POLICE & CRIME COMMISSIONER FOR LEICESTERSHIRE

POLICE AND CRIME PANEL

Report of OFFICE OF THE POLICE AND CRIME COMMISSIONER

Subject VIOLENCE REDUCTION UNIT

Date TUESDAY 24 SEPTEMBER 2019 – 2:00 p.m.

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Purpose of Report

1. This report provides an update on developments regarding the Violence Reduction Unit.

Recommendation

2. The Panel is recommended to discuss and note the contents of the report.

Context

- 3. The OPCC along with Leicestershire Police and the Public Health departments from Leicestershire and Leicester have been working on the development of a violence reduction approach for some months, albeit without any guaranteed funding. A small team was created and contact was made with the Violence Reduction Unit in Scotland to seek advice and involve them in an event to present the proposals to the Strategic Partnership Board (SPB) on 6 August 2019. Before the event took place the Home Office approached the OPCC in Leicestershire to invite it to bid for a sum of £880,000 specifically to set up a violence reduction unit. LLR had been selected, along with 17 other areas, on the basis of the levels of knife related injuries dealt with at Leicester Royal Infirmary.
- 4. The OPCC bid for the funds and was successful. It is now in the process of establishing the VRU.

Developments

- 5. The design of the VRU is included in Annex A, which contains some of the slides presented on 6 August. To date the feedback for this approach has been very positive and this is how the VRU is currently being developed.
- 6. Each of the elements of the VRU will now be taken in turn:
- 7. **VRN Board** an initial meeting of the Board took place on 6 September to establish the vision, mission and principles of the programme. The finished version of these will be prepared and disseminated when completed, but the

key elements include the vision to make LLR the safest place to live and raise a family and to develop the programme as a long term initiative, focussing on supporting the next generation of young people to have the skills, attitudes, culture and enabling infrastructure to adopt violence-free lifestyles. The initial meeting also recognised that the vision can only be realised with the long term commitment of agencies and communities working in an integrated manner. For this reason we propose to call it a Violence Reduction Network, rather than a unit.

- 8. The membership of the VRN seems to be settled and links in well to the established structure of the SPB. The governance meeting structure has been accepted and is outlined in Annex A, but role outlines for members of the VRU Board have yet to be prepared.
- 9. **VRN Development** as things stand we have appointed the Strategic Director and the lead for the Service Development Project and they will take up posts at the start of September. We have identified someone to act as Programme Manager for the programme, although a start date has not been set. Appointees for most of the other roles have been identified and the arrangements for negotiating start times are in progress.
- 10. **Service Mapping** a lot of work on service mapping was undertaken for presentation to the event on 6 August 2019 and the person leading that work will continue to develop the project. We are in the process of appointing a public health consultant to develop a full needs' assessment, which will inform the detailed response strategy. Our current aim is that we have sufficient information by the end of September to identify the main service gaps that we want to address.
- 11. Analysis and Evaluation – the police have already been working on the development of a tool, which we feel could form the basis of our methodology for the VRN. This has been presented at several recent inter-agency events and been well received. The tool gives us the capability to analyse information covering all police systems in line with the following variables: nature of incident; perpetrator of incident; victim of incident; time of incident; location of incident. Each of these variables can be further analysed to create a rich understanding of the patterns of violent incidents across LLR. However, further work is needed to draw on partner data to enrich our understanding of each of the variables and this requires more robust information sharing arrangements to be established. We also need to supplement this data with data from case studies, engagement with key individuals and wider strategic data such as our Joint Strategic Needs Assessments. The aim is that the public health consultant will take lead responsibility for preparing our overarching multi-agency assessment of the causes of violence from which we will prepare the response strategy.
- 12. **Service Development and Implementation** we are currently working on implementing the services outlined in the application, albeit recognising that we do not yet have a full picture from the service mapping. The initiatives that we are developing are: a service to work with individuals admitted to hospital with knife related injuries, in line with the Red Thread model; the expansion of a service to engage with young people at risk of violent behaviour; a service to enhance the wrap around work supporting police enforcement-based operations. We are also in the process of appointing a lead person to take responsibility for community engagement within the programme.

- 13. **Campaigns** our initial aim is to build the plan for the campaigns and then to appoint a resource to take this forward. This is currently in development.
- 14. **Policy Integration** as mentioned at the event on 6 August, policy integration will be addressed via the infrastructure already established around SPB. This is the project that will drive forward the system changes required to achieve the long term vision of the VRN.
- 15. **Leadership and Vision** this project will be led by the Strategic Director and will draw on the group of champions in each of our organisations who will be empowered to drive forward the changes within their own organisations. The vision setting workshop on 6 September has agreed the vision, principles and key messages that will form the basis of the leadership structure of the programme.

Conclusion

A lot of work has been undertaken in a short space of time to successfully apply for funding and set up the VRU. To date the response of partners has been excellent and there appears to be a strong commitment across LLR. Although the vision has not been fully articulated yet the approach of building on existing services and maximising service integration has been a key element in all of our discussions, with the aim of building a shared, community-based methodology that has long term impact on violent behaviour and other harmful behaviours in our community. This will take time and commitment to achieve not just from the VRN but from all members of the SPB.

Implications

Financial: The grant for the programme is £880,000 and the procedures for managing these funds are in place, including the preparation of an agreement with the Home Office

Legal: No specific issues identified

Equality Impact Assessment: The programme will conduct an EIA at the relevant point

Risks and Impact: The programme is in the process of developing a risk register and other supporting programme management assessments

Link to Police and Crime Plan: the work of the VRN aligns with most of the sections of the Police and Crime Plan, particularly in relation to the focus on prevention.

List of Appendices

Appendix A – VRU Structure

Persons to Contact

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Appendix A

Violence Reduction Unit

DEVELOPING THE PROGRAMME

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Since we began things have changed:		
	One year VRU funding – but long term plans	
	Surge funding & related initiatives]
H	Focus on public health approach]
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What do we want to achieve?

Reductions in violent behaviour sustainable over the long term

Home Office Requirements:

Reductions in hospital admissions with a knife or sharp object – especially under 25s

 $Reductions \ in \ knife\ enabled \ serious\ violence-especially\ among\ victims\ under\ 25$

Reduction in all non-domestic homicides - especially with knives & victims under 25

What's our proposed approach

Build for long term

Create actual VRU with strategic director

VRU joins up related initiatives - single approach

Create capabilities - analytical, information sharing etc.

Run as programme under SPB























