

DMPC Decision – PCD 1812

Title: Sexual Assault Referral Centres Onesite Funding

Executive Summary:

Improving the safety of women and girls in London is a top priority for the Mayor, pledging in his 2024 manifesto to redouble efforts to reduce Violence Against Women and Girls (VAWG).

Sexual Assault Referral Centres (SARCs) are specialist medical and forensic services available to anyone who has been raped or sexually assaulted, regardless of whether they choose to report the offence to the police. Their provision is a core function of Police and Crime Commissioners; and they are the only service that offers the forensic medical examinations, a specialist medical procedure which contributes to the criminal justice process as part of victims' access to justice.

MOPAC co-commission with NHS England (NHSE) London's Haven's, who provide the SARC service across the capital. It is delivered by Kings College Hospital NHS Foundation Trust, operates pan-London, and accepts referrals from the police and other professionals as well as self-referrals. The Havens currently operate from three hospital-based sites: Camberwell, Kensington, and Whitechapel.

In October 2025, new Forensics Science Regulator (FSR) standards alongside a UK Accreditation Service (UKAS) come into effect. The current three-site delivery model will be unable to meet and comply with the new requirements, and will need to change.

A variety of reviews recommended moving to a "Onesite" model of delivery. These include: the Dame Elish Angiolini review (2015), the MOPAC/NHSE Sexual Violence Needs Assessment (November 2016) and then the NHSE/MOPAC commissioned options appraisal of the SARCs operating model (February 2020). This move was agreed by the then Deputy Mayor for Policing and Crime (DMPC) in 2022.

Following extensive searches for, and options appraisals of, properties that meet the outlined needs, a suitable building has now been identified and MOPAC and NSHE are working together to secure the funding commitments required to secure the property.

This decision is recommending that MOPAC approve the borrowing of capital funding of up to £19.1m for the refit of the site and an uplift in annual revenue funding of up to £1.5m.

Recommendation:

The Deputy Mayor for Policing and Crime is recommended to:

1. Approve external borrowing of up to £19.1m to fund MOPAC's contribution to the capital costs of the new SARCs one-site service. This will fund the refit costs of the new leased site and will be

built into the MOPAC/MPS capital programme to be funded by external borrowing (estimated £9.5m in 2025/26 and £9.6m in 2026/27).

2. Approve additional annual revenue funding of up to £1.5m for MOPAC's 40% share of the total revenue costs of the new SARCS one-site service. The revenue costs include the additional costs arising from the need to borrow to fund the capital costs. Due to the phasing of the capital works, the revenue cost increase of up to £1.5m would not be fully realised until 2027/28; there would be part increases in 2025/26 (£1.1m) and 2026/27 (£1.2m). MOPAC's total annual revenue contribution will be up to £4.3m from 2027/28 until the end of the lease in 2032/33.
3. Delegate authority to the Chief Financial Officer to enter into a funding agreement with NHS England and agree the final terms of this agreement.

Deputy Mayor for Policing and Crime

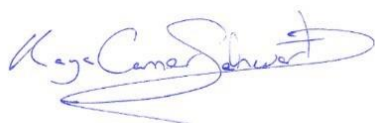
I confirm I have considered whether or not I have any personal or prejudicial interest in this matter and take the proposed decision in compliance with the Code of Conduct. Any such interests are recorded below.

The above request has my approval.

Signature

Date

18-3-25



PART I - NON-CONFIDENTIAL FACTS AND ADVICE TO THE DMPC

1. Introduction and background

- 1.1. Improving the safety of women and girls in London is a top priority for the Mayor, pledging in his 2024 manifesto to redouble efforts to reduce Violence Against Women and Girls (VAWG).
- 1.2. Sexual Assault Referrals Centres (SARCs) are specialist medical and forensic services available to anyone who has been raped or sexually assaulted, regardless of whether they choose to report the offence to the police. Their provision is a core function of Police and Crime Commissioners; and they are the only service that offers the forensic medical examinations, a specialist medical procedure which contributes to the criminal justice process as part of victims' access to justice.
- 1.3. MOPAC co-commission with NHS England (NHSE) London's Haven's, who provide the SARC service across the capital. It is delivered by Kings College Hospital NHS Foundation Trust, operates pan-London, and accepts referrals from the police and other professionals as well as self-referrals. The Havens currently operate from three hospital-based sites: Camberwell, Kensington, and Whitechapel.

2. Issues for consideration

- 2.1. In October 2025, new Forensics Science Regulator (FSR) standards alongside a UK Accreditation Service (UKAS) come into effect. The current three-site delivery model will be unable to meet and comply with the new requirements, potentially posing a significant risk in terms of criminal justice processes, court outcomes and patient care and will need to change.
- 2.2. A variety of reviews have recommended moving to a "Onesite" model of delivery. These include: the Dame Elish Angiolini review (2015), the MOPAC/NHSE Sexual Violence Needs Assessment (November 2016) and then the NHSE/MOPAC commissioned options appraisal of the SARCs operating model (February 2020). This move was agreed by the then Deputy Mayor for Policing and Crime (DMPC) in 2022.
- 2.3. There has been extensive research to find suitable sites for the Havens Onesite. Since 2020, a Steering Group comprising of NHSE, Kings College Hospital NHS Foundation Trust (the provider), MOPAC and the Metropolitan Police Service (MPS) have overseen the delivery of this project.
- 2.4. Part of the Steering Group's work has been to ensure the future location and model is fit for the needs of victims-survivors of rape and sexual assault in London, both now and in the future, and NHSE have overseen consultation with victim/survivors at multiple stages as part of the work.
- 2.5. Following extensive searches for, and options appraisals of, properties that meet the outlined needs, a suitable building has now been identified and MOPAC and NHSE are working together to secure the funding commitments required to secure the property. Commissioners are highly unlikely to find another property within central London that meets the required specification and schedule of accommodation so well. In particular,

the critical need for forensic care with minimal risk of cross-contamination, good public transport links for patient access and police parking.

- 2.6. The Havens Onesite model has been designed to be a 'gold standard' for victim/survivors, including trauma-informed spaces for therapy and police interviews. This aims to improve accessibility for victim/survivors, aiding them in their cope and recovery journey and improve criminal justice outcomes for those who choose to report to police.
- 2.7. The Onesite model would result in delivery of a shared care pathway model, an integrated approach to service delivery that is streamlined and consistent across London, including:
 - provision of forensic and other core medical/acute services at one central London location. This will improve the ease of access for victims and address the ongoing issues around travel time to, and availability of, the 3 current Forensic Medical Examination (FME) sites;
 - an increase of FME capacity from 3 FME suites, including a paediatric FME suite, to 4 FME suites with the option to add a 5th, improving both capacity and the resilience of the service by addressing the challenges associated with staffing 3 suites in different locations across London;
 - further development of shared protocols, service user pathways, shared understanding of the services supporting victims and survivors of sexual violence and live information sharing around waiting lists and capacity; and
 - ease of access for follow-up support and related services, including local/personalised provision of follow up counselling and ISVA services (on a hub and spoke basis).

3. Financial Comments

- 3.1. The service is funded jointly by NHSE (60%) and MOPAC (40%). MOPAC's annual contribution to the operational running costs is £2.8m. Responsibility for the service transferred from the MPS to MOPAC in 2014/15 with a corresponding budget transfer of £2.2m. In 2023/24 the annual contribution was increased by £0.6m to £2.8m p.a. reflecting the impact of inflation and rebaselining of costs, with MOPAC absorbing the increase in costs.
- 3.2. The proposed Onesite model has both capital and revenue implications for MOPAC.
- 3.3. The proposed site will be leased over 20 years. MOPAC's contribution will be to fund the refit capital costs of up to £19.1m. This would need to be built into the MOPAC/MPS capital programme and be funded by external borrowing (estimated £9.5m in 2025/26 and £9.6m in 2026/27).
- 3.4. The revenue implications of borrowing £19.1m would be £2.1m per annum (interest payments and MRP) and these have been built into the operating cost model of the proposed new site. MOPAC's 40% share of the new operating costs would be £4.3m, an increase of up to £1.5m from the current budget. Due to the phasing of the capital works, the revenue cost increase of up to £1.5m would not be fully realised until 2027/28; there would be part increases in 2025/26 (£1.1m) and 2026/27 (£1.2m).

	2024/25 £m	2025/26 £m	2026/27 £m	2027/28 £m	Total £m
Estimated costs	2.8	3.9	4.0	4.3	15.0
Current budget provision	2.8	2.8	2.8	2.8	11.2
Budget Pressure	0.0	1.1	1.2	1.5	3.8

3.5. The annual additional revenue costs have been funded by top-slicing the additional £10.4m increase in Council Tax income, on a recurrent basis. The 2025/26 budget and MTFP have been updated to reflect this.

3.6. The costs exclude any inflationary impact in future years as the NHSE have not yet provided a financial model which includes any inflationary assumptions.

4. Legal Comments

4.1. MOPAC's general powers are set out in the Police Reform and Social Responsibility Act 2011 (the 2011 Act). Section 3(6) of the 2011 Act provides that MOPAC must "secure the maintenance of the metropolitan police service and secure that the metropolitan police service is efficient and effective." Under Schedule 3, paragraph 7 MOPAC has wide incidental powers to "do anything which is calculated to facilitate, or is conducive or incidental to, the exercise of the functions of the Office." Paragraph 7(2) (a) provides that this includes entering into contracts and other agreements.

4.2. Section 143 (1) (b) of the Anti-Social Behaviour Crime and Policing Act 2014 provides an express power for MOPAC, as a local policing body, to provide or commission services "intended by the local policing body to help victims or witnesses of, or other persons affected by, offences and anti-social behaviour."

4.3. Paragraph 4.8 of the MOPAC Scheme of Delegation and Consent provides that the Deputy Mayor for Policing and Crime (DMPC) has delegated authority to approve business cases for revenue or capital expenditure of £500,000 or above.

4.4. Paragraph 4.8 of the MOPAC Scheme of Delegation and Consent provides that the Deputy Mayor for Policing and Crime (DMPC) has delegated authority to approve all strategies for the award of individual grants.

5. Commercial Issues

5.1. This Decision requests approval to directly award a grant to NHS England to contribute towards funding the SARC service at a one off value of up to £19.1m, plus £1.5m per annum for up to 20 years.

5.2. The actions proposed can be taken in compliance with procurement legislation and MOPAC's Contract Regulations.

6. Public Health Approach

- 6.1. Violence against women and girls is a public health issue. A grant award to contribute to this service is informed by the Mayor's public health approach to violence reduction and therefore part of MOPAC's contribution to overall efforts support victims of violence.
- 6.2. The public health approach to violence prevention is being led by London's Violence Reduction Unit (VRU), which supports the MOPAC work through preventative programmes supporting young people.
- 6.3. MOPAC will be co-commissioning with NHSE and the service is being delivered by Kings College Hospital NHS Trust. This is an ongoing partnership and has been delivering the SARCs three sites. Continuing these relationships will ensure that the new model will replicate approaches that have been proven to be successful in London to improve the service for victims-survivors.

7. GDPR and Data Privacy

- 7.1. MOPAC will adhere to the Data Protection Act (DPA) 2018 and ensure that any organisations who are commissioned to do work with or on behalf of MOPAC are fully compliant with the policy and understand their GDPR responsibilities.

8. Equality Comments

- 8.1. MOPAC is required to comply with the public sector equality duty set out in section 149(1) of the Equality Act 2010. This requires MOPAC to have due regard to the need to eliminate discrimination, advance equality of opportunity and foster good relations by reference to people with protected characteristics. The protected characteristics are: age, disability, gender reassignment, marriage and civil partnership, pregnancy and maternity, race, religion or belief, sex and sexual orientation.
- 8.2. MOPAC will adopt an intersectional and culturally sensitive approach to the development, implementation and delivery of the Havens Onsite service.

9. Background/supporting papers

- PCD 1713 Violence Against Women and Girls Commissioning Decisions - 2024-2029

Public access to information

Information in this form (Part 1) is subject to the Freedom of Information Act 2000 (FOIA) and will be made available on the MOPAC website following approval.

If immediate publication risks compromising the implementation of the decision it can be deferred until a specific date. Deferral periods should be kept to the shortest length strictly necessary.

Part 1 Deferral:

Is the publication of Part 1 of this approval to be deferred? NO

If yes, for what reason:

Until what date:

Part 2 Confidentiality: Only the facts or advice considered as likely to be exempt from disclosure under the FOIA should be in the separate Part 2 form, together with the legal rationale for non-publication.

Is there a **Part 2** form – NO

ORIGINATING OFFICER DECLARATION

Tick to confirm statement (✓)

Financial Advice:

The Strategic Finance and Resource Management Team has been consulted on this proposal.

✓

Legal Advice:

Legal advice is not required.

✓

Commercial Issues

The Contracts and Procurement Management Team has been consulted on this proposal.

✓

Equalities Advice:

Equality and diversity issues are covered in the body of the report.

✓

Public Health Approach

Due diligence has been given to determine whether the programme sits within the Violence Reduction Unit's public approach to reducing violence. This has been reviewed and supported by a senior manager within the VRU.

✓

Commercial Issues

Commercial issues are not applicable

✓

GDPR/Data Privacy

- GDPR compliance issues are covered in the body of the report
- A DPIA is not required.

✓

Drafting Officer

The Policy and Commissioning Manager has drafted this report in accordance with MOPAC procedures.

✓

Director/Head of Service:

The Head of Policy and Commissioning has reviewed the request and is satisfied it is correct and consistent with the MOPAC's plans and priorities.

✓

Chief Executive Officer

I have been consulted about the proposal and confirm that financial, legal and equalities advice has been taken into account in the preparation of this report. I am satisfied that this is an appropriate request to be submitted to the Deputy Mayor for Policing and Crime.

Signature

A handwritten signature in black ink, featuring a circular loop at the beginning followed by a series of connected, slightly wavy strokes.

Date 12/03/2025