

NORTHAMPTON BOROUGH COUNCIL

OVERVIEW AND SCRUTINY



SCRUTINY PANEL 2 – THE IMPACT OF ANTI-SOCIAL BEHAVIOUR ON THE TOWN

CORE QUESTIONS – EXPERT ADVISORS

Northampton General Hospital NHS Trust – Security Department

CORE QUESTIONS:

A series of key questions have been put together to inform the evidence base of the Scrutiny Panel:

1. Please provide details of your organisation and its role in addressing anti-social behaviour

The Security Department for Northampton General Hospital provides 24 hours a day general Security cover for the whole hospital. NGH provides a range of acute services both on an inpatient and outpatient basis to the local area.

2. What Strategies and Policies do you have in place for addressing anti-social behaviour?

We have numerous local policies within the Trust that are built on the guidance provided by NHS Protect (part of the NHS Business Authority).

3. What specific practices and measures do you currently undertake to address/tackle anti-social behaviour?

The primary measure to deal with such behaviour is the Security Personnel on site and an extensive network of CCTV cameras. We do have the additional powers granted to us by the Crime, Justice and Immigration act (2008) sections 119 & 120 giving us another tool to deal with nuisance behaviour. Alongside this we have developed strong relationships with Northants Police and are members of the NRCI.

4. Do you have specific budget/resources/funding in relation to addressing anti- social behaviour, if so please provide further details.

12 man Security team though our focus is not purely dealing with such behaviour, it is but one of many functions.

5. Are the current partnership arrangements for tackling anti-social behaviour sufficient, and if not where are the gaps?

Like many other Security Departments we are reactive in nature forever dealing with the symptoms, not the issues themselves. Where appropriate we do try and offer support, notably we will utilise the various safeguarding pathways but this is dependent on too many factors to be a realistic resolution to most issues.

6. Do you feel there is adequate co-ordination between Agencies regarding dealing with anti-social behaviour? If not how could it be improved?

The NRCI works very well targeting and spreading intelligence relating to theft – there is no such organisation or route for the spreading of information relating to anti-social behaviour. The vast majority of such behaviour does not warrant arrest therefore the incident (which can still be very disruptive) does not involve the Police and does not get further shared outside of the organisation within which it occurred.

7. How does anti-social behaviour impact upon you/organisation?

Anti- social behaviour is a daily occurrence on our site and can divert / interrupt resources required for patient care.

8. What do you think could be done to ensure effective strategic and operational links are made to tackle anti-social behaviour, or improve, on a town scale?

Some kind of centralised hub where information could be shared between organisations to create a unified approach.

- 9 Please provide details of the enforcement powers that you have in respect of anti-social behaviour

Outside of common law we can apply the powers contained within CJIA (section 119) to physically remove individuals. Further we can, with enough evidence begin the process to stop people attend NGH, though naturally this is a very long and complicated process.

- 10 Do you have the resources to enforce the powers that you have? Please explain.

In ideal situation yes, but we are a small department and it can often be challenging to have an appropriate number of staff on site to deal with incidents as they arise.

- 11 Do you have information regarding the nature of the psychoactive substances market that you are able to inform the Scrutiny Panel of?

“Legal highs” are an increasing problem for us, commonly requiring restrictive physical intervention in order to treat the medical issues they present with.

- 12 Please can you provide details of any health consequences of using psychoactive substances

- 13 Do you have any suggestions on how, as partners, we can improve our approach in addressing anti-social behaviour?

Information sharing between agencies is the only realistic approach I can see.

- 14 What do you think is the key contributing factor to anti-social behaviour across Northampton?

Alcohol remains the primary factor in anti-social behaviour. Many of Northampton’s “street drinkers” are very well known in NGH and their behaviour is often very challenging.

- 15 Do you have further information regarding the impact of anti-social behaviour on the town of which you would like to inform the Scrutiny Panel?

Following on from point 14, alcohol is having a secondary effect on NGHT, as we are increasingly dealing with patients going through alcohol detox, again something that is very challenging and creates unique problems on our wards. We are beginning to see something similar also occur with the increased use of “legal highs”.