



**NOTTINGHAMSHIRE**  
**Fire & Rescue Service**  
*Creating Safer Communities*

Nottinghamshire and City of Nottingham  
Fire and Rescue Authority  
Community Safety Committee

# **NEW CROSS PROJECT**

Report of the Chief Fire Officer

**Date:** 17<sup>th</sup> June 2016

**Purpose of Report:**

To provide Members with an update on the evaluation outcomes of the New Cross Project as requested at the January 2016 Community Safety Committee Meeting.

## **CONTACT OFFICER**

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## **1. BACKGROUND**

- 1.1 The New Cross pilot area in Nottinghamshire covers a community of 1,200 homes within Sutton-in-Ashfield. The area was chosen because it is of significant interest to many local service providers: for Nottinghamshire Police, the area is a hotspot for crime and anti-social behaviour, for Ashfield District Council there are environmental concerns due to high clean-up rates in the area, whilst for local health services the area has above average levels of under 18 pregnancy, high levels of mental health problems and a significant number of call outs for Fire and Ambulance services.
- 1.2 At the heart of these multi-faceted social problems are the 'troubled families'. The area has the highest proportion of 'troubled families' in the district, with complex needs and service requirements that depend upon multi-agency intervention to tackle many of the issues outlined above.
- 1.3 Members received a report at the January 2016 Community Safety Committee meeting, detailing the purpose and progress of the New Cross project and requested a further update once the formal evaluation, carried out by Nottingham Trent University, was available.

## **2. REPORT**

- 2.1 The 18 month project has been subject to periods of review and academic evaluation by Nottingham Trent University. To date, the Risk Reduction Officer seconded to the team has been assigned as a case worker to 4 cases. The findings of one particular case involving a young female resident has been used as an example of the success of the approach and shared with partners within the county.
- 2.2 The mid-point evaluation evidenced that the formal multi-agency approach is a clear direction of travel for all preventative programmes of this nature: working to tackle multiple barriers and engaging communities to intervene early before problems become critical. By doing so, there is potential to transform communities and achieve significant savings for the public purse.
- 2.3 A key measure of the project will be its ability to create stronger, more resilient communities: ones that are better connected, have higher aspirations and are willing to do more for themselves, ultimately increasing the social value provided by the Fire and Rescue Service and wider public sector.
- 2.4 The final evaluation report has now been issued jointly by Ashfield District Council and Nottingham Trent University, executive summary attached as appendix 1. The key points from the evaluation include:
  - Evaluation methodology of team and resident interviews to consider, context, inputs delivered and outcomes achieved. Cost analysis on a case by case basis and the impact on quality of life.

- The multi-disciplinary make-up of the team was key to the approach, particularly since the inclusion of social care and Framework Housing but health were still the missing discipline.
- A locally based team with one point of contact was valued by the service users.
- Cost savings for the project across the case load translates to, for every £1 spent to support a New Cross resident £7 could be saved.
- Social value impact (in conjunction with activities of other services): Ashfield District Council service demand reduction of 7%. Anti-social behaviour reduction of 17%. Serious Acquisitive Crime reduction of 34%. Violent Crime reduction of 5%. Criminal damage reduction of 21%.
- Significant quality of life gains were reported by residents including: family, confidence, housing/accommodation, employment and finances. In context this includes six out of eleven resident interviewees stating an intention to end their lives had they not received support, two believing they were heading towards prison, three at the point of mental health breakdown and two said their homelessness would have continued.

2.5 The direct and indirect benefits from being a partner in this approach for communities are the skills and expertise in home safety, supporting independent living, working with vulnerability and non-authoritative problem solving nature of our workforce.

2.6 In addition to this, those considering ending their own lives, living chaotic lifestyles, suffering mental health breakdowns would all fall into the target profile for the NFRS community safety team and are proven to be at greater risk of injury or death from fire. Therefore this approach continues the Services commitment to early intervention in order to drive down demand, increase social value and ultimately create safer communities.

### **3. FINANCIAL IMPLICATIONS**

3.1 The cost of seconding a Risk Reduction Officer to the project team on a full time basis, for a period of 18 months, has been met from existing budgets. The total cost between 2014 and 2016 was £53k, comprising pay and travel and subsistence.

3.2 The service has agreed to commit to fund one post and second one member of staff to the project for up to three years, on an annually reviewed basis. This commitment will be met from existing posts and ear marked reserve budgets. The cost will depend upon the existing grade of the staff member who takes up this secondment but as an estimate will be in the region of £35k per annum.

#### **4. HUMAN RESOURCES AND LEARNING AND DEVELOPMENT IMPLICATIONS**

The secondment to the project team will be met by existing resources in the Community Safety Team.

#### **5. EQUALITIES IMPLICATIONS**

An equality impact assessment has not been undertaken because the information contained in this report does not relate to a change in policy or procedure.

#### **6. CRIME AND DISORDER IMPLICATIONS**

Working in partnership within the New Cross Project directly supports the Authority's statutory duties under section 17 of the Crime and Disorder Act 1998.

#### **7. LEGAL IMPLICATIONS**

- 7.1 Beyond the statutory prevention duty under the Fire and Rescue Services Act 2004 (which is aimed specifically at fire prevention) there are no legal implications arising from this report.
- 7.2 The commitment to the project satisfies the requirements of multi-agency approach and information sharing of the Care Act 2014 and the Antisocial Behaviour Crime and Policing Act 2014.
- 7.3 This approach further demonstrates the services commitment to collaboration which is a potential legal implication within the Policing and Crime Bill 2015-16.

#### **8. RISK MANAGEMENT IMPLICATIONS**

Management of community safety is a statutory duty within the Fire and Rescue Services Act 2004 and specifically the Fire and Rescue National Framework and locally the IRMP. Furthering the contribution of fire into the multiagency New Cross initiative builds on the prevention work currently undertaken and indirectly supports improved fire safety whilst collectively reducing the risk and burden to the wider public sector.

#### **9. RECOMMENDATIONS**

That Members note the content of the report.

**10. BACKGROUND PAPERS FOR INSPECTION (OTHER THAN PUBLISHED DOCUMENTS)**

None.

John Buckley  
**CHIEF FIRE OFFICER**

### EXECUTIVE SUMMARY

The evaluation of the New Cross Project combined an internal evaluation that had been ongoing since the start of the project in 2014, and was being undertaken by the New Cross Support Team, with an external evaluation commissioned from Nottingham Trent University. The external evaluation commenced in July 2015 following ethical approval from the College of Business, Law and Social Sciences Ethics Committee at the University.

The evaluation design was based upon a previously tried and tested framework (Bailey, 2002 and 2007, Bailey and Kerlin, 2015 and 2012, Ward and Bailey 2015) that combined the collection of qualitative and quantitative data to enable an in-depth understanding of:

- How the Project was situated including supports and barriers for the multi-agency team (context evaluation)
- What providing more bespoke solutions for New Cross residents looked like (input evaluation)
- Whether these bespoke solutions led to reduced demand for services and more cost-effective care delivery (outcomes for the organisation[s])
- Whether the quality of life for residents in the New Cross area improved (outcomes for New Cross residents)

Context evaluation data consisted of observations of two New Cross team meetings, which informed the design of the interview schedule for team members. Nine team members were interviewed including the New Cross Support Team Leader. Feedback was collated and thematically analysed from a stakeholder event which took place in Kirkby-in-Ashfield in October 2015.

Input evaluation consisted of eleven in-depth interviews with New Cross residents sampled on the basis of their outcome star profiles to reflect complex and less complex cases. The interview questions were initially piloted with a New Cross resident to check relevance, ease of understanding and completeness. The initial interview schedule was modified based on the resident's feedback.

Input evaluation data was also obtained from semi-structured interviews with 8 members of the New Cross Support Team and the Team Leader.

Outcome evaluation consisted of an analysis of costs on a case by case basis in addition to the in-depth interviews with residents which gave them an opportunity to explain their outcome star profiles. This allowed for a rich understanding of how residents had experienced any changes in their quality of life as reflected in their narratives. This level of understanding also helped to explain the changes in costs and demands for services.

The interviews with residents and team members were audio recorded and transcribed verbatim. The transcripts together with the detailed notes from the team observations and the notes of the stakeholder meeting were subject to thematic analysis to identify overarching themes and sub-categories (Lincoln and Guba 1985).

The strength of the evaluation approach lies in its ability to understand and articulate the context in which the New Cross team is operating as well as the outcomes being achieved (the key ingredients for success). This becomes important for Commissioners seeking to replicate the service in other areas.

**Key findings** for each level of the evaluation are summarised below:

| Level of Evaluation | Key Findings   |
|---------------------|--|
| Context             | <p>There was clear strategic support for the New Cross Project shared between the respective agencies, including Ashfield DC, Police, Social Services, Fire and Rescue. This was evidenced by the contribution of financial support to budgets and human resources through secondments of staff to the team. Support for the Project also came from a wider network of agencies with whom the team worked for example the hoarding service.</p> <p>Management arrangements for team members differed with some team members being solely accountable to the Team Leader at New Cross while others retained a manager in their substantive post which made reporting requirements complex. For a minority of team members this also resulted in a degree of uncertainty about whether they would return to their substantive post in March 2016 and take the lessons learned from the multi-agency way of working in New Cross back to their respective agency or whether they would become attached to the New Cross team for a longer period.</p> <p>Factors which supported the New Cross Project were the leadership of the team which was considered to have organically evolved with the project, becoming more effective as the Project had developed. The person centered nature of the approach which characterised the way in which team members engaged and worked with residents was also reflected in the person centered nature of the leadership of the New Cross Support Team (the way the Team Leader worked with staff).</p> <p>The expertise which each team member brought from their respective agencies was highly valued by the team and the seconding agencies with almost all team members saying that they had been strongly encouraged to apply for the roles.</p> |

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|                              | <p>The case lead way of working, together with what was considered to be the right mix of disciplines now that Social Services and Framework had joined the team, was key to the approach. Health was identified as a key discipline missing from the team.</p> <p>Barriers included tensions reflecting a perception of the different status of team members and the time needed for the team to evolve to a position where they could perform as a truly interdisciplinary team. Team members felt that some form of more formalised professional supervision could have expedited this.</p> <p>Team performance at the time of the evaluation could be identified as interdisciplinary working and this had successfully evolved from the initial stages of multi-agency working. This means that there is good evidence of team members interacting to share distinct as well as overlapping areas of expertise and that the sum of the whole team's capabilities and contribution to outcomes for New Cross residents was greater than each individual's contributions added together. This way of working was highly valued and evidenced by the experiences of residents.</p> |
| Inputs                       | <p>From staff's perspective a bespoke intervention was person centered and began by working with a resident's strengths. Residents characterised bespoke interventions by the practical nature of support provided (wrote letters, debt management, got rid of rubbish, got help for domestic violence, help with employment) as well as the support to attend appointments with the resident (with CAB, GPs/doctors, job centre).</p> <p>These inputs were delivered in non-judgmental ways and residents valued highly; feeling listened to and having their concerns written down and taken seriously. All eleven residents interviewed were supportive of the case lead approach which meant they only had to deal with one person. They valued the regular contact with New Cross workers either by phone, text or by going direct to the team base in Chatsworth Street.</p>   |
| Outcomes<br>(organisational) | <p>A summary of cost savings for the project could be understood in terms of micro and macro outcomes.</p> <p><u>Micro outcomes:</u> Analysis of the historical costs of the 16 cases fully evaluated showed the total costs saved to the public sector from these 16 cases by 2017 would be £385k.</p>  |



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|                      | <p>Extrapolating these savings for all 115 residents with which the team had worked since its inception the public sector saving would be in the region of £2.75m which translates to; <b>for every £1 spent to support a New Cross resident £7 could be saved.</b></p> <p><u>Macro outcomes:</u> Year on year demand level comparisons show that there has been a significant initial impact upon the quality of life within the wider community of New Cross residents. Demands for services at District Council level has fallen by 7%, allied to falls in Anti-social Behaviour (17%), Serious Acquisitive Crime (34%), Violent Crime (5%) and Criminal Damage (21%).</p>   |
|                      | <p>The evaluation acknowledges that the work carried out in the area has been alongside the activities of other services, yet the area has witnessed a significant change since the introduction of the New Cross Support Team.</p>   |
| Outcomes (residents) | <p>Significant gains in terms of the quality of life for residents were evidenced by increased scores on their outcome stars particularly in the areas of family, confidence, housing/accommodation, employment and finances. Residents spoke of increased social contacts as well as improvements in relationships with family and friends. Ten out of the 11 residents interviewed described increases in their self-belief and confidence which had led to a greater taking of control of their lives in a range of areas. These gains in residents' quality of life need to be understood in the context of 'crises' being experienced by all 11 of the residents before the New Cross project had intervened. Six out of the 11 talked about intending to end their life had they not received support. Two said their lives were heading towards prison, three said they were at the point of a mental health breakdown and 2 said their homelessness would have continued.</p> |