“Elmore does **great work** with people who don’t fit the network of mainstream services. In doing so, they save thousands of pounds to the criminal justice system, and the health and social welfare services.”

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*Grant Everitt, Shelter*

The cost of anti-social behaviour

Research has shown the high cost of anti-social behaviour to the state:

- Residential drug treatment: £5,299[^1] per person
- Prison sentence including drug treatment: £28,690[^2] per person
- Average cost of an ASBO: £5,350[^3]

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**Contact us**

**Elmore Anti Social Behaviour Service**

Bullingdon House, 174b Cowley Road, Oxford OX4 1UE

**Telephone:** 01865 200130 (answerphone outside office hours)

**Fax:** 01865 246039

**Email:** info@elmoreTeam.org.uk

[www.elmoreteam.org.uk](http://www.elmoreteam.org.uk)

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[^1]: The Economic Case For and Against Prison (Matrix Knowledge Group, 2007)
[^2]: The Economic and Social Costs of Crime (Home Office, 2000)
[^3]: The Cost of Anti-Social Behaviour Orders (Home Office, 2005)

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**“The continuous help and support have been second to none.”**
Elmore's Anti Social Behaviour Service

Elmore Anti Social Behaviour Service (ASB) is an intensive support pilot for people who live in Oxford City, have complex needs and are affected by anti-social behaviour legislation. The pilot is running between November 2007 and November 2009.

Our ASB Team

The ASB Team works alongside the Elmore Team and is managed by Elmore Community Services (ECS). ECS aims to be a leading provider of quality services for marginalised and disenfranchised people.

The Elmore ASB Team comprises a team leader and two support workers. We work in partnership with CANAcT, Oxford’s ASB enforcement team to provide a package of intensive support often as an alternative to custody for people with mental health problems.

Our clients

Any individual or agency can refer by phoning us. There are no referral forms to complete. We work with people at any stage in the ASB process including early identification, warning, Acceptable Behaviour Contracts (ABCs) and Anti Social Behaviour Orders (ASBOs). We also work with people who are in prison for breaching their ASBOs.

We do not require a client to have a formal mental health diagnosis. ‘Vulnerable’ clients include street sex workers, people who have learning disabilities, chaotic lives or addictions, and people who are experiencing unstable accommodation or insecure family situations. Figure 1 indicates the range of mental health issues that were suspected, diagnosed or client-reported during the first year of the pilot.

Figure 1: clients’ identified mental health problem(s) during the first year of the pilot (November 2007 – October 2008).

What we do

The ASB Team’s goals are to reduce anti-social behaviour and to connect clients to other services with the aim of Elmore being able to withdraw.

We work intensively with clients to support them in addressing their behaviour. This includes assisting clients to develop self-management techniques, and helping them recognise the patterns of their behaviour, its impact on others and the consequences of breaking enforcement measures. We ensure clients fully understand the ASB legal process and provide comprehensive support throughout, including accompanying them in court and custody as appropriate.

We also address each client’s wider issues such as accommodation, benefits, addictions and health needs. Where appropriate, we ensure a psychiatric assessment or GP intervention.

Inter-agency relationships

Relationships with other agencies are key to the success of the project, with particular focus on the partnership between enforcement and support. Elmore has developed robust relationships with police, probation, mental health services and Oxford City Council’s Crime and Nuisance Action Team (CANAcT).

Monitoring and evaluation

Elmore monitors activities through contact hours, support plans, outcome measurements, user feedback and an agency questionnaire. Monitoring information is fed into the ECS trustees’ quarterly review meetings. The pilot ASB Service is also being independently evaluated by Revolving Doors. All clients are made aware that close monitoring is taking place.

Funding

Elmore’s Anti Social Behaviour Service is a two-year pilot (November 2007 – November 2009) funded primarily by Tudor Trust, with additional funding from Oxford City Council. Elmore is actively seeking additional funding to support the Service during year two of the pilot and beyond.
**Evaluation highlights**

These highlights of the first year of the pilot are drawn from Revolving Doors’ Interim Report, dated October 2008.

As shown in Figure 2, the ASB Team has been effective in linking clients with key services, which has resulted in dramatic improvements in meeting some of their key needs such as benefits.

**Figure 2:** improvements and reductions in usage of relevant services (November 2007 – October 2008)

<table>
<thead>
<tr>
<th>Service</th>
<th>Improvement</th>
</tr>
</thead>
<tbody>
<tr>
<td>Community Drug Service</td>
<td>↑ From 12% to 36%</td>
</tr>
<tr>
<td>Alcohol Service</td>
<td>↑ From 0% to 32%</td>
</tr>
<tr>
<td>Voluntary Mental Health Service</td>
<td>↑ From 0% to 32%</td>
</tr>
<tr>
<td>GP</td>
<td>↑ From 4% to 50%</td>
</tr>
<tr>
<td>Benefits</td>
<td>↑ From 8% to 96%</td>
</tr>
<tr>
<td>Accident and Emergency</td>
<td>↓ From 56% to 9%</td>
</tr>
<tr>
<td>Other emergency</td>
<td>↓ From 48% to 5%</td>
</tr>
</tbody>
</table>

Eight client cases were closed during the first year of the pilot for reasons shown in Figure 6.

**Figure 3:** reason for case closure (November 2007 – October 2008)

- Closed and plugged in
- Moved out of area
- Decided to withdraw
- Residential rehab
- In prison

**Impact to date**

During the first year of the pilot, 48 people were referred to Elmore’s ASB Team, and we worked with 25 people, providing intensive support and helping them to reduce their anti-social behaviour.

Evidence suggests that the ASB Team’s programme of ‘intensive support’, implemented in partnership with enforcement organisations, quantifiably improves the situation of the service user.

**Our key successes:**

- Nearly 60% of clients linked into other services.
- Reduction of clients’ use of Accident & Emergency services from 53% to 9%.
- Only one client out of 25 experienced a custodial sentence for breach of ASBO during the time we worked with them.
- 20% of clients have moved out of the area to make a new start.

We have found that giving a view in court about a client’s progress in terms of their anti-social behaviour has been of real benefit, although outcomes at this stage are somewhat anecdotal. Courts have adjourned sentencing with a view to allowing the ASB service to engage with clients. This window has enabled us to engage with clients and to collaborate in developing a package of support that can be presented to the court. This allows the court to take a more considered view over sentencing and cost effectiveness of imprisonment.

**Our clients**

Of the 25 clients supported during the pilot’s first year, 64% are male and 36% are female. The youngest client is 17 and the oldest is 60. The mean age is 34 years. The vast majority (86%) are white British. Almost two thirds of referrals came through anti-social behaviour officers working with local enforcement and local authority anti-social behaviour teams.

Over time, we have identified five classifications for clients working with the ASB Service:

- Tenancy: 24% (6 people)
- Entrenched: 28% (7 people)
- Young person: 16% (4 people)
- Sex worker: 24% (6 people)
- Sex offender: 8% (2 people)
Key plans for year two

The second year of Elmore’s pilot Anti Social Behaviour Service runs from November 2008 to November 2009. Our key plans are:

- Develop and support the ASB Team, enabling them to provide a robust service to clients.
- Develop existing and new inter-agency relationships.
- Network with local services to continue to receive appropriate referrals.
- The Elmore Team service user involvement group will provide peer mentoring to the ASB service user group to enable them to produce a DVD about their experiences of the ASB Service. This will provide training and socialising opportunities for our clients, and deliver a marketing tool for the Service.
- Improve data collection and analysis. Continue to work with Revolving Doors to ensure that outcomes are being captured effectively.
- Establish the need and viability of extending the pilot ASB Service into other districts within Oxfordshire, with a view to reducing the number of people who move into Oxford City from other parts of the county.
- Develop a strategy via the ASB Steering Group in order to counter negative media portrayals of people with complex needs.
- The introduction of 1.5 new prison posts, funded by Lloyds TSB Foundation, into Elmore Community services in January 2009 will further support the work of the ASB Team.
- Continue to seek funding for the ASB Service.

“Without this support, I’d be in prison now”

An Elmore ASB Service client

Client case studies

Anne

Anne, 32, self-referred to Elmore in November 2007. She was suffering from anxiety and depression centred on concerns over whether she would be allowed to keep her baby when it was born. Anne had a history of regular use of heroin and crack cocaine. Following a ten-day prison sentence, she was issued with a six-month ABC in November 2006 and was at risk of getting an ASBO.

Anne was known to the ASB Team as a ‘sex worker’. When she first came to Elmore she was sleeping rough. The ASB Team’s initial focus was to find her temporary accommodation. The Team also encouraged Anne to start a methadone script, even though her levels of use of heroin and crack cocaine were still high.

The Team’s June 2008 update recorded that Anne was displaying clear urine and hair tests, and was considered to be drug free. She was receiving counselling and advice on relapse prevention, and had moved into secondary stage accommodation. She was building a family life with her partner and baby. There were no breaches or further concerns and Anne was taken off the ASB list.

The Team’s September 2008 update recorded that Anne was in good mental health and living in permanent council accommodation. She was still engaged in counselling and continued to be motivated towards abstinence, although a recent hair test showed a relapse. Anne has been transferred to the main Elmore Team for continued support.

Ben

Ben, 35, was living in temporary hostel accommodation when he was referred to Elmore’s ASB Team by a local hostel in May 2008. He had a CRASBO for begging, which he had breached twice prior to his referral. Ben has a long-term diagnosis of schizophrenia. On referral, it was noted that he used crack and drank regularly. He was classified by the ASB Team as ‘entrenched’.

In the ASB Team’s June 2008 update, Ben was reported to be taking regular medication to ensure more stable mental health. The Team were working to keep him in the hostel while referrals were made to housing providers for people with enduring mental health issues. Ben was on a methadone script and not using heroin. He was assessed as being motivated to reduce his use of crack and explore treatment options. The Team helped Ben to consider volunteering options and participating in a day centre for people with enduring mental health issues. He also took part in a computer course at his hostel.

By September 2008, Ben had reduced his methadone script and achieved a significant reduction in crack use. He was living in mental health supported housing and was noted as being stable on his medication.