

Knowledge Exchange Network: meeting two

The [Knowledge Exchange Network](#), formed to support better ways of policing young adults aged 18-25, held its second meeting on 26th January. This meeting looked at Violence Reduction Units (VRUs). Set up in response to rising levels of violent crime, the Units identified adverse childhood experiences (ACEs), deprivation, school exclusions and other factors as key drivers of serious violence, with some focusing on the under-25 cohort.

Stan Gilmour, Director of Thames Valley VRU, spoke about the Sequential Intercept Model (SIM) as a framework for addressing children and young people with neurodevelopmental disorders and disabilities in contact with the criminal justice system because of violence. Young people with neurodevelopmental disorders are overrepresented in custody and the SIM illustrates the stages where intervention can help prevent this.

Sue Clarke, Detective Chief Superintendent at Lancashire VRU and national lead for trauma-informed practice, presented on the social determinants of violence. By recognising and intervening on drivers of serious violence and risk factors, the young person can be safeguarded and ultimately crime can be prevented. Lancashire VRU aim to instil this trauma-informed approach into their culture.

Phil Ashford, Senior Project Manager at the Vulnerability Knowledge and Practice Programme (VKPP), gave us an insight into the development of their National Vulnerability Action Plan that aims to provide a coordinated, effective and evidence-based response to protecting vulnerable people. They are focusing their call for practice on cases involving 18-21-year olds as well as collaborating with VRUs to help align safeguarding practice.

Following speaker presentations, the group were separated into workshop rooms to discuss:

- The lessons learned in local VRUs with regards to violence prevention.
- How VRUs should use this learning to develop in the future.
- How VRUs can influence change across a wider system of agencies and actors.
- The work VRUs are doing with young adults.
- How VRUs can help with the transition to adulthood and avoiding the loss of support that can happen when a young person turns 18.

Lessons learned and future development

Concerns were raised among participants around **measuring success and how this will impact future funding**. When submitting evidence to the Home Office, it is important to recognise that the VRUs have only been in place for around 18 months (with the first six months focusing on understanding the issue). While there may be indicators of good practice, too little time has passed to make any confident assessment on their success.

This difficulty in measuring success and evaluating actions coincides with an expectation in the system, including in relation to Home Office funding, to demonstrate results quickly. For example, it is difficult to pinpoint the primary reason for a reduction in hospital admissions due to knife injury. Thus, showing the worth of the VRU can be complicated. Prevention takes a long time and there needs to be interim outcome measures to highlight progress. Recording of actions and their



importance was recognised as something the police need to improve and that can contribute to addressing these concerns.

One of the most important elements required to ensure VRUs develop effectively is having **highly trained people with relevant experiences** (as [LEAD](#) ensure). Having a relatable background makes the practitioner credible to young gang members, or those on the periphery of gang involvement, and can in turn provide more effective interventions. As well as having had similar experiences and contact with the system, this should include hiring case managers that are the same age and ethnicity as the young person to help build a trusting relationship. Nuanced conversations around social demographics and the relationship between people of authority and members of the public are consistent. These concerns will only intensify as much technology being utilised simply reinforces discrimination. On the justice side, there should be less binary conversations around who is a victim and who is an offender; who is deserving and who is not.

Legacy of VRUs is seen as hugely important so that change is embedded in organisations. There is widespread concern that current good work would be lost if the government diverted or stopped VRU funding, leading to continuously reinventing the wheel.

Emerging practice

- A key challenge for VRUs is connecting the community and the established resources. As a case in point, **Northumbria Police** have just one police officer in their VRU. They have tried to coordinate responses using statutory services. Although this adds a layer of bureaucracy, it improves the stability of service provision. However, third sector funding is disparate so emphasis needs to be placed on ensuring information is up to date and accurate so that the end user receives a quality service. Similarly, **South Wales VRU** has just one police officer, making the Unit more public health orientated.
- **West Yorkshire VRU** emphasised how secondments have supported collaboration between VRUs and partners by involving staff from various backgrounds. However, sharing of information is not seen to be at the level it should be for VRUs to reach their full potential, made particularly difficult by having five districts in West Yorkshire. The lack of communication is a result of practical reasons, rather than legal barriers, with some agencies tending to work in silos.
- The point was made that not enough work is being done to understand and address disadvantages such as neurodiversity. **Thames Valley Police** are developing new screening tools to pick up neuro-developmental disorders, that would clearly add value if rolled out nationwide.

Influencing change across a wider system

Practitioners recognised the need for a **whole system change** in relation to social care, justice and health provision. There is a need to move towards understanding the '**generic vulnerability**' of those encountering the criminal justice system. This point was illustrated by a recent example of a woman aged 21 who attempted suicide. She was known to eating disorder services and to mental health crisis teams. When she came into police custody it then became clear she was being exploited by local drug gangs. This highlights the need to be able to **share information** to be able to provide effective contextual safeguarding.



It was pointed out in discussion that a majority of prevention work focuses on early years and children as opposed to 18-25-year olds. There were concerns raised around 17-year olds accessing support the day before their 18th birthday, but none the following day. It became clear that there are clear frameworks for children and adults but there is a disconnect with regards to transitioning between the two.

There was a feeling that partner agencies were particularly involved in the safeguarding of under 18s (see for example the [YOLO programme](#)), yet it is the 18-30 age bracket that has more violent offenders. There was a suggestion that a **culture shift** is required to move away from simply 'waiting' for a violent offence to be committed but replicating the good work for under 18s in the young adult space remains challenging.

Highlighted by the work of [Junction 42](#), there is a need to look at who the Integrated Offender Management (IOM) type offenders of the future will be and how these people can be best supported to avoid heading into the 'revolving door' of the criminal justice system. It was suggested looking at 16-25 year olds (thus including 16-18 year olds in the young adult cohort) because it is at this point when a young adult leaves school and services also drop off.

Related to this is **concern around the framing of VRUs as being particularly associated with 'violence reduction'**. It may be more helpful to frame this as 'adversity reduction'. In doing so, it would sit more comfortably in the public health arena rather than being CJS focused. It was noted that each agency is trying to deliver the same or similar outcome, to identify adversity and help it to not become vulnerability. It was suggested that it is not the VRUs' responsibility to step into the realm of mainstream services; doing so implies that the **social structures and resilient network required to support the transition to adulthood are inadequate**.

One VRU spokesperson explained that their Youth Offending Teams were concerned about some young adults on bail who were at risk of self-harm. **Collaboration** was essential between the police and NHS/social service to reduce bail-time and facilitate medical support. It was expressed that this illustrated why VRU funding is both a blessing and a curse; it gets people in the room, but there is only room to bring partners together around the violence banner. Partnerships are more successful when value is simultaneously added to different parts of the system to support young adults, but the aim of the funding is specifically to reduce violence.

For one VRU, a significant enabler was understanding the need for each agency to deliver its own workstream but to still work in partnerships. A useful exercise to address this efficiently was to understand the pressure point in the system from the perspective of health, policing, education etc. Then, by **assessing the various outcome frameworks**, each agency can pinpoint the areas where they can add value to others' outcomes, and vice versa. Participants emphasised the need to collate work centrally.

There is a challenge regarding funding here with particular emphasis on the need to streamline processes. The budgets for different agencies such as health and education that have different time constraints and budget cycles/deadlines. Whose responsibility different interventions are can be ambiguous and this has been made even more difficult with Covid.

Emphasised were some difficulties around **role of the police** in delivering a public health approach to crime prevention. One VRU felt that giving some of their funding to other local organisations to lead on community engagement was a better strategy, but the quality of such work should be monitored closely.

Emerging practice

- [Basildon Hospital Project](#) was set up to support young people (including young adults) who present to A&E. The project looks at how the hospital can be used as a teachable moment to engage with young people, which we were told was having more success than engaging with the young person in police custody. In the police station the primary role is of enforcement and there is too much stress and stimuli for young adults to engage in a meaningful way. Conversely, in the hospital setting, the young person will not be prosecuted for not engaging and will still receive the best medical care.
- in **Lancashire**, the [DIVERT](#) programme has navigators in police custody who see a growing gap in terms of referrals into services. Similarly, many young people involved in county lines are going into A&E for medical attention but, until the navigators are present, there is no support in place. While it is understood that the NHS' role is to treat physical harm, there is a need for a service to be able to build trusting relationships and provide that 'always available adult' for young adults. There is currently neither any provision nor a strong evidence base for this to happen.
- Participants highlighted a need for the involvement of a range of actors within VRUs. **Thames Valley Police** reported that their VRU is too police heavy. Networking is seen as a vital tool that can counterbalance this. Thames Valley set up a network involving schools in Oxfordshire, school leaders and safeguarding leads to discuss alternatives to pupil exclusions. However, it did not have the expected success until a passionate school leader became involved; *"if you want to work in the education space, get someone from education"*. Following this, the ['fair access protocol'](#) was formed where school leaders could discuss individual, urgent cases and help unpick the underlying issues.
- **Northumbria Police and Newcastle City Council** have done useful work to bring together adult and child services in the area, to avoid the drop off in support in age 18.
- **Thames Valley Police** has been working in schools under the auspices of the VRU. They highlighted the importance of not leading with a violence-reduction/enforcement approach as the key objective should be to build relationships and create mutual understanding. Avoiding wearing police uniform in schools was seen as a useful way to support this.
- As part of their response to serious youth violence before VRUs were implemented, **Bedfordshire Police** had a multi-agency gang panel. At the time the service was being diluted as they were dealing with too many young people and this led to a refresh of the service.

The next Knowledge Exchange Network meeting will take place on Tuesday 9th March at 3-5pm. Click [here](#) to join the meeting.

We will be discussing the theme of youth engagement, including the new children and young adult strategy. Please contact Stephen Walcott for more information: stephen.walcott@police-foundation.org.uk