



CordisPulse

January 2024

Welcome to January's edition of the CordisPulse – a monthly digest of key research and policy developments across the sectors in which Cordis Bright provides research and consultancy services, i.e. adult social care and health, children and young people's services, and criminal justice.

Last month was UK Disability History Month and the Cordis Bright team spent time reflecting on how we can improve our research practices to better involve disabled people.

Consulting with disabled people and their families is a core component of our work. The evidence that it generates is hugely valuable. It helps to ensure that services are designed with disabled people in mind and deliver positive experiences and outcomes for disabled people who access them.

But how do you undertake consultation in a way that is appropriate, meaningful and robust?

We have published a tool on conducting accessible fieldwork. This distils a range of effective practice drawing on desk-based research and combines it with our experience of working with – and learning from – disabled adults, disabled children and their families.

We think the toolkit will be useful to others working in the field so have published it [here](#). We recognise that this is an area of continuous improvement and would welcome any feedback you may have. Please contact Hannah Nickson on HannahNickson@cordisbright.co.uk.

If you would like to discuss any of the issues raised in this month's Pulse, please do contact us on 020 7330 9170 or email stephenboxford@cordisbright.co.uk.

Best wishes,



Dr Stephen Boxford
Director & Head of Research

If you would prefer not to receive future editions of the CordisPulse, please click 'unsubscribe' at the very end of this email. If you would like to discuss anything that arises from the Pulse (or if there are others who you think would like to receive copies) then please contact Dr Stephen Boxford on stephenboxford@cordisbright.co.uk or 020 7330 9170.

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Cordis Bright News

Conducting accessible fieldwork toolkit

This toolkit sets out guidance and key principles for conducting inclusive and accessible fieldwork with disabled¹ adults, and disabled children and young people. It was developed as part of our activities related to UK Disability History Month, and is based on a rapid review of literature, toolkits and guidance on making social research accessible.

We recognise that this is an area of continuous improvement and would welcome any feedback you may have. Please contact EmmaAndersen@cordisbright.co.uk or HannahNickson@cordisbright.co.uk with any comments you may have.

¹ We are aware that referring to “disabled people” risks generalising highly varied populations with many different disabilities. Throughout the toolkit we refer to specific disabilities where possible. We also recognise that people with similar disabilities are likely to have very varied experiences and views, which will also be shaped by other aspects of their identity such as gender, race, ethnicity and sexuality.

Adult Social Care and Health

Reports

Department of Health & Social Care. Rapid evaluation: hospital discharge funding 2022 to 2023

This report evaluates the impact of two government funding streams introduced in September 2022 (£500 million) and January 2023 (£200 million) to free up hospital beds in England. This report looks at how much of the funds were spent, as well as changes in hospital discharge metrics from 2022 to 2023.

The report states that local areas have spent £486 million of the £500 million discharge fund on services including workforce, home care, intermediate care and residential care, and £138 million of the £200 million discharge fund on step-down care services including on beds, wraparound care and therapeutic packages. The funding also enabled the purchase of 7,134 step-down beds in England, with the North West and the North East and Yorkshire regions purchasing the most (26% and 23% of beds, respectively).

The report makes recommendations for future hospital discharge funding programmes, including:

- Future funding should be distributed over a longer period of time, with as much notice as possible, to allow local areas to implement interventions with longer lead-in times.
- Future funding should provide as much certainty as possible regarding continuity and exit planning. Additional funding should be seen as one part of the government's response, alongside policy development to address longer-term or systemic issues.
- Monitoring data requested from local areas should be meaningful, necessary and proportionate. This should include consideration of the frequency of data collection.
- Data collection should also be considered in the context of other funding, including the Better Care Fund, where spend on hospital discharge may overlap, to help understand how different funds are spent.

UK Health Security Agency. Health Effects of Climate Change in the UK: State of the evidence 2023

This is the fourth *Health Effects of Climate Change (HECC) in the UK* report. This series of reports provides evidence, analysis and recommendations based on climate change projections for the UK. This report highlights that health risks of climate change will not be distributed equally across the UK, with vector-borne diseases (VBDs), droughts and wildfires likely emerging earlier in the nation's southern regions. The report also emphasises that health impacts of climate change will increase with progressive warming. For instance, higher and rapid warming will accelerate the likely emergence of *Ae. albopictus* mosquitoes in the UK, heightening the risk of VBDs including dengue, chikungunya, and West Nile virus.

However, the report stresses that there is strong evidence to show that targeted adaptations can reduce ill-health associated with climate change. Such adaptations include:





- Nature-based solutions: interventions that harness or enhance natural systems and processes, such as wetland restoration.
- Interventions targeting vulnerable populations and priority settings: protecting older adults during extreme weather periods is key to minimise heat risk and temperature-related mortality.
- Promoting adaptive behaviours: increasing levels of active travel is likely to reduce emissions and improve health across the population, with implications for transport and urban planning.

Local Government Association and The NHS Confederation. Integrated Care Partnerships: Driving the future vision for health and care



Integrated Care Partnerships

Driving the future vision for health and care

This report examines the common themes and key characteristics underlying effective Integrated Care Partnerships (ICPs) in England. The report states that the top five qualities of effective ICPs are:

1. Ensure partnerships between NHS leaders and local authorities are equal, so that no partner becomes the *de facto* lead or sole decision-maker.
2. Enable local decision making, so that the ICP's actions do not stifle the actions of local leaders.
3. Embed accountability, so the responsibility of holding others to account does not fall to one individual. This helps ICPs retain their role as a 'critical friend' to component organisations.
4. Promote a trusting and transparent culture, in which the aim is not to avoid disagreements, but to develop a robust and sustainable culture in which they are positively managed and overcome.
5. Facilitate wider participation from the voluntary, community and social enterprise (VCSE) sector, the public, and patients as well as partners in academic, local business and emergency services. This helps to foster innovation and collaboration.



Department of Health & Social Care. Review of risk of Modern Slavery and Human Trafficking in the NHS Supply Chain



Review of risk of Modern Slavery and Human Trafficking in the NHS Supply Chain

December 2021

This report estimates the prevalence of modern slavery and human trafficking within NHS supply chains. The report's findings are based on the analysed business practices of over 1,300 NHS suppliers, which represent 600,000 NHS products. The report represents a snapshot in time, covering approximately 60% of NHS spending on medical consumables procured through NHS Supply Chain at the supplier level. Risk ratings drawn from the government's Modern Slavery Assessment Tool, and international risk data, reflects previous indications of risk, with 21% of suppliers being identified as high risk, and surgical instruments, gloves, gowns, uniforms, and face masks identified as the five highest risk products.

In light of these findings, the DHSC states that it will work in partnership with NHS England and NHS Supply Chain to:

- Lay new regulations, as required by section 81 of the *Health and Care Act 2022*, which set standard rules for procurement of healthcare products and services,

- Develop a cross-government response to map supply chains to improve knowledge and identify where action against modern slavery and human trafficking must be taken, and
- Enable NHS staff to better understand and address modern slavery and human trafficking risks.

The Health Foundation. Moving to healthy homes

This report lists four major improvements that could be made to the Government's *Decent Homes Standard* to improve housing conditions across the UK on a long-term basis. The suggested improvements are:

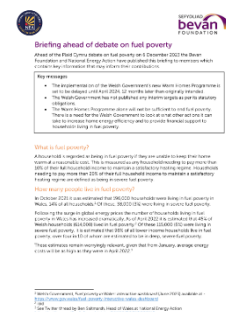
1. **Thermal comfort:** in order to align with carbon targets, the report states that the *Decent Homes Standard* should require the energy efficiency of homes to meet a minimum EPC of Band C. As well as improving insulation, the report argues that increasing the standards of EPC ratings will also make it cheaper to heat homes. This change will bring short and long-term benefits, as warmth remains an immediate priority given the cost-of-living crisis, and well-insulated homes prevent the spread of condensation and mould, preserving the future health of occupants.
2. **Hazards:** the report emphasises that the Government's standards should be updated to require homes to be free from vermin, dampness, cold and other hazards which threaten human health. The report states that the *Decent Homes Standard's* current requirement to be free from hazards is too narrow and tends to capture only the most serious levels of certain hazards, leaving occupiers open to the negative health effects of homes in poor condition.
3. **Modern facilities and services:** the report stresses that all structural elements within homes should be in good condition, with improved standards for space in kitchens and location of bathrooms. These building components (such as kitchen cabinets) should also be assessed on their condition, rather than their age.
4. **Connectivity:** the report emphasises that all homes should have fast and reliable digital connectivity, as digital has become the default for accessing most essential utilities and government services, including health care. Connectivity is also increasingly important for employment and social engagement, which are important determinants of health.

Briefings

Bevan Foundation and National Energy Action. Briefing on Fuel Poverty

This briefing was prepared to inform members of Plaid Cymru of the state of fuel poverty across Wales, ahead of a debate in the Senedd. The three key messages of the briefing were:

1. The implementation of the Welsh Government's new *Warm Homes Programme* is set to be delayed until April 2024. This programme aims to deliver home energy efficiency improvements to support households currently living in fuel poverty, or at risk of living in fuel poverty. This delay means the programme will commence 12 months later than originally intended.



2. The Welsh Government has not yet published any interim targets for the *Warm Homes Strategy*, as per its statutory obligations. The briefing states that these targets would provide vital opportunities to review progress and will enable the Welsh Government to strategically review the effectiveness of each aspect of its strategy.
3. The *Warm Homes Programme* alone will not be sufficient to end fuel poverty. There is a need for the Welsh Government to look at what other actions it can take to increase home energy efficiency, and to provide financial support to households currently living in fuel poverty.

Tools and Guidance

NHS England. Meeting the needs of autistic adults in mental health services

This guidance provides NHS system partners with advice on how to improve the quality, accessibility, and acceptability of care and support for autistic adults in mental health services by promoting the implementation of ten key principles. The guidance recommends that the first eight principles should be applied by all partners within an integrated care board (ICB) area when planning, designing and delivering mental health services, and that the final two principles should be specifically applied at the ICB level.

The principles that all services within an ICB should adhere to are:

1. Ensure all services are accessible and acceptable for autistic adults to use
2. Support access to meaningful activity, such as employment or social opportunities
3. Facilitate timely access to autism assessment, when clinically indicated
4. Use evidence to guide intervention choice
5. Assess and proportionately manage risk
6. Monitor and minimise the use of restrictive practices
7. Support cohesive transitions, and
8. Consider the physical health needs of people accessing mental health services.

In addition, the guidance stresses that ICBs should:

9. Develop a local commissioning strategy to ensure appropriately adjusted and tailored mental health provision is available for autistic adults, informed by local and national statistical data, and
10. Develop and maintain a well-trained workforce.

Local Government Association. The Care Act 2014 and unpaid carers: A handy summary

This resource summarises the key principles of the Care Act 2014 in relation to the universal and specific duties for councils in supporting unpaid carers. Notably, these duties include:

- Councils meeting a carer's needs for support by providing this to the person being cared for, even where the carer is not eligible (subject to their consent).
- Councils providing and maintaining an information and advice service for all carers about what can be done to help them (and those they care for) prevent, reduce or delay the development of longer-term needs for care and support, and to help them look after their own wellbeing.



- Councils conducting a ‘transition assessment’ when a child, young carer or parent-carer is likely to have needs for support when they, or the person they care for, transitions to the adult care system.
- Councils arranging an independent advocate for any carer who would find it difficult to participate in their assessment and support planning when there is no-one else to help.
- Councils providing carers who are eligible for support with a support plan, including a personal budget “*sufficient to meet their care and support needs*” that can be spent in a number of ways. Carers must always be offered the option of taking some, or all, of their personal budget as a direct payment.

NHS England. Proactive care: providing care and support for people living at home with moderate or severe frailty

This guidance is for integrated care boards (ICBs) and provider organisations involved in the design and delivery of proactive care - personalised and co-ordinated multi-professional support and interventions for people living with complex needs. This guidance aims to embed a more consistent approach to proactive care across England for people living at home with moderate or severe frailty, in line with the latest evidence and best practice. The guidance has identified five core components of a best practice proactive care approach, which are:

- 1. Identifying the target cohort for whom there is the greatest potential impact on health and system outcomes:** Systems should analyse their unplanned care datasets to identify locally which patient cohorts could have been supported earlier in the community through proactive multi-professional support and with this, their health exacerbations avoided. Indicators include frequent use of primary care and taking multiple medications.
- 2. Carrying out holistic assessments, such as a Comprehensive Geriatric Assessment:** these assessments should cover an individual’s past medical history and current health and wellbeing needs.
- 3. Developing a personalised care and support plan (PCSP):** PCSPs set out a person’s health and wellbeing goals, empowering people to play an active role in their health and care.
- 4. Delivering co-ordinated multi-professional interventions to address the person’s range of needs:** a named co-ordinator who provides a clear point of contact for advice is an important element of proactive care. Effective care co-ordination will help individuals navigate care across the health and care system and support them when receiving support from a range of services.
- 5. Providing a clear plan for continuity of care, including an agreed schedule of follow-ups:** continuity of care enables personalised care, improves care quality, boosts a person’s confidence in medical decision-making, and fosters greater job satisfaction for health and care professionals.

The guidance emphasises that for these core components to be implemented effectively, providers need to have a flexible workforce, shared care records, and a culture of clear accountability and decision-making.

Children and Young People’s Services

Reports



Department for Education. Impact of childcare provider characteristics on the cost of childcare for providers and parents



Impact of childcare provider characteristics on the cost of childcare for providers and parents
Research report
December 2023

Robert Johnson, Su-Min Lee, and Gavan Conlon (London Economics)



This report investigates whether some types of childcare providers are able to deliver childcare at a lower unit cost than others and, if so, whether these savings are offered to parents in the form of lower fees. The report findings are based on the analysis of quantitative data obtained from the 2022 *Survey of Childcare and Early Years Providers*, which listed hourly parent-paid fees and the unit costs of each provider.

The main findings of the report include:

- Childminders charge the lowest hourly fees for childcare (a median fee of £5.00 for all age groups). In comparison, private group-based providers charged the highest hourly fees (a median fee of approximately £6.00).
- Unit costs were a third lower for group-based providers in a chain than they were for group-based providers that were not part of a chain.
- Providers who provided care to more children had slightly lower materials and training costs (per hour of care delivered) than other providers. In addition, providers who employed more staff had slightly lower materials, training and rent costs (per hour of care delivered) than smaller providers.
- Providers who delivered more hours of care achieved much bigger economies of scale. A 10% increase in the number hours of care delivered by a provider was associated with a 3% decrease in its unit cost.
- Overall, a 10% decrease in providers' unit cost was associated with a 1.0% decrease in their hourly parent-paid fees.

Department for Education. Providers' finances: Evidence from the Survey of Childcare and Early Years Providers 2022



Providers' finances: Evidence from the Survey of Childcare and Early Years Providers 2022
Research report
December 2023

Su-Min Lee, Robert Johnson and Gavan Conlon (London Economics)

This report analyses information about childcare providers' cost of delivering childcare and the income they receive both from parents and the government. The analysis uses information from the 2022 Survey of Childcare and Early Years Providers (SCEYP), and presents the results across different types of providers, geographical region, and age groups.

The main report findings include:

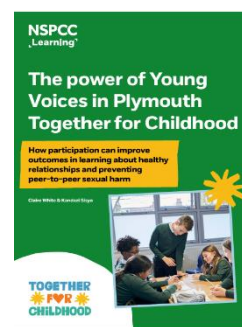
- Staffing costs continued to make up the majority (70%) of providers' costs.
- Just over 1 in 5 childcare staff (21%) were paid at or below the National Living Wage (NLW).
- Regional differences in unit costs and staff costs were largely consistent with regional differences in average household incomes.



- The proportion of income from different income sources continued to vary considerably between provider types. For example, parent-paid fees accounted for 71% of childminders' income, while 85% of income for nursery class childcare settings came from free entitlement funding.
- Mean hourly fees paid by parents to providers were relatively stable across age groups, ranging from £5.60 to £5.72 per hour.
- Providers' use of additional charges increased slightly from 2021, bringing their use more in line with 2018 and 2019. The most common types of charges were for unarranged late pickups, one-off activities, and meals.

NSPCC Learning. How participation can improve outcomes in learning about healthy relationships and preventing peer-to-peer sexual harm. The power of Young Voices in Plymouth Together for Childhood

This report summarises the findings of NSPCC's *Young Voices* programme. This initiative was implemented in Plymouth from 2019-2022 and worked with young people aged 13-16 years old to promote healthy relationships and prevent peer-to-peer sexual harm. The programme used participatory approaches to put young people at the heart of developing strengths-based campaigns. Overall, the programme involved 96 young people (Young Campaigners) in 6 secondary schools and 1 youth group. Young Campaigners produced six youth-focused campaigns that were shared with their peers across Plymouth, and one campaign directed at parents and carers.



The key findings from the report suggest:

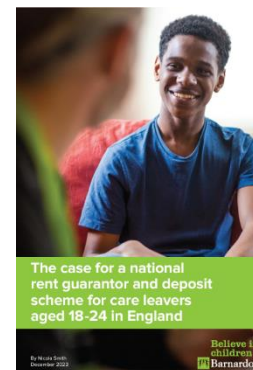
- The programme provided a platform for young people to be heard on the subject of healthy relationships.
- Young Campaigners delivered clear and relevant messages about healthy relationships using topics and mediums that were well received by their peers.
- Young Campaigners reported gaining a deeper understanding of healthy relationships through the participatory approach compared with their usual relationships and sex education.
- Encouraging participation contributed to the safeguarding of young people.
- School-based delivery provided access to a diverse participant pool and existing resources, such as classrooms, technology, and safeguarding procedures.
- Young people preferred informal opportunities to find out about the programme and clear information about selection criteria.
- Enabling youth participation required a range of skills and experience centring young people's voices and power.

The report concludes by stating that through participatory co-design, implementation and relationship-building, young people were able to design campaigns focused on healthy

relationships and preventing peer-to-peer sexual harm. This work resulted in a deeper understanding of abuse within peer relationships and strengthened young people's sense of self-efficacy and control, which is a crucial step within prevention and towards safety.

Barnardo's. The case for a national rent guarantor and deposit scheme for care leavers aged 18-24 in England

This report sets out the case for introducing a requirement on local authorities to run a rent guarantor and rent deposit scheme, which would help care leavers access a greater range of properties in the private rented sector. The report states that care leavers in England often struggle to find good quality accommodation and often risk homelessness as a result – with approximately one in four homeless people having been in care at some point in their lives.



The report introduces a requirement on local authorities to run a rent guarantor and rent deposit scheme which would help care leavers access a greater range of properties in the private rented sector. Barnardo's has calculated that setting up such a scheme across England would require a one-off investment of £30m to establish a scheme, along with a much more modest ongoing cost of £6.4m per year to run it effectively.

Action for Children. Going without: Almost one in five children growing up deprived of the basics

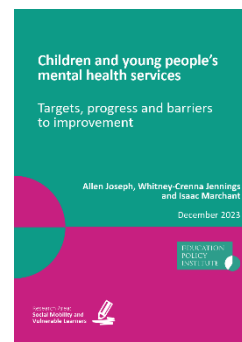
Action for Children has been working with the National Centre for Social Research (NatCen), to analyse UK government data on children growing up in material deprivation.

The key findings of the report include:

- In 2021/22, there were 2.6 million children in the UK growing up in material deprivation – meaning their families can't afford the items and activities considered essential to a happy and healthy childhood. This equates to almost one in five children (18%).
- 1.5 million children in material deprivation are also in families with an income below the official poverty line (10% of all children) – meaning they are even more likely to be growing up in severe hardship.
- Over half of the children growing up materially deprived are under 10 (58%). That's 1.5 million young children growing up deprived of the essential items and activities they need to get the best start in life – including 900,000 who are also living below the poverty line.
- Even before the worst of the cost of living crisis and energy price shock, there were 4.2m children in families that struggle to save at least £10 a month, 1.2m children in families that cannot keep up with bills, and 800,000 children in families that are unable keep the house warm.

Education Policy Institute. Children and young people's mental health services: Targets, progress and barriers to improvement

This report assesses the progress that has been made against government targets to improve children and young people's mental health services since 2015. The report found that whilst some progress has been made in improving service provision, the Education Policy Institute (EPI) finds that this has been outpaced by rising demand for services, with concerning levels of variation in the services available across England. The reports states that there is a strong need for better data and greater transparency regarding service availability, quality and outcomes.



Informed by these findings and advice from advisory groups, the report makes a range of policy recommendations to provide a blueprint for a future government strategy to improve children and young people's mental health services.

The report finds that:

- Out of 135 government policies relating to children and young people's mental health, just 36 per cent had been fully implemented. Some action had been taken for 58 per cent and for 6 per cent, it was unclear whether any progress had been made. Most policy plans that have been implemented are related to improving processes rather than the experiences and outcomes of young people with mental health needs.
- Mental health provision for young people continues to vary considerably across the country. This includes support following a mental health crisis and whilst on a waiting list for clinical treatment; the ages at which children and young people's mental health services are accessible; and the range of evidence-based therapeutic treatments on offer.
- Whilst positive changes to provision for young people have been made, this progress has been outpaced by a rising need for services. With a significant increase in the number of children and young people accessing services since the pandemic, government targets are now outdated, and are based on historical data.
- There is still too little focus on prevention and early intervention, with the government adopting a largely reactive approach based on improving service provision for the most acute cases.

In light of these findings, the report recommends that:

- The government should design a policy programme which reflects the evidence on drivers of lifelong mental health issues and the importance of intervention in childhood and adolescence.
- The government should update their mental health workforce strategy and implementation plan, with a ten-year mental health workforce recruitment and retention strategy including clear plans for funding, delivery, and accountability. To support this, the Department for Health & Social Care should explore introducing a statutory children and young people mental health workforce census.

- NHS England and the Department for Health & Social Care must continue to focus on increasing access to – and eliminating barriers to accessing – mental health services for children and young people.
- NHS England and the Department of Health & Social Care must work to improve mental health data and transparency, so that services can be more effectively planned and commissioned.
- The government should gather data on early intervention and third sector services including availability of these services in local areas, access, and spending.
- Future government policy plans should have greater clarity and internal consistency, accompanying implementation strategies, and accountability mechanisms. Policy commitments should be accompanied by implementation and measurement strategies, clearly laying out how, and when, they will be met.
- All secondary schools should have access to a mental health support worker, with the skills and training to deliver evidence-based, high-quality interventions.
- The Department for Education should aim to ensure all teachers have the knowledge and skills to recognise and respond to mental health needs and age-appropriate programmes to help pupils and teachers discuss mental health should be developed and expanded.
- The government should introduce a strategy to reduce child poverty and expand access to high quality early support services for families in all areas.

Nuffield Family Justice Observatory. Understanding care pathways and placement stability for babies in Wales

This report provides new evidence about entry routes to care, pathways through care, and placement outcomes for the youngest children in the Welsh social care system. The report is the seventh in the *Born into Care* series, and the first to use data collected by local authorities on all children in care to understand the care experiences and outcomes for babies under a year old.



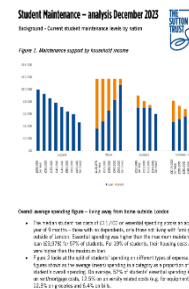
Some key findings from the report include:

- The number of babies entering care has increased across Wales. In 2020/21, 353 babies entered care for the first time – an increase of 54% since 2003/4, when 230 babies entered care for the first time.
- Most voluntary arrangements become compulsory arrangements within two years. Between 2003/4 and 2018/19 (rather than 2021), 5,077 babies entered care via s.76 (voluntary agreement between carers and Children’s Services) or an interim care order, with 3,094 (61%) entering via s.76 and 1,983 via an interim care order. Of the babies who first entered care under s.76 in this period, two thirds (63%) subsequently became the subject of a compulsory order within 2 years of entering care.
- Babies are experiencing a significant amount of instability A significant proportion (some 30%) of newborns and babies aged less than 6 months, experienced 3 or more placements within the 2-year follow-up window.



The Sutton Trust. Student Maintenance Analysis 2023

This analysis highlights trends relating to the levels of financial support received by 2,104 undergraduate students from Student Finance across the UK, between October-November 2023. This report builds on previous research by the Sutton Trust which suggested that university students across the UK are struggling to manage financially during the cost of living crisis.



Key findings of this analysis include:

- Nearly two-thirds (62%) of students spend less than the minimum £37 a week on food needed for essential food items.
- Median loans both in London (£8,500) and the rest of England (£7,000) come nowhere near to covering median costs on essential spending (£17,287 and £11,400 respectively).
- Median spending on essentials by students from working-class backgrounds is approximately 21% less than those from middle-class families.
- 66% of working-class students' essential spending goes on rent and bills, compared to just 54% for their more affluent peers, meaning they spend less on groceries as a result (£120 vs £140 a month).

In order to address these disparities between students, the analysis recommends that the government should urgently review the maintenance levels available to students for day to day living costs, to better match the financial challenges students are facing. This includes bringing back maintenance grants, at a level reflecting increased costs of living, since they were abolished in 2015. This would mean that students from lower-income households are better able to meet their basic needs without being left with the highest levels of debt when they leave university.

Department for Education. SEND Futures Discovery Phase: Wave 1 methodological report



This report details the findings and methodology from the first year discovery phase of a longitudinal study looking at children with special educational needs and disabilities (SEND). The study comprised two strands of fieldwork with young people with SEN aged 12-13 in the 2021/22 academic year and attending English state school education. These strands included a face-to-face survey and a web survey.

SEND Futures Discovery Phase Wave 1 methodological report

December 2023
Authors: Line Knudsen, Samantha Spencer, Chujun Sivathasan, Dhru Shah, Martin Wood, and David Hussey, National Centre for Social Research



In total, across the two strands, 2,992 young people took part in the study, and 3,526 parents or guardians. A number of response maximisation initiatives were found to be effective:

- In the face-to-face strand, the use of unconditional incentives sent with the advance letter (£5 for each participant) resulted in an increased response rate of 4 points at the household level when compared with a £10 conditional incentive for each participant, given upon completion of the survey.



- In the web strand, a higher incentive value (£10, rather than £5) resulted in an increase in household level response of 7 points, and a shorter survey length (20 minutes, rather than 30 minutes) in a 3 point increase in household level response.

The report highlighted that being unable to participate in a face-to-face interview due to their SEND was particularly common among young people with autism, who were also the group most likely to report having received a lot of help from someone else to complete their web survey. This indicates the need for strategies to ensure privacy and lack of interference, for example, the use of self-completion instruments for particularly sensitive questions.



Criminal Justice

Reports

Home Office. Violence Reduction Units year ending March 2023 evaluation report

This report presents the findings of an evaluation of Violence Reduction Units (VRUs) in their fourth year of Home Office funding. The aims of the evaluation were to estimate the impact of VRUs (and SV funding) on violence and assess the progress made, particularly in the last year, by VRUs towards a whole-system approach. Key findings from the report, such as a statistically significant reduction in hospital admissions for violent injury, represent progress compared to previous years. Other notable findings include:

- Effective approaches to multi-agency working centred around building and embedding strong working relationships with partners, having structures in place that enable effective and multi-agency working, and having a clear vision and buy-in from key operational and strategic partners.
- Building on the good progress made in the first 3 years of the programme, there was some evidence of continued progress towards effective data sharing and analysis in 2022 to 2023. This included increased usage of data insights to commission and target interventions. Progress was most evident in VRUs that had continued to invest in systems, such as data dashboards, and could access more and better quality data to improve the VRUs' and partners' understanding of those at risk.
- VRUs encountered key common challenges when attempting to share data, such as difficulty accessing health, probation, and individual-level school data, inconsistencies in data quality and granularity, and limited analytical capacity.
- The commissioning and delivery of interventions is most effective when VRUs combine four key perspectives: data insights, partners and intervention-level or VRU-wide monitoring (to understand the issues, the need and the gaps); the independence of community-based or third-sector projects; the specialist resourcing and scale of statutory providers; and the strategic perspective of the VRU as a network.

In light of these findings, the Home Office has set out the following recommendations for VRUs:

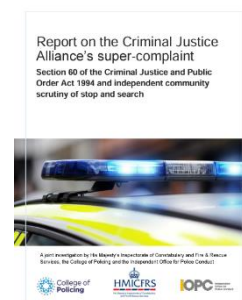
- Develop a clear, shared vision that is, as far as possible, driven by the best available evidence, informed by local priorities and broader government strategies, and ensures buy-in from key partners.
- Develop and maintain strong relationships: focus on relationship building (using a people-centred approach), open communication and engaging a wide range of partners.
- Secure long-term funding and strategic planning: Encourage longer-term commitments from partners through stable funding and strategic planning that enables the development of multi-year interventions.
- Invest in data systems and dashboards: Utilising data dashboards can help VRUs to visualise, analyse, and monitor trends and patterns in violence. This can enable data-

driven decision-making and promote better communication among partners. Investing in such systems can lead to more efficient and effective data management.

- Improve access to health and education data: Work closely with health and education partners to overcome barriers to data sharing, whilst maintaining necessary privacy and data protection standards. Access to this data can provide a more comprehensive understanding of violence and inform targeted interventions.

HMICRS, the College of Policing and the Independent Office for Police Conduct. Report on the Criminal Justice Alliance's super-complaint on suspicion-less stop and search

In May 2021, the Criminal Justice Alliance (CJA) submitted a super-complaint to the HMICRS, the College of Policing and the Independent Office for Police Conduct. According to the 2002 *Police Reform Act*, a super-complaint is defined as a complaint where *'a feature, or combination of features, of policing in England and Wales by one or more police force is, or appears to be, significantly harming the interests of the public'*. The super-complaint was made in relation to 'suspicion-less' stop and searches and perceived inadequate scrutiny of police stop and search powers.



The report found that the way stops and searches are authorised and scrutinised by police differ across England and Wales. To address this variability, the report lays out ten recommendations for chief constables, police and crime commissioners, the Home Office and the NPCC. These are:

1. Chief constables should make sure their forces review the content of stop and search training in section 60 of the Criminal Justice and Public Order Act 1994 and how they provide it.
2. The NPCC should work with the College of Policing to agree minimum requirements for logging police decision-making in response to recording stop and search authorisations and reviewing policing operations involving the authorisation of a stop and search.
3. Chief constables should make sure briefing and debriefing arrangements for their force's activities under section 60 of the Criminal Justice and Public Order Act 1994 are thorough and in line with Police and Criminal Evidence Act 1984 Code A.
4. Chief constables should make sure all officers who may exercise stop and search powers understand, and comply with, their responsibility to safeguard children who are stopped and searched.
5. Chief constables should make sure forces effectively communicate with communities and interested parties on the police use of stop and search powers. This should include making sure communications reach the communities most likely to be affected by stop and searches to ensure police communication strategies are effective.
6. The Home Office should change the Annual Data Requirement to require all police forces to record and return annual data on stop and searches that include: the number, locations, area and durations of stop and searches granted, the number of authorisations refused, and the outcome of each search.
7. Chief constables should ensure that their force gives community scrutiny panels all relevant information to help them scrutinise police stop and searches. This should include the underlying reasons for authorisations, written records of searches, and body-worn video footage of entire encounters.
8. Chief constables and where applicable, police and crime commissioners, should make sure their forces work in partnership with community scrutiny panels to review panel

membership and vetting arrangements to remove any unnecessary barriers to recruiting panel members and promote the recruitment of culturally diverse members.

9. The Home Office, in finalising the national minimum standards framework for community scrutiny panels, works with the NPCC to make sure the terms of reference, practices and scrutiny processes are consistent for all community scrutiny panels, include children and/or young people in the scrutiny process, including those who have been stopped and searched.
10. The NPCC, the Association of Police and Crime Commissioners and the Home Office should inform HMICFRS, the Independent Office for Police Conduct and the College of Policing how they intend to respond to the recommendations of the report within 56 days.

Ministry of Justice. Body Worn Video Camera Pilot Evaluation



This report analyses the piloted use of Body Worn Video Camera (BWVCs) across 23 prisons in England and Wales, and provides recommendations for further camera use in reducing levels of assaults against staff and prisoners. In total, 600 hundred BWVCs were deployed from June 2015 to December 2015, with post-pilot data gathered until February 2016. This data included responses from 2,800 staff and 800 prisoners through interviews, surveys and action research.

Body Worn Video Camera (BWVC) Pilot Evaluation

Laura Pope, Dr Helen Wakeling, George Box, Sharon Ains,
Dr Rosie Travers, Dr Ruth Merrin, Caroline Webster and Rachel George
Her Majesty's Prison and Probation Service

Ministry of Justice Analytical Series
2016

Preventing violence by changing lives



Key findings of the pilot evaluation include:

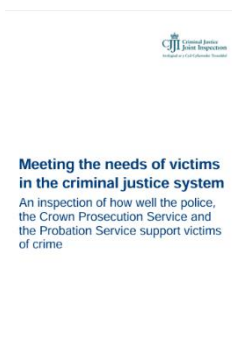
- BWVCs had a varying impact on the levels of recorded violence and use of force across the pilot sites with some sites showing an increase and some a decrease in various types of assault rates. Overall, there was no statistically significant difference in assault rates between the pilot and comparator sites following the use of BWVCs.
- Staff and prisoners involved in the study were more positive and more likely to support the use of BWVCs when they had been well-informed about their purpose and had seen or been involved with the use of BWVCs.
- In some cases, staff and prisoners reported benefits of BWVC use, such as a calming effect on prisoners and improving the management of poor behaviours. However, the reports of positive changes were not consistent across the pilot sites and were affected by practical issues such as limited access to the equipment and attitudinal barriers, such as some staff members' ambivalence or resistance to change.
- When BWVCs are used transparently, consistently and fairly, they can provide staff with a greater sense of physical protection, effectively de-escalate and deter incidents (particularly less serious indiscipline and verbal disputes) and support the development of a rehabilitative environment by improving relationships.
- When information and guidance on the purpose and use of BWVCs was not clearly communicated or adhered to, staff and prisoners involved in the study experienced negative effects such as some prisoners thinking that staff might purposefully manipulate use of BWVCs with the sole intention of punishing them, and some staff being fearful that their language and behaviour would be judged unfairly, and that the camera footage would be used for disciplinary action against them.

Based on the findings, the report suggests that the effective implementation of BWVCs may be dependent upon:

- A clear communication strategy, including recognising and addressing any existing cultural barriers that can impact on the effective use of BWVCs.
- A comprehensive training package and adequate resourcing so that staff can be supported and encouraged to use BWVCs fairly and consistently, and
- The development of monitoring systems to assess the ongoing impact of BWVCs on safety and quality of relationships in each prison.

HMICFRS, HMCPSP and HMI Probation. Meeting the needs of victims in the criminal justice system

This report assessed whether the police, the Crown Prosecution Service (CPS) and the Probation Service understand what victims need, whether they meet those needs, and whether they provide a good quality service. The main findings from this report include:



- The police, the CPS and the Probation Service all have policies, procedures and guidance in place that have been drafted to comply with the Code of Practice for Victims of Crime in England and Wales (the Victims' Code). However, the three bodies often focused on whether they complied with the 12 rights set out in the Victims' Code, rather than the victim's individual needs.
- There is a lack of good-quality information and poor communication between criminal justice bodies added to the problems of an already overstretched criminal justice system. Criminal justice bodies need to work more collaboratively and focus on the quality of their contact with victims, not just on the process.
- None of the three organisations had an effective way of measuring how well they meet the needs of victims.
- Local criminal justice boards don't always have access to clear and reliable data from criminal justice bodies. This means that the boards can't accurately assess the quality of services to victims and take action to improve it.

To address these issues, the report lays out six recommendations for different bodies. These are:

1. By 31 December 2024, the Ministry of Justice, Home Office and Attorney General's Office should work together to use this inspection as the basis for a broader and fundamental review of the experience of victims of crime, involving other Government departments and agencies as necessary. The review could draw on evidence from this inspection and look more broadly at how best to include information on all services available to victims of crime, seeking to improve the availability of access for victims and the consistency of the service they receive. It could also seek to promote better sharing of information about positive practice and initiatives aimed at improving the victim experience.
2. By 30 September 2024, the Ministry of Justice should develop Victims' Code performance metrics and reporting systems. These should include how criminal justice bodies engage with victims and the quality of the engagement. Performance metrics should also include measures of how well criminal justice bodies obtain

feedback from victims and how well they use this to assess the quality of engagement and improve the quality of services.

3. By 31 December 2024, the College of Policing should work with the National Police Chiefs' Council and chief constables to develop minimum standards for the completion of victim needs assessments. These should include standards for timeliness of completion and clarity on the information to be recorded.
4. By 30 September 2024, the National Police Chiefs' Council and the Crown Prosecution Service should agree minimum standards and consistent processes for how witness care units or functions communicate with the police, the Crown Prosecution Service and victims to help effective, agile and timely information sharing so that victims' needs are met.
5. By 31 December 2024, the National Police Chiefs' Council should work with His Majesty's Prison and Probation Service to make sure all eligible victims are referred to the Victim Contact Scheme.
6. By 30 September 2024, the Probation Service should provide training on the work of the Victim Contact Scheme to all probation practitioners and those in training. The learning should include what is involved in the Victim Contact Scheme; and how probation practitioners work with victim liaison officers to keep victims safe.

Commission for Countering Extremism. National research environment for the study of extremism in the UK

This report looks at the factors which can create gaps in extremism research, and how they can be filled to help the government develop effective policies. The main factors the report identified include:

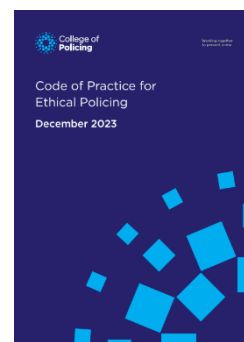
- The study of extremism is highly politicised, and its politicisation presents clear potential for silencing and exclusion of certain perspectives.
- Projects supported by the major public research funders appear to be skewed towards studies of extremism in general, as well as towards studies of the far right, especially with regard to the UK of the present day and the recent past.
- There are many obstacles to collecting relevant data by conventional means, including when trying to access data and research participants via state agencies, such as HM Prison and Probation Service (HMPPS), and when seeking approval from risk-averse research ethics committees.
- The use of 'naturally occurring' online data in place of more conventionally collected data raises problems of representativeness, and also does not always avoid difficulties with regard to ethical approval processes.
- Lack of data-sharing makes it difficult for stakeholders to seek second opinions and leads to duplication of effort.
- There is also evidence of possibly justified concern that being perceived to be critical of actions supporting 'progressive' or left-wing causes might lead to negative professional consequences ('cancellation').



Tools and Guidance

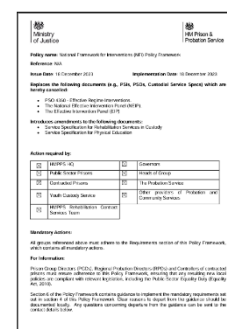
College of Policing. Code of Practice for Ethical Policing

This code of practice sets out what chief police officers should do to ensure an ethical culture is fostered and maintained in their police force. This guidance will help policing staff implement a non-statutory Code of Ethics, to support everyone in policing to provide ethical and professional policing services. The document provides guidance for police organisations and chief police officers in how to challenge unprofessional behaviour, ensure openness and candour, and how to recognise and respond to misconduct.



Ministry of Justice and HM Prison & Probation Service. National Framework for Interventions (NFI) Policy Framework

This Policy Framework is intended for providers (from within HMPPS and externally) of rehabilitative interventions that address thinking, attitudes and behaviour and which are administered to people convicted of crimes, sometimes as part of their sentence. This policy framework provides mandatory instructions on how to apply (to the National Framework for Interventions (NFI) for approval of rehabilitative interventions. It also provides the criteria against which interventions are approved or not.



By providing clear guidance on how HMPPS headquarters will assess individual interventions, this policy framework seeks to make sure that all rehabilitative interventions are underpinned by the latest evidence and are fit for purpose. The policy framework applies to interventions that are to be delivered in the Probation Service, or in custody, and sets out how HMPPS headquarters will track what interventions across the country have been approved, how and when that approval should be reviewed, and gives guidance for how interventions that fail to secure approval should be effectively decommissioned.