 44 actions)
  3. Tremlett Grove  
(196 calls and 29 actions)
  4. Archway Town Centre  
(165 calls and 29 actions)
  5. Elthorne Estate  
(139 calls and 28 actions)



- 1.8. Following a question, it was advised that there was some overlap between ASB hotspots and deprivation and social inequalities certainly impacted on prevalence of ASB. However, hotspots were also focused around transport hubs, town centres, the Emirates Stadium, and other busy areas.
- 1.9. Hotspots were identified from both reports to the ASB team and reports to the Police. The service was working to incorporate Housing data and this would further develop the hotspot data and would assist with targeting future interventions.
- 1.10. It was thought that reporting of ASB was lower than the true figure and there may be hotspots that were not known to council services. Some residents were not comfortable in reporting issues to the council or police and further work was needed to reassure residents to provide confidence in reporting. It was suggested that developing new reporting routes might lead to new hotspots being identified. It was commented that some vulnerable people did not trust authorities and would never report issues to the police or council; it was suggested that further engagement with the voluntary sector may help with the reporting of such issues. Officers advised that they were investigating the feasibility of anonymous reporting. The Committee considered the importance of working with the voluntary sector, schools, community groups and others to encourage the reporting of ASB.
- 1.11. Residents can report ASB through email, telephone, or web-form. Email was the most common method of communication, however webform reporting had increased steadily in recent years and had overtaken telephone reporting in 2022. It was reported that work was underway to improve the online reporting form to make this more accessible and improve data flows.
- 1.12. A member commented on the decrease in telephone calls reporting ASB and queried if the system had been designed to discourage people from reporting by telephone. In response, officers advised that there had been a corresponding increase in online reporting, and it was thought that residents were choosing to report ASB through their preferred contact method. The service was exploring other options for reporting ASB, including WhatsApp and the use of an app that would allow photos and videos to be uploaded. It was important to have a range of reporting methods available to residents and the telephone system had recently been upgraded to make it easier to report over the phone.
- 1.13. The majority of ASB reports were received between 10.00pm and midnight when people are trying to sleep. Instances of ASB increased from May and into the summer months each year as people spent more time outside.

- 1.14. The Committee noted a particular concern about the increase in harassment calls since 2019/20. It was thought that the inability of the council to take effective action against ASB during lockdowns, together with a breakdown in some neighbour relationships, led to an escalation in the complexity of cases that had resulted in harassment. Cases with harassment had doubled from 20% in 2019/20 to 40% in 2022/23.
- 1.15. Officers summarised the performance of the ASB service. The duration of live cases had been significantly impacted by Covid-19, with the council changing practices and unable to meet with residents to carry out some interventions, while the number of cases significantly increased during lockdown. As a result, cases of ASB took an average of 414 days to be resolved in 2020/21. After officers returned to normal ways of working in 2022/23, a number of improvements were made including improved data recording and monitoring, a refresh of staff training, and procedure changes. This had seen a significant improvement in performance, with live cases being open for 44 days, on average.
- 1.16. Officers summarised other service improvements made through the ASB programme, including simplifying reporting routes, improving information on the council's website, the establishment of a new case management team, further development in partnership working to co-design new processes, and a re-defining what the council considers to be anti-social behaviour.
- 1.17. A member commented that ASB can be subjective and it was important that ASB interventions did not effectively criminalise young people, particularly groups of young Black and Asian men, simply for congregating in public spaces. It was asked how officers review reports of ASB and if the council had data on how many reports of ASB were rejected. In response, the Executive Member commented on the importance of defining ASB and being very clear on what the council would and would not respond to. It was important to consider equalities issues in all council services, and in particular the ASB team worked closely with the Targeted Youth Support team to ensure that issues were considered from a youth perspective.

## The Council's Definition of ASB

Anti-social behaviour (ASB) covers a wide range of unacceptable activity that causes or is likely to cause harassment, alarm or distress to an individual from another household or to the community, or harm to the environment. In some instances, it can leave victims feeling helpless, desperate and with a lower quality of life.

You can report many different types of ASB, including:

- graffiti and flyposting (sticking advertising posters on walls and other public property)
- litter, including drug-related equipment
- fly-tipping (dumping rubbish on the street, pavements or green areas)
- nuisance, rowdy or inconsiderate neighbours
- persistent dog barking or uncontrolled animals.

Some anti-social behaviour should be reported to the police. This includes:

- abuse, intimidation or harassment
- drug use and drug dealing
- misuse of airguns
- inappropriate use of fireworks
- aggressive begging
- vandalism.

### What is not anti-social behaviour

The behaviours below are officially recognised as not being ASB. We would not investigate these unless there is evidence that the behaviour is deliberately intended to cause damage, intimidate or is taking place at an unreasonable hour of the night or early morning:

- children playing in the street or communal areas
- young people gathering socially
- being unable to park outside your own home
- DIY and off-road car repairs
- a clash of lifestyles including cultural differences or different working patterns
- a one-off party or event
- general living noise.

1.18. A member suggested that the design of some estates could be improved to make them feel more welcoming and this may reduce instances of ASB; it was thought that fencing and locked gates could make spaces feel hostile. In response, the Executive Member referenced the “broken window theory” that neglected spaces can attract ASB, and summarised how addressing low level issues like graffiti and littering could make communities feel safer.

1.19. The Committee asked how the council worked in partnership with housing associations to tackle ASB on their estates. In response, it was advised that the council is able to lobby and influence housing providers when ASB was having a detrimental impact on residents, however it was important to be clear that the council did not have enforcement powers on estates managed by housing associations. Officers explained how they were working to develop strong positive working relationships with colleagues in local housing associations to enable a more joined up and consistent local response.

- 1.20. A member noted longstanding ASB issues in their ward and queried if the council had sufficient resources to resolve ASB issues effectively. In response, the Executive Member commented on the investment made in the ASB Programme to transform the way the council manages ASB, however also noted the difficulties of resolving complex cases of ASB, particularly when the perpetrator had mental health issues or other vulnerabilities. It could also take time to resolve issues when a court order was required, due to the backlog in the justice system. In such cases it was important to continue to report issues, and report to the police when appropriate if ASB issues continued to escalate.
- 1.21. Overall the Committee noted that the service appeared to be making a number of improvements to the way in which the council responds to ASB, and that the service appeared to be very proactive in engaging with statutory services, including the Police and Adults and Children's Social Care.

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## **2. Evidence: Housing Operations Committee Meeting, 2 November 2023**

- 2.1. Ian Swift, Director of Housing Operations, and Sinem Yanik, Interim Head of Housing Partnerships, presented to the committee on how the council's housing landlord function works to tackle ASB. The Committee noted the local housing context. There are 26,000 Islington Council tenants, 10,000 leaseholders, and 17,800 Housing Association properties in the borough. It was thought that 50% of council tenants had a specific vulnerability, however it was accepted that data on the particular needs of residents was not currently good enough.
- 2.2. Officers reported that a high proportion of ASB was perpetrated by vulnerable residents with complex needs and it was important that local agencies worked with them in a sensitive manner. It was intended to restructure the housing management function; this would increase capacity in the service and would help to ensure the service was able to better respond to residents with complex needs. Commenting on organisational culture, officers emphasised the importance of working with residents, treating them with respect and dignity.
- 2.3. Housing enforcement action had increased recently, in the past 6 months the council had taken more enforcement action than it had in the previous 6 years. A proportion of this enforcement action was related to anti-social behaviour.
- 2.4. The Committee asked for further details of the housing management restructure and why this had not yet been implemented. In response, officers advised that it was intended to restructure the service into 3 locality-based teams, North, Central and South, with each officer having a caseload of 550 households, rather than the 2,000 they do currently. Officers would be provided with new technology, such as iPads, to allow them to carry out tenancy audits remotely. It

was commented that the job evaluation process had taken longer than anticipated, and it would not be appropriate to carry out a restructure prior to the festive period. The Committee considered how the restructure would increase the availability of housing officers to residents and may have a positive impact on the reporting of anti-social behaviour, as well as helping to resolve such issues at an earlier stage before they escalate.

- 2.5. The Committee noted reports in the national media that some housing providers did not take ASB issues seriously and noted that this could have serious detrimental impacts on residents. Officers commented on the importance of culture change in the organisation; it was essential that staff understood the impact that ongoing ASB could have on residents. Staff needed to understand the impact of trauma, take a risk-based approach, and not be judgemental.
- 2.6. Officers explained how they had worked to develop a partnership working approach with local housing associations. An Islington Housing Providers' Partnership Agreement had recently been agreed which committed all signatories to '*contribute positively to community safety and anti-social behaviour work*'. Senior officers were meeting with counterparts in housing associations to discuss how to increase performance across the sector. The Committee welcomed this work, commenting that it was a good start, and that they would encourage the further development of this partnership approach.
- 2.7. A discussion was had on if it was possible to share some details with neighbouring residents when the council was engaging with a vulnerable person who was a perpetrator of ASB. Although the council must be mindful of data protection and the right to privacy, it was thought that some acknowledgement from the council that they were aware of local ASB issues and explaining that appropriate action was being taken would help to reassure residents.
- 2.8. The Committee welcomed the evidence received and in particular reflected on the evidence around the culture change ongoing in the department. The emphasis on understanding the vulnerabilities of residents, and being mindful of the trauma they may have experienced, was essential. The Committee welcomed proposals to reduce the housing officer caseload, however noted that the impact of this must be kept under review to ensure that the proposed restructure delivers the improvements it intends. The Committee suggested that reporting on resident satisfaction on ASB cases should be considered as a measure of performance.
- 2.9. The Committee noted that various improvement work was underway both in the Community Safety and Housing Operations teams that was intended to improve ASB performance, including officer restructures, improved reporting mechanisms, and increased partnership working. However, members emphasised the importance of clear timelines and performance measures for this work.
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### **3. Evidence: Workshop with Residents 20 November 2023, Islington Town Hall.**

- 3.1. A workshop with residents was held to understand their experiences and perceptions of anti-social behaviour. This was attended by seven residents from across the borough who were on the 'tenant engagement register', a list of residents who had indicated to the council's Housing Services that they would like to take part in focus groups and other activities to improve council services.
- 3.2. Residents had varying perceptions and definitions of ASB. The residents were not aware of how Islington Council defined ASB and did not have a clear understanding of which issues required a police or local authority response. An example was given of ASB perpetrated by those with mental health issues, some attendees were aware from reporting in the press that the Police would no longer respond to these issues, but they did not know who to call in these instances or how these issues would be dealt with.
- 3.3. Some residents had reported instances of noise nuisance, and had reports against themselves, for what was discovered to be everyday household noise. These complaints were associated with children playing, or using a washing machine overnight. It was thought that better soundproofing between properties could resolve these sorts of issues.
- 3.4. Those present agreed that a very clear policy document detailing what is and what is not ASB, with relevant thresholds, and details of who and how to report, and what to expect in response, would be very helpful. It was suggested that this should be set out in a clear table and should be issued to all tenants. The document should also include information on what was and was not acceptable at different times of day, and detail how the council would respond in different ways if, for example, mental health was a factor in the ASB.
- 3.5. It was suggested that training should be offered to TRA members to better understand ASB definitions and reporting mechanisms; this would help to set expectations and information could be cascaded on estates.
- 3.6. Attendees were sympathetic and tolerant to residents experiencing mental health issues and appreciated that a supportive approach was needed to any ASB enforcement, however examples were also given of residents that appeared to have significant needs and were not coping with independent living. Residents thought that more specialist support should be available to help people in these circumstances.
- 3.7. Some residents had negative experiences of reporting ASB. Examples were given of the council not answering telephone calls and being difficult to contact in general. The residents highlighted that persistent ASB issues could have a significant impact on tenant wellbeing and there was a perception that the council did not take this issue seriously enough. This feeling of not being listened to made issues worse.

- 3.8. One attendee commented on the need to compile huge amounts of evidence before the council took action on ASB issues. This was considered very onerous.
- 3.9. There were mixed views on reporting through online forms; some thought this was more convenient, others did not trust online reporting and would rather speak to someone over the telephone or in person about the impact of the ASB to be reassured that their concerns were properly understood. One resident saw little point in reporting low-level ASB issues; they did not believe that the council could or would take meaningful action against persistent low-level issues, such as repeatedly leaving items in communal areas. Even for more serious crimes, such as mobile phone snatching, one attendee saw little point in reporting as they did not believe the Police could respond in a meaningful way.
- 3.10. Some attendees had witnessed ASB and criminal behaviour but were reluctant to report to either the council or the police. Some attendees were mindful of institutional racism in the Police service, and others would not want to be labelled as a “grass” as this could compromise their safety or lead to other issues.
- 3.11. Attendees discussed the importance of communication and community reassurance. If the council did not communicate their response to ASB, then this absence of information could contribute to a lack of trust and faith in the council.
- 3.12. Those present agreed that greater communication around persistent issues would go a long way to building trust with the community. Without regular communication, there was a perception that the council was ignoring longstanding ASB issues, which made issues much worse. If residents knew that action was being taken, and if this was communicated in a sensitive way that respected privacy, then this would reassure those living with ongoing ASB issues. Residents would feel safer if their received regular calls to check-in following the reporting of ASB issues. It would make them feel that their concerns were being listened to.
- 3.13. It was suggested that holding roving housing surgeries on estates could help with community reassurance and reporting; if housing officers were visibly available on estates in the evenings, on a regular basis, then this would help to build relationships with tenants and facilitate better reporting of ASB and discussion of related issues.
- 3.14. Residents agreed that early intervention and prevention was the best approach to resolving ASB issues before they escalate. Some had been offered mediation to resolve ongoing issues, but only when the issue had escalated to a significant extent.
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## **4. Evidence: Housing Association Liaison Meeting, 4 December 2023, virtual session**

- 4.1. Members of the Policy and Performance Scrutiny Committee attended a meeting of the Islington Housing Group, a forum of local housing providers, to discuss the role of social landlords in responding to complex anti-social behaviour. This was attended by representatives of ISHA, Guinness Partnership, Shian, Peabody, Newlon, and Southern Housing.
- 4.2. The new Islington Housing Partnership Agreement had recently been launched. This set out standards and commitments for how all housing providers would work collaboratively to deliver great services for Islington residents. Providers spoke of positive working relationships with the Council and the Police. Some providers had current cases that involved engagement with NHS mental health services.
- 4.3. Housing providers commented on their reporting mechanisms, including online reporting, webchat, and reporting through contact centres and housing officers. However, it was thought that ASB issues were under-reported. Some providers were aware of instances where neighbours were afraid to make formal reports of ASB issues. It was thought that ASB issues were under-reported.
- 4.4. On communications around ASB issues, housing providers commented that they were as open with their tenants as they possibly could be while maintaining confidentiality. There were instances of resident groups getting involved in particular cases and requesting regular updates. Housing providers spoke about the importance of publicising positive outcomes, and where ASB had been resolved, would promote this through newsletters. Newsletters were also regularly used to provide reminders on good behaviour.
- 4.5. There was a view that mediation between residents could be effective at an early stage, but tended not to be effective once issues were entrenched or where the issue was related to ongoing noise nuisance.
- 4.6. The group felt that severely limited housing supply was a contributing factor in the prevalence of ASB issues. Those present had seen increasing complexity of needs and vulnerabilities in those being nominated for social housing, and there was a view that increasing numbers of tenants needed intensive support to maintain their tenancies. There was a particular concern about the challenges faced by those experiencing mental health and substance abuse/addiction issues. While housing associations sought to support their residents, they are general needs landlords and are not designed to provide specialist support to those with complex needs. There was a view that some tenants would have previously been housed in specialist / supported accommodation in the past, but the supply



of this accommodation was now much more limited.

- 4.7. Some providers commented that the quality of information from the council on resident needs could be improved; housing associations wanted to work with tenants to maintain their tenancies, but there were instances where housing associations felt they had not been provided with sufficient information to provide effective support. Examples were given of new tenancies where housing associations did not have information on the complexity of need, and instances where the council had taken enforcement action for noise complaints but had not informed the housing association as the landlord. It was thought that better information sharing would allow for better support.

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## **5. Evidence: Metropolitan Police Committee Meeting, 11 December 2023**

- 5.1. Chief Superintendent Andy Carter, Borough Commander, and Superintendent Jack May-Carter, presented to the Committee. The evidence focused on the local ASB governance process and the way in which the Metropolitan Police works in partnership with Islington Council to tackle ASB. A workshop had recently been held between the Police and the Local Authority to agree joint priorities in relation to ASB. It was also noted that the Police was restructuring at a local level, with increased resources in Islington's priority wards, and police boundaries realigned to local authority ward boundaries. The Committee also received evidence on the various levels of police intervention on ASB issues, from informal warnings, escalating to formal enforcement action being taken.
- 5.2. The Committee noted several positive examples of partnership working between the council and the police; a weekly hotspot meeting was held to map hotspots using both Police and Council data. There were also joint patrols held between the Police, Parkguard, Targeted Young Support and Community Safety officers. Other joint work included the Early Intervention Scheme to consider the specific areas and addresses that had ongoing ASB issues; Operation Panera, a multi-agency meeting to discuss cases of cuckooing; the monthly Repeat Callers meeting to review cases where ASB issues were being raised repeatedly; and MARAC (multi-agency risk assessment conference) meetings to consider complex casus that needed a multi-agency response.
- 5.3. The Committee asked about responsibility for responding to ASB, and the threshold at which an instance of ASB became a police matter. In response, it was advised that there ASB could be classified as a crime or abuse, then it would be a matter for the Police to respond to. However, through strong partnership work with the local authority, instances were reviewed collectively to ensure that the correct agency responded to local ASB issues.
- 5.4. A member noted cases of ASB that were linked to mental health issues and substance abuse, and it was noted that the Police, working with the Council and health partners, had a focus on drug treatment and diversion. On mental health "Right Care Right Person" had

been rolled out in November 2023 and the Police no longer responded to mental health related callouts where a crime was not being committed or a person was not at risk of harm. This reduction in demand had saved 34,000 police officer hours which allowed resources to be used elsewhere.

- 5.5. The Committee noted that the local policing unit had responsibility for both Camden and Islington and a member asked about the differences between the boroughs; why did ASB appear to be lower in Islington compared to Camden, if there was an operational difference between the approaches of both boroughs, and if Islington could learn anything from Camden colleagues. In response, it was advised that Islington Council made use of an ASB “early warning system” and, although this would not explain all differences between the boroughs, this appeared to be having a positive result. It was known that Tower Hamlets had a similar system and this had a similar effect. It was commented that Islington and Camden had broadly similar approaches to working with social landlords and case management systems, and there were several similarities between the boroughs. Islington had recently undertaken a major review of its ASB work, and the Police welcomed that Islington was receptive and open to feedback during this review.
- 5.6. A member asked, if the Police could change one thing to improve ASB in Islington, what would it be. In response, it was advised that greater performance management data that made use of both qualitative and quantitative data would allow issues to be resolved in a more effective and timely way. It was also suggested that having greater public awareness over which authority was best placed to respond to particular issues, and clear expectations around outcomes, would help to reassure the community.

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## **6. Evidence: Safeguarding Adults Board meeting 31 January 2024, virtual session**

- 6.1. The Chair attended the Safeguarding Adults Board to discuss the review with members of the partnership. This highlighted the multi-agency approach and complexity of cases that involve ASB, with the council needing to take a trauma-informed approach.
- 6.2. The Board discussed the importance of taking a multi-agency partnership approach on complex cases, including MARAC, the Cuckooing Panel, and the Complex Solutions Panel.

## **7. Evidence: Morning patrol with the Street Outreach Team 16 February 2024**

- 7.1. An early morning visit was held with the Street Outreach Team. This highlighted the way that the team engages with those roughsleeping, the compassionate and solutions-focused approach they take, and members observed positive examples of working with neighbouring boroughs and the voluntary sector. The visit also highlighted the complexity of needs among the cohort.
- 7.2. The Street Outreach team are provided with a list of locations where roughsleepers have been seen. This included referrals from the public, estate staff, voluntary sector partners, and others. Officers visit those roughsleeping, check on their welfare, provide advice on homelessness services, and coordinate with other agencies.
- 7.3. The team engaged with a man sleeping rough on a park bench. He had been feeling unwell recently, and officers arranged for him to attend a GP outreach surgery for roughsleepers. The team visited different housing estates where roughsleepers had been reported in communal areas. Following a thorough search, nobody was found.
- 7.4. The team checked on the welfare of two men sleeping in a doorway. One of those had been allocated temporary accommodation but was choosing to sleep outside. The other man was not known to the team; he was given a mobile phone, and was told that an officer would call later that day to carry out a homelessness assessment. The team was stopped by a member of the public, who said that he used to be homeless himself, and thanked officers for the compassionate way that they were engaging with the men.
- 7.5. As part of this visit, the team visited London Youth Hub, a project specifically for homeless young people aged 18-24. The centre manager discussed the impact of the housing crisis, and how the young people often had complex family dynamics and a lack of a support network.
- 7.6. The team carried out a joint visit with officers from LB Haringey to visit people sleeping rough under Stroud Green Road bridge, on the borough boundary. Staff from a local homeless charity were also in attendance in the area. A discussion was had on taking a joined up approach and it was thought this demonstrated strong cross-borough collaboration.

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## **8. Evidence: Discussion with Officers from the Housing Intensive Team, 20 February 2024, 222 Upper Street**

- 8.1. Councillors met with officers in the Intensive Tenancy Team, working closely with residents perpetrating ASB to maintain their tenancy. Officers highlighted the impact of the housing crisis on ASB, the relationship between mental health and addiction issues, the importance of agencies working together, and the council's limited resources to address the scale of the challenge.

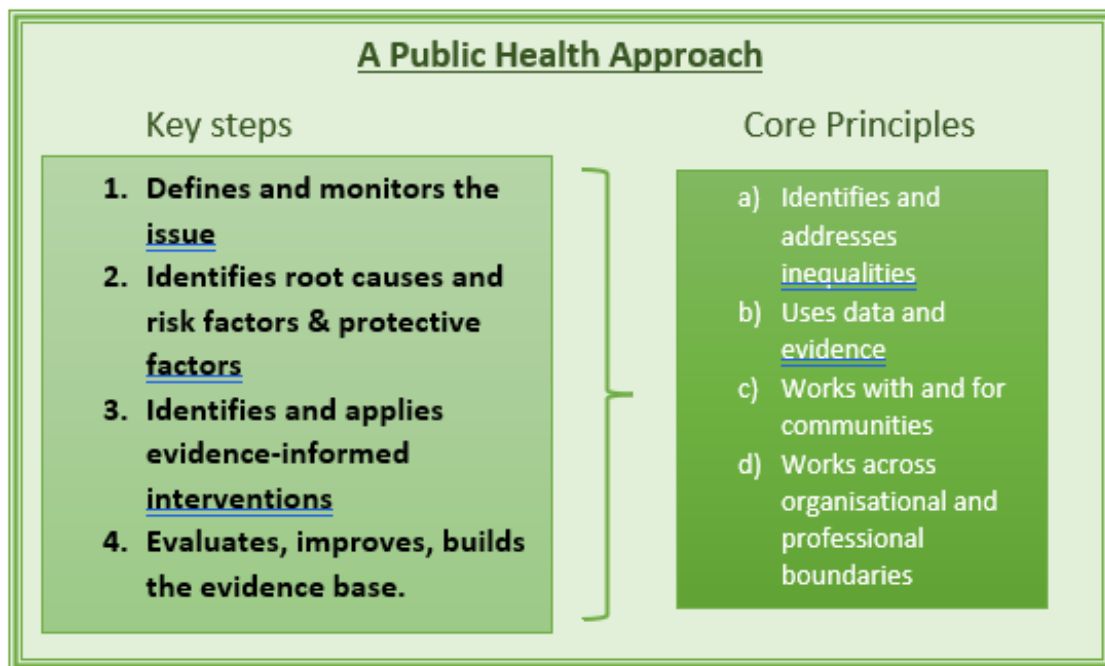
- 8.2. Each officer had around 25-30 live cases; the aim was to close cases within 3-4 months, although it was acknowledged this was not always possible in complex cases. The team worked with those with highest needs, often following a referral from the Targeted Team, which was for those with more “medium” level needs. It was intended to restructure the teams on a locality basis, so officers had a mix of high-needs and lower-needs cases.
  - 8.3. There was a detailed discussion on the team’s approach to engagement, support, and enforcement, and the need to get the right balance. The team commented that a comprehensive response would have element of all three. The team spoke about the importance of swift and robust decision-making, as this was the fairest outcome for all involved.
  - 8.4. Officers commented on the increasing complexity of need they see in their cases, particularly around mental health and addiction issues. It was suggested that, in the past, there had been examples of agencies not working together effectively, but this had improved over time.
  - 8.5. There was a sense that Islington could offer more support to those who struggled to live independently. The team tended to work with people who did not meet thresholds for intervention from statutory services, but officers commented that there were individuals with support needs who would benefit from additional help.
  - 8.6. Although persistent ASB could lead to the loss of tenancy, the council had a duty to rehouse those people, and there was a sense that this simply moved problems elsewhere without addressing the root causes of the behaviour. This could sometimes lead to the same issues reoccurring in a different address.
  - 8.7. A discussion was had on the team’s approach to cuckooing. There was a perception that this was becoming increasingly common, with some vulnerable people cuckooed multiple times, even after moving address. Those who had experienced cuckooing often needed additional support, and perpetrators were exploiting their vulnerability.
  - 8.8. If a neighbour had experienced significant ongoing ASB, once the tenant was moved, then sometimes housing services could request that the property was let to a new tenant without the same levels of complexity, to provide some respite.
  - 8.9. There was a discussion on how housing services could be more proactive in supporting tenants at an earlier stage and what tools were needed to do this. It was suggested that additional resources to provide joined-up support, particularly in the early stages tenancy, would be helpful.
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## 9. Evidence: Public Health, Mental Health and Addiction Services, Committee Meeting – 22 February 2024

9.1. Public Health and representatives of Camden and Islington NHS Foundation Trust attended the February Committee meeting to discuss taking a “Public Health approach” to tackling ASB. The evidence emphasised the importance of data, tackling root causes of ASB issues, and taking a harm-reduction approach. In an ASB context, this would involve addressing drug and alcohol misuse, mental health issues, and the housing crisis.

### Taking a public health approach to ASB

9.2. Considering antisocial behaviour as a Public Health issue may hold parallels with the now well-established approach of approaching violence as a public health issue. This does not deny a role for criminal justice and enforcement, but that the issue requires additional consideration and a broader system-wide response.



9.3. The Committee considered the key steps to taking a public health approach, as outlined above. The following steps are a summary of a [comprehensive report](#) submitted to the Committee from the Public Health department.

#### 9.4. Defining and monitoring the issue:

Definition and monitoring should be considered together. This requires an analysis of existing data sources – police data, community safety data, resident survey outcomes, hotspot mapping – whether there are gaps or quality concerns about the information available, and if so, what can be done to improve our knowledge. It is likely that we would wish to draw upon several data sources to ensure completeness, for example police data and resident survey data.

#### 9.5. **Identify root causes, risk factors and protective factors:**

This approach would seek to understand ASB broadly, considering what could be driving ASB locally and how it might be addressed. This could consider time, place and person.

- **Time** – when is ASB (as per our definition) taking place in the day, seasonally, and over the years, and how does this map onto potential contextual factors.
- **Place** – where are instances taking place, both geographically – which we currently understand through hotspot mapping – and on a smaller scale, for example on streets with certain design features or in places close to or far from certain amenities.
- **Person** – who is affected. Is there evidence that different groups of people are more likely to report, perpetrate or be otherwise affected by ASB.

#### 9.6. **Identify and apply evidence informed interventions**

Investigations into root causes, risk and protective factors, and the people and places affected, will help identify the outcomes we want to achieve and the interventions we may therefore apply. Understanding what has or hasn't been effective in the past, or in other areas, may provide an evidence base from which to take steps in Islington. As well as applying interventions for which there is evidence of effectiveness, we may also choose to pilot innovative approaches we believe have potential to deliver improvements for Islington.

#### 9.7. **Evaluate, improve and build the evidence base**

When implementing new interventions or ways of working, a public health approach will build monitoring and evaluation into the process. This will mean establishing how the impact can be monitored – whether through routine or bespoke data collection – and evaluated after an appropriate period of time. This will inform decisions to continue, adjust or stop the intervention.

9.8. The core principles of a public health approach would be applied throughout each step of the process:

- **Identifying and addressing inequalities** – consider whether risks and outcomes are experienced differently by different population groups, and how interventions can best address these inequalities to promote equity and fairness for all in Islington.
- **Using data and evidence** – identifying and making best use of robust sources of information, including data about our population, the issue or problem we are examining, current services, and taking a structured approach to gathering insights from residents and other stakeholders.
- **Working with and for communities** – understanding how an issue is affecting communities in the borough, and involving residents in the way we design, deliver and understand the impact of solutions.
- **Working across organisational and professional boundaries** – complex problems often require system-level, or at least multi-agency, responses. The input and expertise of people across the range of organisations, services and professions that work with residents are essential to understanding issues and developing effective solutions.

## **Drug and alcohol use as a factor in ASB**

- 9.9. The evidence highlighted how alcohol and drug use is a contributing factor in many ASB cases. As well as health and wellbeing, drug and alcohol use has social, housing, economic, crime and community safety impacts affecting individuals, families and communities. Risk factors for drug and alcohol use can include social, environmental and behavioural elements. There is a strong correlation between addiction and trauma, and people with drug and alcohol needs are more likely to have experienced adversity in childhood or adolescence than those who do not use drugs or alcohol.
- 9.10. In 2022, the Community Safety team undertook a whole borough consultation named Safe Spaces, in which a range of localities in the borough were identified as locations where residents do not feel safe. Amongst the responses, there was a clear theme that the open dealing and usage of Class A drugs in particular, had a disproportionate effect on how unsafe residents feel in the borough.
- 9.11. In 2022, 250 Antisocial Behaviour Warnings were issued by police and Islington Parkguard in relation to drug related antisocial behaviour. ASB warnings are in the pre-criminal space and trigger support through referrals to young people and adults drug and alcohol services as well as through support from other specialist Outreach services.
- 9.12. The Committee considered the 'Better Lives' drug and alcohol services provided by the NHS in the borough. The service worked closely with council services, including the Street Population team, the Cuckooing Team and Housing Officers. The service offered outreach work that sought to engage people in treatment and offered rapid prescription of opiate replacements. C&I also worked closely with council officers through the MARAC process, as well as with GP surgeries, voluntary sector partners and others.
- 9.13. Following a question on the impact of austerity on drug and alcohol services, it was advised that additional investment had been made into the service in recent years, including extra investment to develop new pathways into treatment for those in the criminal justice system. Outreach services had continued to be funded despite the financial challenges facing public services. The most significant challenge was getting people to engage in treatment and stay in treatment. There were no waiting lists in drug and alcohol services.
- 9.14. Following a question on barriers to accessing drug and alcohol services, it was commented that women tended to have increased complexity of need and face stigma in accessing services. Addiction services were now linking with other women's services to make them easier to access.
- 9.15. The Committee noted Islington's diversity and the need for services to be culturally competent to best meet the needs of the borough's communities. It was advised that there was a specific drug treatment pathway for men from a Black African background, and both mental health and addiction services employed key workers from a range of different backgrounds. It was intended for drug and alcohol support services to be culturally aware. The services also engaged with community leaders, community centres, and had provided training to community groups with relatively lower levels of engagement to encourage take-up. There were also two workers who specialised in working with the LGBT+

community.

- 9.16. Islington has a high prevalence of drug and alcohol misuse in comparison to other London Boroughs. The Committee suggested that take-up of drug and alcohol support services should be monitored to ensure that work underway to broaden and encourage access is effective.

### **Mental health as a factor in ASB**

- 9.17. The Committee considered the impact that mental health can have on behaviours, and how untreated mental health issues can result in complex anti-social behaviour. There was a need to address the drivers of these issues, including the housing crisis, housing density, cultural issues around alcohol misuse, and other factors. Islington had one of the highest rates of mental health prevalence in London. An early intervention approach would focus on determinants of poor mental health before needs escalate.
- 9.18. There can be stigma associated with accessing mental health services, and the Committee noted work to broaden access to services. The committee also commented on the need to consider the mental health of those experiencing ASB, as well as that perpetrators of ASB may have mental health issues.
- 9.19. The Committee considered the difficulty of getting those with complex needs to engage with drug, alcohol and mental health support services. Unless someone was exhibiting behaviours significant enough to require them to be sectioned under the Mental Health Act, then there was no power to compel people to engage in treatment and support.
- 9.20. Recently there had been increased investment in mental health services for less severe problems; it was intended to offer more community based mental health support for those with lower needs. The service offer was still being developed, but it was intended to be easier to access.

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## **10. Evidence: Resident survey February 2024**

- 10.1. Housing Officers wrote to 250 residents on the Resident Engagement Register to ask for their views on ASB issues. 45 responses were received. The results are summarised below.
- 10.2. Around 90% of those responding to the survey said they had experienced anti-social behaviour local to their home over the past five years. Two thirds of those reported it had a major impact. The most common types of ASB reported were noise, drug use and drug dealing.
- 10.3. Comments from respondents highlighted frustration with having to make multiple reports to the council to build up a body of evidence before effective action could be taken. A recurring theme was the perception that local agencies were not taking action on ASB



issues. Concerns were expressed for residents health and safety, particularly in connection with drug use and drug dealing,

- 10.4. A comment was made from a member of a Tenant and Resident Association that enthusiasm for TRA activities was decreasing as the perception of residents was that issues they report are not being addressed. The respondent recognised that people don't see the hard work that happens behind the scenes, and suggested that this was a lack of transparency in how the council is addressing ASB issues.
- 10.5. Around one third of respondents reported that it was difficult to report ASB issues, and around a half of respondents thought the Council and Police were doing a bad job in responding to ASB.
- 10.6. The Committee considers that the council could improve its communications with residents around anti-social behaviour issues, to keep people better informed of what local agencies are doing to respond to issues, to help establish expectations for the response, and to encourage reporting of issues. All residents should have confidence that the council will take action when a report of anti-social behaviour is received.

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## **11. Evidence: Community Safety Officers and observing the MARAC, 28 February 2024, virtual session**

- 11.1. The Chair met with the Head of Community Safety and the Community Safety Officer who chairs the Cuckooing Panel to discuss their work. The Chair then observed a MARAC meeting that considered a complex case involving the Police, addiction services, cuckooing and housing issues.
- 11.2. Officers commented on the increasing caseload for high needs ASB cases; the caseload of the team had effectively doubled over the past 4 years and the council had limited resources to support this work. There was a sense that complexity of needs had increased since the pandemic.
- 11.3. Officers emphasised the positive outcomes that had been achieved through multi-agency working, and that without Islington's close collaboration with the Police, Mental Health and Addiction services, and others, then it was thought that there would be worse outcomes in ASB cases.
- 11.4. A discussion was had on IT systems and it was highlighted that these could be improved. Systems were currently reliant on manual processing; this was time-consuming and a better system would allow for more efficient work and improved collaboration with other services.
- 11.5. The MARAC demonstrated effective partnership working between a range of agencies. The meeting was solutions-focused and considered how to achieve the best outcomes to a complex case.

# Recommendations

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## **Recommendation One**

### **Theme: Housing Services (Early Intervention)**

#### **Evidence and findings:**

The Committee received evidence on the proposed restructure to housing services which will result in smaller caseloads for housing officers, allowing officers to work on a more local “patch”, and with less transfer of cases between teams. It is thought that this structure will improve relationships between residents and their housing officer, supporting the early identification and intervention in ASB issues, and provide more opportunities for issues to be dealt with before they escalate.

#### **The Committee recommends that:**

- A) Housing Operations should complete the review of the officer structure. The intended outcome being a service that promotes and facilitates early intervention in anti-social behaviour issues. Housing officers having smaller caseloads and a more localised focus will help to build trust with residents, and allowing residents direct access to their Housing Officer will help to improve outcomes and empower our residents.**
- B) All services involved in preventing and responding to ASB should review their capacity for carrying out early intervention work and consider if resources are deployed effectively to deliver this aim.**

## **Recommendation Two**

### **Theme: Housing Services (Housing Supply and Tenancy Support)**

#### **Evidence and findings:**

The Committee heard from both Council Officers and Housing Associations about the escalating level of need in general needs housing. Due to the severity of the housing crisis, an increasing number of new council and social housing tenancies were made to those with very challenging personal circumstances. Islington has a relatively high prevalence of mental health issues and drug/alcohol misuse in comparison to other London boroughs. There is limited supply of supported accommodation in the borough, and general needs housing providers have limited capacity to support to those with complex needs.

#### **The Committee recommends that:**

- A) The Council should review if Islington has the right mix and supply of supported living options in the borough. If needed, pathways and resources should be put in place to best to support those with complex needs.**
- B) The Council should consider offering enhanced wrap-around housing support to new tenants, particularly in the early months of their tenancy, and in cases where tenants are already known to other services, or where ASB has been a factor in previous tenancies. This early intervention approach should help tenants to embed into their local community, live independently, and help them navigate local services as required. This would allow any tenancy and ASB issues to be identified and addressed at an early stage.**

## **Recommendation Three**

### **Theme: Housing Services (Building Community Resilience)**

#### **Evidence and findings:**

The Committee heard evidence on the importance of strong and resilient communities. Residents reported that they often did not know their neighbours and did not always feel comfortable speaking to them about low-level ASB issues. The Council does offer mediation in neighbour disputes, but it was reported that this is most effective at an early stage, before issues escalate and become entrenched.

The Committee recognises the importance of building strong and resilient local communities as a way of preventing ASB issues, identifying issues at an early stage, and ensuing support and intervention is appropriately targeted.

#### **The Committee recommends that:**

**The Council should investigate if additional funding should be made available to estates, in the same way as the Thriving Neighbourhoods programme, to not only improve the built environment on estates, but to develop community initiatives. This may be particularly helpful in bringing communities together as part of the response to long-standing ASB issues on estates.**

## **Recommendation Four**

### **Theme: Partnership working and relations with stakeholders**

#### **Evidence and findings:**

The Committee heard evidence of how the council works with Housing Associations on ASB issues, however also heard examples of where these relationships could be developed further. For example, Housing Associations reported that information from the council on the needs and circumstances of new tenants could sometimes lack detail, and this meant that Housing Associations were not able to provide appropriate support to tenants with additional needs. Similarly, the committee heard that some housing associations would not routinely engage in the MARAC process when their tenant was perpetrating ASB.

#### **The Committee recommends that:**

**The Council should develop information sharing and partnership working agreements with housing associations around ASB issues. This will enable housing providers and other services to target additional support to tenants at an early stage, working to prevent ASB where possible, and allow for cases of ASB to be dealt with more holistically.**

## **Recommendation Five**

### **Theme: Data and Systems**

#### **Evidence and findings:**

The Committee heard evidence that the key systems used to report and manage ASB be could be improved.

The Committee heard evidence that the Community Safety Team is reliant on manual logging of cases. It is thought that improved systems that made use of data flows and linked to other council systems would enhance the work of services, increase productivity, and ultimately provide better services for residents. A new and improved online reporting tool is also being developed.

#### **The Committee recommends that:**

**The Council should invest in improving the systems used to report, manage and monitor ASB issues. This will allow officer resources to be deployed more efficiently in responding to ASB issues. The Committee would like to see a clear scope and timeline for this improvement work.**

## **Recommendation Six**

### **Theme: Communications and working with residents**

#### **Evidence and findings:**

The Committee heard from residents that people are unclear of ASB definitions, what is a Council or Police matter, which is the right agency to report to, how to report ASB, what evidence will be needed, and what to expect from the Council in response. In the evidence session with residents, council tenants asked for a clear matrix of different types of ASB, explaining how to report and setting expectations around the response.

#### **The Committee recommends that:**

**The Council should produce and distribute information to all residents with clear definitions of ASB; how to report ASB; why it is important to report ASB; which agency will respond; and to set expectations around communications and response times. This could also include advice on how to engage with neighbours, how the council supports residents with mental health and substance misuse issues, and advice on how residents experiencing ASB can access help to support their own wellbeing. This information should be available in a variety of formats and a clear communications plan should be developed, with regular ongoing communications and dedicated resources.**

## **Recommendation Seven**

### **Theme: Communications and working with residents**

#### **Evidence and findings:**

The Committee heard evidence from residents that they were unclear what would happen when they reported ASB. Some residents did not have a clear understanding of what might happen when they report ASB, what enforcement action might look like, or how long it would take.

The Committee also understands that sensitive personal data cannot be shared with neighbours.

Developing communications on ASB issues may help to build trust and confidence that action is being taken.

#### **The Committee recommends that:**

- A) When responding to ASB issues, the Council should send clear communications to residents to outline what is likely to happen in response, and explain what information can and cannot be shared. This should also explain when further reports should be made, and why it is helpful to continue to report issues.**
- B) The Council should develop training for councillors, TRAs, community groups, and other local organisations to explain definitions of ASB, reporting mechanisms, issues around information disclosure, and expected responses. This will help those in community leadership positions to signpost to relevant services.**



## **Recommendation Eight**

### **Theme: Early Intervention**

#### **Evidence and findings:**

The Committee received evidence on the MARAC process and the Chair observed a complex MARAC session. This demonstrated good practice in agencies coming together and working holistically to resolve complex ASB issues. The Committee also heard about the new model of neighbourhood policing, proposals to restructure housing services so officers have a smaller and more local caseload, and the work of the Community Safety team in monitoring local ASB issues. There may be learning from the MARAC process that could be applied at an earlier stage to intervene in local ASB issues before they escalate.

#### **The Committee recommends that:**

**The Council should develop a process of holding local ward level / early intervention multi-agency ASB boards to review and respond to ASB issues before they escalate and reach the threshold for MARAC. Taking a multi-agency approach at an earlier stage should enable a more comprehensive local response. Appropriate resources should be made available in order to deliver this recommendation.**

## **Recommendation Nine**

### **Theme: Early Intervention**

#### **Evidence and findings:**

The Committee heard about the complexity of cuckooing cases and concerns from officers that this was becoming a commonplace issue. While the committee heard how the council and police works together to address cuckooing issues, however often this is only after significant disruption to local residents.

#### **The Committee recommends that:**

**The Council should develop an early intervention pathway for cuckooing cases. This could include a dedicated support worker who can monitor cases and offer support to individuals who have previously been cuckooed. Appropriate resources should be made available in order to deliver this recommendation.**

# Conclusion

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This review focused on how the council and local agencies respond to instances of complex anti-social behaviour. In considering all of the evidence received, the Committee concluded that Islington Council should aspire to take a “public health” approach to anti-social behaviour, focused on early intervention, robust use of data and reducing risk and harm.

Several common themes emerged from the evidence. These include:

- i. Anti-social behaviour is best addressed through a holistic approach, considering the needs of both perpetrators and victims when seeking to reduce risk and harm;
- ii. The importance of early intervention in ASB issues, resolving issues before the escalate;
- iii. The impact of the housing crisis and an escalation of needs in general needs housing;
- iv. Strong and resilient communities can help to prevent anti-social behaviour, or mitigate the impacts through improved relations and understanding between residents;
- v. The need for robust partnership working on a local level to facilitate an integrated response to anti-social behaviour;
- vi. How improved IT systems can support more efficient and effective ways of working, and contribute to better outcomes through the use of robust data;
- vii. That further developing communication with residents could lead to better reporting, build confidence and manage expectations in terms of the response and expected timelines.

The evidence received by the committee highlighted several areas of good practice in the council’s work to respond to complex anti-social behaviour, in particular the strength in partnership working arrangements, and the commitment and focus of staff in achieving the best results for residents. The committee’s recommendations are intended to help further develop this work.

The Committee would like to place on record its thanks to all of those who contributed to the review and recognise the contribution of staff working in challenging and complex circumstances to respond to instances of anti-social behaviour, which can have a significant impact on the quality of life of local people.

The Committee would like to thank all the witnesses that gave evidence in relation to the review. The Executive is asked to endorse the Committee’s recommendations.