



# CordisPulse

---

## September 2022

Welcome to September'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.

This month we were pleased to publish two evaluations commissioned in parallel by the Police and Crime Commissioner for Avon and Somerset. These focus on education inclusion work of Avon and Somerset Violence Reduction Unit and other key local partners, in Bristol and across the region. They highlight the value stakeholders place on a child-centred and trauma-informed approach to promoting education inclusion for children and young people at risk of involvement in serious youth violence or exploitation, and the importance of consistent and appropriately skilled staff in delivering direct support and in building and maintaining relationships with education providers.

They illustrate a variety of delivery models and features of effective education inclusion work, which might provide a starting point for colleagues in other regions who are interested in developing similar approaches. The reports can be seen [here](#) and [here](#).

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](mailto: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](mailto:stephenboxford@cordisbright.co.uk) or 020 7330 9170.

---



Cordis Bright Ltd, 23/24 Smithfield Street, London, EC1A 9LF.

Telephone: 020 7330 9170

Email: [info@cordisbright.co.uk](mailto:info@cordisbright.co.uk)  [@CordisBright](https://twitter.com/CordisBright)

Website: [www.cordisbright.co.uk](http://www.cordisbright.co.uk)  [Cordis Bright](https://www.linkedin.com/company/cordis-bright)



## **Cordis Bright News**

### **Evaluations of the Avon & Somerset Violence Reduction Unit and Education Inclusion**

Cordis Bright was commissioned by the Office of the Police and Crime Commissioner for Avon and Somerset to conduct two parallel evaluations linked to the work of their Violence Reduction Unit. Both projects promote education inclusion for children and young people at risk of involvement in serious youth violence or exploitation.

The first project is Bristol's education inclusion work, involving direct 1-to-1 support to children and young people at risk of exclusion or a managed move, and partnership work between the local authority police, youth offending teams and education providers to develop and deliver a Weapons in Schools pathway.

The [evaluation](#) suggests that this has delivered positive outcomes for many of the children and young people supported. It has also improved the confidence of education providers who have worked with project staff, enabling them to support children and young people at risk of involvement in violence or exploitation to maintain their placements in education settings.

The second project is the roll-out or scaling up of similar approaches across the other four local authority areas in Avon and Somerset; Bath and North East Somerset, Bristol, North Somerset, Somerset, and South Gloucestershire. This explored being at risk of exclusion from education as a potential "teachable moment" for children and young people, i.e. a moment when intervention might help them to better understand the likely consequences of their behaviour and to make different choices. The [evaluation](#) focused on process and implementation, as well as variations in the models used by each local area. It also identified some emerging evidence that the project has begun to deliver positive outcomes for children and young people who have been supported.



## **Adult Social Care and Health**

### **Reports**

#### **Department for Digital, Culture, Media and Sport. Evaluation of the Mutual Support Programme 2**

This report presents the findings of a process evaluation of the Department for Digital, Culture, Media and Sport (DCMS)'s Mutuals Support Programme 2 (MSP2).

MSP2 was a flagship programme offering advice and support to aspiring and growing Public Service Mutuals (PSMs), defined as organisations that:

- were formerly part of the public sector
- deliver public services
- have a large degree of staff influence in the way that the organisation is run.

The programme ran between March 2018 and January 2020 and supported 44 projects.

#### **Public Health Wales. Understanding Social Prescribing synergies key to improving health and wellbeing for all**

A new report published by the Primary Care Division, Public Health Wales, highlights the distinctions and synergies between, physical and mental health services, wellbeing activities and community assets and social prescribing.

The current social prescribing model in Wales is holistic, person-centred and integrates with statutory services across sectors. The 'Social Prescribing Interface Model' reflects the distinctive ways that people engage with these services and activities, but it recognises that there are clear meeting points when viewed together.

The following interfaces have been explored:

- Social Prescribing with Wellbeing Activities & Community Assets
- Social Prescribing with Physical & Mental Health Services
- Social Prescribing with both Physical & Mental Health Services and Wellbeing Activities & Community Assets

Five recommendations have been identified which are intended to inform strategic direction and policy development in relation to social prescribing, with the goal of supporting and improving the wellbeing of both current and future generations in Wales.

These are:

1. To recognise and address the interface between social, physical and mental health and wellbeing in all policies.

2. To support the interaction and synergy between all components in the social prescribing interface model, by making equitable population health and wellbeing central to the planning of services.
3. To embed a person-centred approach to accessing services, activities and assets to support people to better manage their health and wellbeing.
4. To support those referring (including self-referral) with understanding the role and purpose of services, activities and assets to support different needs.
5. To achieve the long-term outcomes of social prescribing, there is a need to increase the scale and sustainability of services, activities and assets that social prescribing relies on.

### **The King's Fund. Building capacity and capability for improvement in adult social care**

In this discussion paper, The King's Fund looks at how local authorities in England improve the quality of adult social care. In order to do this, they conducted 27 interviews with those involved in improving adult social care in local authorities, explored the adult social care improvement 'stories' in five local authorities and compared what they had heard with established approaches and principles of quality improvement used in many sectors.



Through this research, they found examples of excellent work on improvement and local authorities drawing on the support offer that is provided through 'sector-led improvement'. Adult social care staff shared best practice through this programme as part of a strong regional community for improvement.

They also saw huge variety in approach and a lack of a shared language or codified set of methods for improvement. At times, the absence of a shared quality improvement approach appeared to lead to improvement activity that was reactive, focused on short-term fixes and one in which the data and measurement were lacking.

### **Department for Digital, Culture, Media and Sport. Public Service Mutuals: Longitudinal Case Study**

This independent study examines the role and potential of public service mutuals as a viable way of delivering public services.

Mutuals are organisations that have left – or 'spun-out' - from the public sector to become independent enterprises that deliver an increasing variety of public services. They generally take social enterprise forms and incorporate a significant degree of employee (and sometimes user community) ownership, control and influence in how they are governed.

The case study research on which this report is based took place between May 2018 and February 2020. The overall aim has been to collect evidence in order to:

- Monitor the current health and development of the mutuals sector;
- Contribute insight and learning to help make the case for the mutual model as a viable way of delivering public services;
- Inform policy decisions about how government and others can further support the growth and sustainability of mutuals.

### **Local Government Association. Explaining variation in spending – public health**

This analysis seeks to explain why some councils in England spend more on public health than others. Public health spending is first compared with resident population, showing that areas with more people have higher public health grant expenditure.

A rate of spending on public health per head of population is then calculated, and predictive models are run to attempt to explain variations in this spending rate between local authority areas:



- First, a model explaining this variation using the rate of public health grant provision, showing that local authorities spend more per person where they receive more grant funding per person.
- Finally, a series of models explaining the variation in spend per person based on local needs and circumstances, showing that local authorities spend more per person where they have greater local needs for public health interventions.

### **Department for Digital, Culture, Media and Sport. The role of Voluntary, Community, and Social Enterprise (VCSE) organisations in public procurement**

This research explores the role which VCSEs can play in public services. It identifies how to reduce barriers to increase VCSE participation in public service markets. A particular focus lies in areas such as health and social care, disability, employability, where tailored and bespoke support is often beneficial to best support vulnerable groups.

### **Department for Levelling Up, Housing and Communities. An evaluation of the Controlling Migration Fund Programme**

This evaluation provides evidence of impacts and benefits across 14 projects in different local authorities. The reports identify best practice for delivery of projects engaging specific migrant groups (including unaccompanied asylum seeking children), and specific impacts generated for resident and migrant communities.

They found that projects that provide recent migrants with tailored information about local services worked well to improve how services were accessed in order to reduce service pressures. Effective approaches included: designing area-specific information



on local services and individual rights and responsibilities; providing information through trusted intermediaries and known local venues.

### **Department for Levelling Up, Housing and Communities. Evaluation of the Integration Areas Programme**

This was a programme that funded 5 Integration Areas to deliver place-based integration interventions. The evaluation focused on 3 intervention types: Schools Linking, Community Conversations, and Community Ambassadors.

- Schools Linking is a programme facilitating social mixing between schools within areas that have been identified to have segregated communities. It was found to have a positive effect on pupils and helped to support IAP related outcomes in participating schools, particularly improving pupils' confidence in meeting young people of different ethnicities, religions, and economic backgrounds; and improving pupils' understanding of different races, religions, and cultures. Notably, however, it did not raise them to the level seen in some other similar schools.
- Community Conversations consisted of events that created safe spaces for community members to engage in facilitated debate on integration-related topics such as race, culture, and religion. The evaluation found it to be well received by participants, who found their experience positive, and felt a sense of pride and satisfaction from being involved. It also showed that it may have had an influence over some of the outcome areas of meaning social mixing. However, pandemic and intervention size-related evaluation limitations mean that it is not possible to say with certainty whether the Community Conversations intervention worked to achieve its intended outcomes.
- Community Ambassadors provided training and support to local volunteers with the aim of developing local leadership skills that would enable the championing of integration values within their communities. The model was found to have several positive impacts, for example in improving Ambassadors' comfort engaging with individuals from different backgrounds and their motivation to effect local improvements. However, more evidence is needed to determine how trained Ambassadors go on to impact their local communities. The evaluation identified factors that are worth replicating in future programmes as well as ways the programme could have increased its potential for having impact.

### **NHS England. 2022/23 business plan**

This business plan sets out NHS England's work in leading and supporting the NHS to respond to the challenges of the last two years as well as the opportunities to transform the delivery of care and health outcomes through collaborative system working, and the use of data and digital technologies.

### **St Mungo's. Life Changing Care: The role, gaps and solutions in providing social care to people experiencing homelessness**



St Mungo's has published a report on the unmet care needs of people experiencing homelessness.

Below are some key findings:

- There is a lack of appropriate residential care services for people with complex needs, with very few homes across the UK catering for the full range of needs common to people experiencing homelessness, including substance use, particularly when those needs are accompanied by what may be considered challenging behaviours.
- There are challenges in accessing the assessment process itself, with the delay resulting in needs escalating, staff struggling to maintain clients' engagement in the process, and increased pressure being placed on non-registered services.
- A number of St Mungo's services found social care teams to be unresponsive and noted a perceived inflexibility when working with people who may struggle to keep appointments, with clients with experience of drug and alcohol use reportedly facing the most significant barriers.
- There is appetite among commissioners in adult social care, homelessness and housing to explore more appropriate long term options for this group, and the Adult Social Care White Paper and the new integrated care systems provide opportunities to embed tailored social care provision at a local and national level.

## **Briefings**

### **Office for Health Improvement and Disparities. Vulnerability in infancy**

This analysis describes and quantifies the reasons given for hospital and community services recording children as vulnerable in a child's health record.

Vulnerable children are at greater risk of experiencing physical or emotional harm or experiencing poor outcomes because of one or more factors in their lives. The analysis looks at:

- clinical vulnerability
- statutory vulnerability
- social and family vulnerability
- combinations and multiple vulnerability

It includes analysis of inequalities based on sex, ethnicity and deprivation.

### **The King's Fund. Where does the buck stop? Understanding accountabilities and structures in the national health and care system in England**

The King's Fund have published a briefing where they explain the core functions of the national bodies with the most significant role in setting policy for and shaping the operation of the health and care system, in line with the Health and Care Act 2022

and various recent reforms to the public health system. They consider how these organisations are held accountable for carrying out those functions and the extent to which central government can direct them.

### **Drink and Drugs News. Every Little Helps: Small changes help facilitate trauma-informed care**

Drink and Drug News has published an article stating that it is possible to make a real difference in providing trauma-informed care just by making a number of small changes, rather than completely reshaping services. Amongst other points, they emphasise that building trust first is more important than trying to get all the information straight away. They also stressed that understanding and responding differently to aggressive behaviour is key.

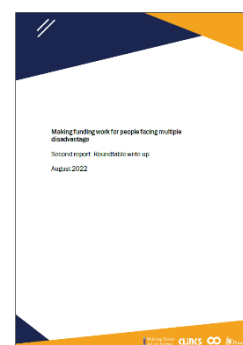


The key goal of trauma-informed practice is to raise awareness among all staff about the wide impact of trauma and to prevent the re-traumatisation of clients in service settings that are meant to support and assist healing.

### **Making Every Adult Matter. Making funding work: Second report**

This briefing draws on a previous report and a roundtable of civil servants to offer a series of recommendations for improving the way funding works for people facing multiple disadvantage.

The [previous report](#) (published in January 2022) suggested that, although government programmes developed and implemented in recent years with the aim of supporting people experiencing multiple disadvantage are welcome, the way in which government funding streams are traditionally designed, offered, coordinated and monitored can limit the collective impact they have for people facing multiple disadvantage.



This briefing is the next step, reflecting on a roundtable held with civil servants in relevant governmental departments to work to identify solutions to the challenge identified in the first report. Discussion focussed on the three following areas:

- Coordination between programmes and gaps in provision
- Remit of funding programmes
- Nature of funding allocation

## **Tools and Guidance**

### **The King's Fund. How to make change happen in general practice**

The King's Fund have created a short resource for general practices and ICSs, setting out four principles drawn from evidence to highlight how to make change happen:



1. Changes work best when they're driven from the bottom up.
2. Financial incentives and targets can change activities, but that's not the same as improving outcomes.
3. The 'soft' stuff is important.
4. People need capacity and capability to make change happen.

This resource was created with an awareness of the pressures the sector is currently under. For each of the principles, they describe why it matters, and what it might mean for those working in general practices and in ICSs.

### **NHS England. Patient safety learning response toolkit**

The Patient Safety Incident Response Framework (PSIRF) promotes a range of system-based approaches for learning from patient safety incidents. National tools have been developed that incorporate the well-established SEIPS framework (Systems Engineering Initiative for Patient Safety).

Organisations are encouraged to use the national system-based learning response tools and guides, or other system-based equivalents, to explore the contributory factors to a patient safety incident or cluster of incidents, and to inform improvement.

### **Public Health Wales. Talking Improvement, a brand new podcast from Improvement Cymru**

Improvement Cymru are launching a new podcast series, Talking Improvement, a safe space to talk all things improvement. The series will cover everything from tools, techniques, methodologies and frameworks to personal accounts of improvement projects including their successes and challenges.

In the first series, Improvement Cymru showcase some improvement stories from across the health and care system in Wales, talk about the importance of raising awareness of sepsis and discuss tools and technologies within the improvement and innovation space.

Episodes include:

- 'Safe to start', improving patient flow and patient safety within Prince Charles Hospital with Catherine Roberts, Director of Operations, Merthyr and Cynon Integrated Locality Group and Robert Foley, Head of Patient Flow from Cwm Taf Morgannwg University Health Board.
- Raising awareness of sepsis with Terence Canning, Welsh Executive Director for UK Sepsis Trust.
- Design thinking, improvement and innovation with Dr Philip Webb, Chief Executive of Respiratory Innovation Wales.
- Lean principles within the heart of the 'Toyota Way' with Nick Pearn, Principle Specialist from the Toyota Lean Management Centre.



## Children and Young People's Services

### Reports

#### **NHS Digital. Smoking, Drinking and Drug Use among Young People in England, 2021**

This report contains results from the latest survey of secondary school pupils in England in years 7 to 11 (mostly aged 11 to 15), focusing on smoking, drinking and drug use. It covers a range of topics including prevalence, habits, attitudes, and wellbeing. This survey is usually run every two years. However, due to the impact that the Covid pandemic had on school opening and attendance, it was not possible to run the survey as initially planned in 2020; instead it was delivered in the 2021 school year.

In 2021 additional questions were also included relating to the impact of Covid. They covered how pupils took part in school learning in the last school year (September 2020 to July 2021), and how often pupils met other people outside of school and home.

The key findings are as follows:

- There has been a decrease in the prevalence of smoking cigarettes.
- Current e-cigarette use (vaping) has increased to 9%, up from 6% in 2018.
- 40% of pupils said they have ever had an alcoholic drink.
- 6% of all pupils said they usually drank alcohol at least once per week, the same as in 2018.
- Fall in prevalence of lifetime and recent illicit drug use.
- Pupils who frequently met up with people outside their school or home, were more likely to have recently smoked, drank alcohol or taken drugs.
- Low wellbeing is more likely amongst pupils who recently smoked, drank and/or have taken drugs.

#### **Action for Children. Parenting services under pressure: unequal access to early years support in England**

Action for Children surveyed around 2,000 parents of 0-5s across England to ask about their experiences of accessing baby and toddler groups, and parenting courses and programmes.

Below are the key findings:

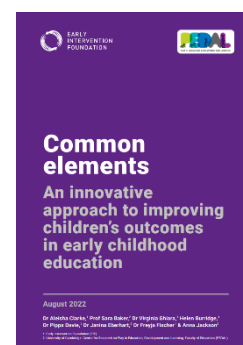
- Early years parenting support services are vital to levelling up.
  - Services like baby and toddler groups and parenting programmes can support children's development, help with parent and child wellbeing, and enable the early identification of serious issues facing families.
  - 66% of parents in our survey wished there was more high-quality parenting support available to help with their parenting.

- Lower income families are less likely to access services. There are also big variations in access between different regions of England and inequality in ease of access to services.
- The main barrier to accessing support was that services were not available. There is also a financial barrier to accessing support.
- Parents are worried about missing out on support - 79% of parents who had been unable to access support were worried about the potential impact.
- Parenting support helps with prevention. However, the groups who were most likely to need further support (Black, Asian and Minority Ethnic parents, younger parents, and fathers) were also those who had found it difficult to access parenting services in the first place.

### **Early Intervention Foundation. Common elements: An innovative approach to improving children's outcomes in early childhood education**

This report summarises the process and findings of the 'common elements' review of evidence-based early childhood education programmes that led to the development of the Early Years Library resource for early years practitioners.

'Common elements' are the discrete practices, routines, strategies and behaviours that recur in multiple evidence-based programmes, and which can be integrated into practitioners' daily interactions with children.



These strategies and techniques are not intended to replace evidence-based programmes, but instead they might be used to reach a wider group of children with effective practices.

Through this two-year project, in partnership with PEDAL (the Centre for Research on Play in Education, Development and Learning at the University of Cambridge) and supported by the Nuffield Foundation, the Early Intervention Foundation sought to take a transparent and systematic approach to identifying common elements associated with the most effective early childhood education programmes; and to develop, in consultation with practitioners, practical guidance on the practices, routines, strategies and behaviours that practitioners can use to support children's skill development.

### **NSPCC. Evaluating Look, Say, Sing, Play: Lessons learned from the NSPCC's campaign to encourage responsive parenting**

The Look, Say, Sing, Play (LSSP) campaign aims to reduce the risk of abuse and neglect by educating parents about the importance of interacting with their babies.

Delivered both locally and nationally to parents of babies aged 0-2 years, LSSP provides parents with tips and resources which encourage and improve interaction in their everyday routine and boost their child's development.



Two years after implementing LSSP, the NSPCC carried out an evaluation using a mixed-methods approach. This included surveys, interviews and focus groups with parents and practitioners who used the LSSP resources. The evaluation considers:

- how parents used the resources with their babies;
- the impact on interaction between parents and their babies when using the resources;
- how local campaigns were implemented, and whether this affected how practitioners used the resources with parents.

## Criminal Justice

### Briefings

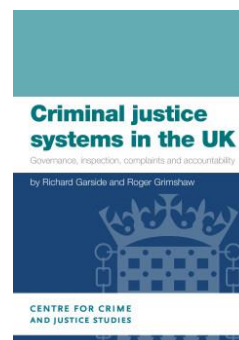
#### Centre for Crime and Justice Studies. Criminal justice systems in the UK

The Centre for Crime and Justice Studies has published this report outlining the various key mechanisms currently available in the different jurisdictions of the UK.

It is divided into four main chapters, covering the police, prosecution, courts and prisons. Each chapter examines the main mechanisms for accountability and change:

- Governance
- Inspection
- Complaints
- Citizen accountability

Each chapter examines how these four main mechanisms operate across the three UK jurisdictions of England and Wales, Scotland and Northern Ireland.



#### Clinks. Resettlement of children after custody

This is an evidence review looking at:

- What is involved in children’s resettlement and why it is so important.
- The challenges for supporting children after custody.
- The essence of successful resettlement for a child, and the role of practitioners in it.
- Effective sentence planning and case-management.
- The five key characteristics for effective resettlement support.
- The importance of practitioners being ‘identity-aware’.
- The importance of diversity.
- The recent policy and practice development of constructive resettlement.



#### Prison Reform Trust. Why focus on reducing women’s imprisonment?

This briefing provides a concise and informative explanation of the need to focus on reducing the imprisonment of women in England and Wales. It contains statistics on the number of women imprisoned, the characteristics of women in prison and the drivers to their offending, as well as information about community-based services and solutions.



Below are the key statistics:



- Women accounted for 22% of all self-harm incidents in prison in 2021, despite representing only 4% of the total prison population in England and Wales.
- There were 3,206 women in prison on Friday 29 July 2022.
- Women were sent to prison on 4,932 occasions in the year to March 2022 — either on remand or to serve a sentence.
- 97 women have died in prison in England and Wales since 2011. 37 of these deaths were self-inflicted.
- There was a 7% increase in the rate of self-harm incidents in women's prisons in the year to March 2022.
- 76% of women in prison report problems with their mental health.
- It is estimated that nearly 60% of women who offend have experienced domestic abuse.
- An estimated 17,000 children are affected by maternal imprisonment each year.

### **Office of National Statistics. Domestic abuse victim services, England and Wales: 2022**

ONS have published a briefing on the available services for domestic abuse victim-survivors in 2022. It found that demand for domestic abuse victim services generally continued the increasing trends seen in the year ending March 2021. However, Crime Survey for England and Wales data showed no significant change in the number of victims who had experienced domestic abuse compared with the year ending March 2020. Further analysis of all domestic abuse data will be published later this year.

Below are some key findings:

- In the year ending March 2022, the National Domestic Abuse Helpline delivered 50,791 support sessions through phone call or live chat; similar to the previous year which was affected by the coronavirus (COVID-19) pandemic.
- The total number of calls received by Welsh Women's Aid's Live Fear Free Helpline increased by 18.1% to 35,491 in the year ending March 2022.
- The ManKind Initiative responded to a total of 2,230 calls across England and Wales in the year ending March 2022; a 2.5% decrease compared with the previous year.
- The number of refuge bed spaces has increased in recent years in England to 4,332 in 2022 but remains 23.2% below the minimum number of bed spaces recommended by the Council of Europe; only London and the West Midlands exceeded the minimum recommended bed spaces.
- In the year ending March 2021, 61.9% of referrals of women to refuge services in England were declined and 40.2% of referrals of women in Wales were declined; the main reason in England being because of a lack of capacity to support survivors and in Wales because the refuge was unable to meet survivor support needs.



- The number of cases discussed at multi-agency risk assessment conferences (MARACs) in England and Wales increased by 5.6% to 114,067 in the year ending March 2022, compared with 108,036 in the year ending March 2021.

### **UK Research and Innovation. How the COVID-19 lockdowns affected the domestic abuse crisis**

An Economic and Social Research Council-funded study analysing the introduction and lifting of lockdowns on domestic abuse has found that restrictions kept victims in abusive relationships for longer.

Between April and June 2020 of the COVID-19 pandemic, there was a 65% increase in calls to the National Domestic Abuse Helpline compared to the first three months of that year.

Lockdown restrictions appeared to increase the severity of abuse and made it difficult for victims to leave or seek help.

The study identified key findings, including:

- the pandemic lockdowns highlighted the pre-existing domestic abuse problem.
- restrictions kept victims in abusive relationships for longer.
- domestic abuse continued as lockdowns lifted and COVID-19 restrictions eased.
- whilst ex-partner abuse decreased, current partner and family abuse increased.
- domestic abusers used the lockdown to intensify or conceal their violence, coercion and control.

The study made recommendations, which were later used to inform police policy and procedure:

- look beyond lockdown-induced spikes and dips in domestic abuse reporting.
- respond to the bigger picture of a long-term rise and gendered pattern in domestic abuse.
- when lockdowns lift, anticipate and prepare for high-risk situations resulting from pent-up separations of victim-survivors from abusers.
- police officers must have the knowledge and professional curiosity to recognise ongoing patterns of abuse.
- officers must not be too quick to assume domestic incidents are one-offs caused by pandemic circumstances.
- prepare for the consequences of the worsening negative impact of domestic abuse on victim-survivor mental health by providing adequate services and support.