SERVICE UPDATE

Leicestershire Safer Communities Strategy Board 17th March 2016



The process – a victim's journey through Victim First.

Referral and Triage

Assessment and Plan

Provide Support

Review

Post Support

Support

Offence occurs

(includes high risk ASB)

Police attend the scene and receive consent from victim / witness to refer to Victim First.

Alternatively, victims can self-refer or other agencies can refer them to Victim First with their consent.

Within one working day of the referral being made, case allocated to a VF Case Worker Allocated Case Worker contacts victim by phone to offer support within 48 hours of receiving referral

Case Worker undertakes a detailed Needs Assessment with the victim.

Support plan is jointly agreed based on the victim's needs and wishes

Support may include;

- Emotional support
- Information and advice
- Access to specialist support
- Restorative
- Mental Health Support
- Crime Prevention Measure
- Advocacy
- Access to
 Hardship Fund

All support plans are reviewed by the caseworker and the service user after one month (or sooner if the needs of the service user change before this date)

Once the victim feels that all the actions in the support plan have been achieved, we will agree to close the case

An exit strategy will be agreed, particularly if there are any ongoing needs which Victim Firs are not best placed to support with.

A final review of the support plan will take place at this stage, including an evaluatior of the effectiveness of the support provided. Following case closure, the Police Service Improvement Unit will make telephone contact with the service user to undertake a Customer Satisfaction Survey and the results are fed back to VF.

Victims can self-refer, or be referred back to us by other agencies after their case has been closed if they feel they need further support in the future.



NOT PROTECTIVELY MARKED

What support do we offer?

Emotional Support

 case workers are trained to listen, to empathise and to recognise the huge emotional impact that crime can have on a victim.

Information and Advice

- eg update on Police investigation, court date etc
- Access to (and coordination of) specialist support
 - we have an interactive directory of nearly 450 providers catering for a wide variety of needs. We can either signpost the victim to an appropriate organisation or make a direct referral with their consent. We will always offer follow up support to ensure a victim does not feel that they are simply being passed from person to person

Restorative Justice

 on site RJ specialists to facilitate communication / meeting between victim and the person who has harmed them



What support do we offer?

Mental Health support

 mental health nurses based in VF two days a week to ensure immediate access to mental health assessment / support

Crime prevention measures

 direct access to target hardening service who provide crime prevention assessment and measures within 48 hours of referral.

Advocacy

 case worker can advocate on behalf of the service user eg seeking support from local housing authority.

Access to Hardship Fund

 offer of financial support, subject to meeting criteria, to help to replace stolen /damaged items or purchase goods to help manage a crisis situation.



1st October 2015 – 31st December 2016





Performance - what's changed?

- We now have access to more detailed information with the introduction of our new Database in January 2016. To enable this to happen, we have:
 - Reviewed the Needs Assessment and created a new, simpler tool.
 - Produced a new Support Plan to ensure we are setting measurable actions to address assessed needs.
 - Introduced a structured review process.
 - Created a new database which records all of our actions and outcomes.



Service development

- To enable us to promote the work of Victim First and to ensure we play an active role in local strategies to support victims and witnesses, we sit on numerous Boards covering LLR
- Additionally, we have met with many organisations to coordinate joint working, and delivered numerous briefings to raise the profile of Victim First.
- We have also taken our Service out in to the community to ensure we are making Victim First accessible to as many people as possible



Specialist Lead Areas

- All Victim First staff have been assigned one or more specialist lead areas, with a brief to:
 - build partnerships
 - promote the work of Victim First within this area
 - increase their own awareness of the specialist area through research
 - disseminate this learning throughout Victim First



Specialist Lead Areas (continued)

- The following Focus Groups were created to coordinate service delivery within the specialist lead areas:
 - Equality and Diversity

 (including Hate Crime, LGBTQ, Race, Gender,
 Marginalised Communities, Learning Disabilities)
 - Domestic Violence and Sexual Violence
 - Mental Health
 - Safeguarding (including CSE)
 - Engaging / Supporting Young People
 - ASB
 - Volunteers



Positive Outcomes

- To better illustrate the impact of Victim First on the community, it is helpful to consider just a few of the many 'success stories' from our first quarter of Service delivery:
 - Within 24 hours of a referral coming into Victim First from a PCSO, one of the Case Workers went to visit a mother and her young daughter to offer her support in relation to a crime that affected the 3-year old. Several days later the PCSO got in touch with the Case Worker and said that mum and daughter were very happy. The PCSO emailed again stating "it just goes to show that the Victim First service is working, so thank you". The Case Worker undertook a follow up call with the mother, and she stated that she couldn't believe how quickly the problem had been resolved and she couldn't thank the Case Worker enough.



Positive Outcomes (continued)

- Victim First offered support to a young woman who had been a victim of sexual violence when she was 13-years old. The victim had been struggling at school and was isolating herself from friends. The Case Worker made contact with the victim's college, who subsequently allocated her a mentor to support her through this. The Case Worker encouraged and supported the young girl to disclose to her parents and to the police what had happened two years before. The victim stated that she now feels much more confident.
- Victim First provided support to a client who had been diagnosed with schizophrenia, was self-harming and hadn't been outside his house for 10 years. The Case Worker offered spiritual support to the service user, which encouraged him to get into contact with his local imam. A referral was also made to the Victim First Mental Health Triage Nurse who offered further support. In a small space of time, the service user managed to take the huge step of leaving his house to go to the local shop. His self-harm incidents also reduced and he reported that his GP was really pleased with his progress and spoke highly of the service offered by Victim First.

Positive Outcomes (continued)

- Additionally, we have received praise from professional partners, demonstrating the positive reputation we are building:
 - "It was great to meet you and your team in person both of us were really impressed by the team and the incredible work you do. Your team are clearly very passionate about supporting victims and the work they do, so it was really great to get to speak with them about it."
 - "I also wanted to point out the comments that I have received from across the (Police) force: officers are really buying into this and feel it's a great service. They have said on each occasion they have contacted Victim First they have had a great response and feel the staff are really helpful and supporting their victims. Few comments I have had are "it's an amazing service" "it's what LLR have needed for so long" "The staff are so professional and really want to help" all really positive to hear."

Action Plan

- Some of the targets we have set for the Service over the coming months include:
 - Embed the new Needs Assessment, Support Plan and Database
 - Increase community engagement
 - Further build on relationships / referral pathways with partners
 - Increase the take up of our service from victims
 - Increase the use of RJ
 - Build on our work in Specialist Lead areas
 - Create service user Advisory Group

