



# CordisPulse

## May 2023

Welcome to May'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 was a busy month for the team at Cordis Bright:

- We published a [suite of reports](#) from the Changing Futures programme evaluation on behalf of the Department for Levelling Up, Housing and Communities. Changing Futures is a £64 million initiative between the UK Government and The National Lottery Community Fund. It seeks to test innovative approaches to improving outcomes for people experiencing multiple disadvantage across 15 areas in England from 2021 to 2025.
- We uploaded to our website a [recording of our recent webinar on domestic abuse perpetrator programmes](#). We hope that this may be of particular interest to those involved in commissioning, designing and delivering responses to domestic abuse, and we look forward to engaging in further discussions and continuing to develop our knowledge and understanding of this important area.

As well as Cordis Bright resources, this Pulse highlights a range of other important reports and briefings. Scroll down for further information. 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).

From May 2023, the Cordis Pulse will be sent from an updated email address: [research@news.cordisbright.co.uk](mailto:research@news.cordisbright.co.uk). To ensure you continue to receive the Pulse direct to your inbox, please add this to your safe-senders list. Thank you.

Best wishes,

Dr Stephen Boxford



## 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.

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## Cordis Bright News

### Welcoming our new team members: Dr Kathryn Lord

Cordis Bright is growing our team and we're excited to be joined by four new Principal Consultants. This month, we'd like to introduce you to Dr Kathryn Lord.



Kathryn joined Cordis Bright from the University of Bradford, Centre for Applied Dementia Studies. Kathryn is an experienced mixed-methods researcher, specialising in improving the care, service provision and outcomes for older people, particularly those affected by dementia and the health and social care workforce who serve them. Her work has been funded by many different organisations including the Alzheimer's Society and the National Institute for Health and Care Research. Kathryn has particular expertise in relation to:

#### **Co-design and testing of interventions**

Kathryn has successfully worked in partnership with people affected by dementia, health and social care professionals in the co-design of a number of psychosocial and training interventions. Subsequently, she has designed and conducted feasibility and randomised controlled trials and process evaluations of these interventions aimed at assessing their effectiveness and implementation into practice.

#### **Improving the care and support for people affected by dementia**

Kathryn has a proven track-record in managing and delivering large, multi-site research projects, working with a diverse range of stakeholders across care homes, home care, voluntary, primary and secondary care sectors. Her work improving the care and support for people affected by dementia includes projects aimed at improving post-diagnostic support, exploring ways to best support family carers, encouraging individuals to maintain independence at home and improving end of life care in care homes.

#### **Workforce training and development**

Kathryn has developed and delivered both virtual and face-to-face training for health and social care professionals across a variety of topic areas. Examples of recent work include training for home care workers whose clients are living with dementia; training for palliative care clinicians in navigating ethics and gatekeepers and supporting hospital based teams to conduct mental capacity assessments.

Kathryn says:

*“My goal is to support organisations to bring about real-world change and make a positive difference to society. A real privilege and passion of my work is a commitment to the involvement of those with lived experience. I am particularly*



*interested in how we can use innovative methodological approaches to address the challenges services and providers face”.*

If you would like to discuss further, please don't hesitate to contact Kathryn on [kathrynlord@cordisbright.co.uk](mailto:kathrynlord@cordisbright.co.uk)

## **Evaluation of the Changing Futures Programme**

The [Department for Levelling Up Housing and Communities](#) (DLUHC) has recently published a suite of reports from the Changing Futures programme evaluation, which is being delivered by Cordis Bright and our partners [CFE Research](#), [Revolving Doors Agency](#) and [University of Sheffield](#).

- [Baseline report](#).
- [Trauma-informed approaches to supporting people experiencing multiple disadvantage: a rapid evidence assessment](#).
- [Frontline support models for people experiencing multiple disadvantage: a rapid evidence assessment](#).
- [Feasibility study: final report](#) and [annex](#).

Changing Futures is a £64 million initiative between the UK Government and The National Lottery Community Fund. It seeks to test innovative approaches to improving outcomes for people experiencing multiple disadvantage (defined as experience of a combination of some or all of homelessness, mental health challenges, contact with the criminal justice system, substance misuse and domestic abuse). The programme is running in 15 areas across England from 2021 to 2025.

The objectives of our evaluation are to:

- Provide evidence on whether (and why/how) Changing Futures has made a difference to individuals who experience multiple disadvantage.
- Provide evidence on whether (and why/how) Changing Futures has made a difference to how public service systems operate, including considering how systems-level changes affect the way services operate and are delivered and experienced by people who experience multiple disadvantage.
- Assess the value for money of the programme and make recommendations on the most effective use of any additional resources going into this area in the future.

These reports set out the baseline position at the start of the programme and the evidence underpinning some of the approaches being taken in Changing Futures areas to supporting people experiencing multiple disadvantage. DLUHC has also published the feasibility study carried out by our team to inform the design of the evaluation. Since these reports were produced, we have been undertaking fieldwork and data analysis, and a further report on the progress made so far by the programme will be available in the Summer.



## Domestic abuse perpetrator programmes webinar

Cordis Bright recently hosted a webinar for over 90 stakeholders to explore what works in commissioning, designing and delivering domestic abuse perpetrator programmes (DAPPs). Stakeholders included those from local authorities, NHS, Police and Crime Commissioners, voluntary and community sector organisations and academic institutions.

Speakers including Hannah Nickson (Director, Cordis Bright), Dr Stephen Boxford (Director and Head of Research, Cordis Bright) and Professor Darrick Joliffe (Professor of Criminology, University of Greenwich) presented on the need for DAPPs; what works in the design and delivery of DAPPs and next steps for improving the evidence base about what works and for whom to support perpetrator interventions.

The webinar drew on the speakers' extensive experience in research and evaluation to support domestic abuse service provision, including major studies Cordis Bright has delivered as part of the Home Office's Domestic Abuse Perpetrator Research Fund 2020-2021 and 2021-2022, as well as our evaluations of domestic abuse perpetrator programmes for Police and Crime Commissioners and the Department for Education.

We are delighted to share [recordings](#) from the event and invite you to share them with anyone involved in commissioning, designing and delivering responses to domestic abuse, including programmes for perpetrators.

If you are interested in connecting with us to discuss potential collaboration opportunities, please email us at [info@cordisbright.co.uk](mailto:info@cordisbright.co.uk).



## Adult Social Care and Health

### Reports

#### Department of Health and Social Care. Hewitt Review: an independent review of integrated care systems.

The review covered ICSs in England and the NHS targets and priorities for which ICBs are accountable, including those set out in the government's mandate to NHS England. It identified six key principles for ICBs to thrive and deliver:

- collaboration within and between systems and national bodies;
- a limited number of shared priorities;
- allowing local leaders the space and time to lead;
- the right support;
- balancing freedom with accountability;
- and enabling access to timely, transparent and high-quality data.

Some key recommendations included:

- Fewer central targets set by the government and NHS England, and the involvement of systems in the development of national policies.
- Enabling a shift towards upstream investment in prevention.
- Multi-year funding and alignment of budget and grant allocations across different government departments.
- Payment mechanism flexibility for ICSs.
- Defining accountabilities so that national support and intervention in providers should be exercised 'with and through' ICBs as the default arrangement.
- Data about performance within an ICS should be shared with ICSs themselves.
- CQC and ICSs should work together to develop a long-term approach to system inspections and ensure that CQC develops the capabilities and skill sets needed to support successful development of ICSs.
- Reconsider Running Cost Allowance cut (the further 10% cut in ICBs' RCA scheduled for 2025/26, before the 2024 Budget).



## **Department of Health and Social Care. Adult social care system reform: next steps to put People at the Heart of Care**

The Department of Health and Social Care has published a policy paper outlining how they plan to ensure good quality, personalised and accessible care. It specifies how £700 million will be spent to invest in the following areas:

- improved access to care and support
- recognising skills for careers in care
- driving digitisation and technology adoption
- data and local authority oversight
- support to enable people to remain independent at home
- encouraging innovation and improvement
- joining up services to support people and carers

## **Association of Directors of Adult Social Services. Time to act: A roadmap for reforming care and support in England**

The Association of Directors of Adult Social Services have developed a roadmap setting out actions needed to progress in ten broad 'areas for action':

- Reimagine care the support with people who draw on it
- Improve assessment and care planning to put people in the lead
- Community capacity for wellbeing and prevention
- More people live at home or in a place they call home
- Better support for carers
- Join up care and support for fulfilled lives
- More accessible and affordable for everyone
- Diverse and sustainable providers, focused on outcomes
- Harness the potential of digital technology
- Redesign and reward the workforce

These were identified through a review of actions proposed over the past 10 years in policy reports and independent reviews looking into innovative and promising practices across England for reforming and improving care and support.



The actions are split into seven groups:

- **Co-producing local plans** – including ensuring diverse housing options for older and disabled people are included in local / neighbourhood plans; and mapping p local assets and needs to inform plan for building and developing community capacity.
- **Training and development** – including shifting mindsets away from “provision” to co-production; and supporting person-centred care planning and self-directed support.
- **Improving assessment and care planning** – including streamlining processes to reduce waiting times; and avoiding unfair/unreasonable assumptions about carer capacity within assessment processes.
- **Working in partnership** – including building links between social care, public health and population health across Integrated Care Systems (ICSs); and rebuilding capacity in intermediate care with NHS discharge funding.
- **Improving choice and shaping provision** – including implementing and extending the Home First approach, so more people get care at home; and investing in the growth of micro providers.
- **Widening access** – including measuring and sharing data on unmet need; and making better use of Disabled Facilities Grant funding and ensure consistent access to aids and adaptations.
- **Improving work in care and support** – including supporting staff to work in integrated, more autonomous, place-based teams; and giving the lowest paid care workers an uplift in pay.

The report also includes a more detailed breakdown of the long-term and short-term actions for each of the 10 ‘areas of action’.

### **Local Government Association. National summary report of the employer standards survey for registered social workers 2022/23.**

Local Government Association has published a report outlining the key findings from their annual survey employer standards survey. This survey received 16,000 responses from 140 organisations, including registered social workers, occupational therapists and non-registered social care professionals.

The compares the findings with those from the previous year’s survey (2021) and summarises some key findings that have emerged from the responses. These include:

- A positive response to questions around the ‘effective workforce planning systems’ work standard (using effective workforce planning systems to make sure that the right resources are available to meet current and future service demands).



- Dissatisfaction with continuing professional development (providing the time and opportunity for social workers to learn, keep up to date and critically reflect on the impact this has on their practice).
- Unchanged perception (from 2021) of safe caseloads and work allocation (ensuring employees do not experience excessive workloads, resulting in unallocated cases and long waiting times for individuals).

### **Department of Health and Social Care. Assistive technology research and development work: 2021 to 2022.**

This report consolidates and describes all the research that the government has funded to improve equipment that enables independence or wellbeing of disabled and older people.

### **Tools and Guidance**

#### **The Health Foundation. Five principles for implementing the NHS Impact approach to improvement in England**

This report describes five guiding principles that should inform implementing the NHS Impact approach to improvement at provider, ICS and national level to maximise the chances of success in the current climate:

- Set the right pace for sustained improvement, especially in the light of the fact that NHS trusts with the strongest improvement track records have taken five years or more to implement their improvement strategy.
- Set expectations in ways that build commitment and create opportunities for honest conversations between partners.
- Enable learning across systems.
- Build capability at provider and ICS level to navigate and reconcile competing priorities.
- Align national policy around the NHS Impact approach to improvement.

#### **NHS England. Urgent and emergency care improvement guides.**

A series of 'urgent and emergency care improvement guides' have been designed for providers and systems to consider embedding as good practice to reduce ambulance handover delays.

The learnings cover:

- the flow of patients within hospitals from emergency services to wards,
- streaming patients into the most appropriate services,



- and standardising operational processes to be as efficient as possible.

### **NHS England. Primary care commissioning assurance framework.**

This framework is intended to provide clarity on NHS England's expectations on how ICBs will provide assurance to NHS England that they are exercising the delegated functions safely, effectively and consistently within legislation regulations and statutory guidance. It also sets out the information that will be collected as part of the oversight of commissioning functions.

### **NHS England. National framework and operational guidance for autism assessment services.**

NHS England has published guidance intended to help integrated care boards deliver improved outcomes in all-age autism assessment pathways. This includes a national framework with ten principles for autism assessment services and guidance about applying these principles throughout the commissioning cycle: These principles are that an autism assessment offer should always be:

- ethical
- evidence based
- respectful
- delivered by an appropriately skilled multidisciplinary workforce
- a comprehensive, coherent offer
- accessible
- co-designed by clinicians and people who access the services
- based on shared and current conceptualisation of autism
- transparent
- described in, and informed by, national statistical data.

It also includes operational guidance, intended to guide strategic decision making about the range of autism assessment service that should be provided in each area.

### **NHS England. Looking after your team's health and wellbeing guide.**

This guide supports any team that is seeking to improve the health and wellbeing of members of the team, through a culture change approach. It is for all teams working in health and care, inclusive of all team forms and functions, across healthcare, primary care, social care and voluntary sectors.



Inspired by the NHS health and wellbeing framework, this guide has been co-designed with colleagues across health, social care and voluntary sectors.

### **NHS England. Co-production resource toolkit.**

NHS England has published an [introduction](#) to co-production, a [literature review](#) about co-production and a [resource guide](#), all within a co-production resource toolkit.

The introduction examines how co-production has been used in health and care settings to date, what good co-production would look like, and how these resources have been developed, while the literature review examines the available evidence on how co-production is used, what makes it successful, and what challenges/barriers exist to its deployment in care settings. Finally, the resource guide examines what co-production is, the design of a co-production model and how it can be used in care in future.

### **Public Health Wales. Public health outcomes framework dashboard.**

First published in March 2016, the purpose of the Public Health Outcomes Framework is to help understand the impact which individual behaviours, public services, programmes and policies are having on health and wellbeing in Wales.

Key findings include:

- The number of females aged between 19-24 years in education, employment and training steadily increased by around 10% between 2011 and 2017 and has since remained stable.
- Suicides in Wales are three times higher for males than females, and twice as high in the most deprived areas, compared to the least.
- The gap between the least and most deprived areas in Wales, for premature deaths from non-communicable diseases, has been increasing in recent years, and is now almost two and half times greater in the most derived areas, compared to the least.
- Deaths from road traffic injuries are three times more likely among males than females.
- Trends in emergency admissions for hip fractures suggest the rate has been falling over the last 12 years
- Teenage conceptions continue to fall at a steady rate in Wales.

The Public Health Wales Outcomes Framework is produced on behalf of Welsh Government and was developed in the context of other national strategies and frameworks that seek to inspire and inform action to improve the health of the nation. In particular, it underpins the national indicators for the Well-being of Future



Generations (Wales) Act 2015, by providing a more detailed range of measures that reflect the wider determinants that influence health and well-being.

### **Public Health Wales. School Health Research Network data dashboard.**

Public Health Wales has published an online dashboard based on the findings of a large school-based survey on the health and wellbeing of young people in Wales before and after the pandemic, across different regions.

The following findings were identified from the survey:

- Mental wellbeing has significantly decreased since 2017, particularly among girls.
  - The percentage of girls reporting low mental wellbeing has increased by 9.5% between 2017 and 2021.
- More girls than boys also consistently reported that they feel a lot of pressure from schoolwork in every local authority area in Wales, and this difference has been increasing each year.
- In the most recent data the highest mental wellbeing scores were reported in the Vale of Glamorgan, Swansea and Cardiff and the lowest were reported in Conwy, Torfaen and Merthyr Tydfil.

## **Children and Young People's Services**

### **Reports**

#### **Child Safeguarding Practice Review Panel. Safeguarding children with disabilities in residential settings.**

Last October, the Child Safeguarding Review Panel published a review into very serious abuse to a significant number of children with disabilities and complex health needs at three residential special schools registered as children's homes (Fullerton House, Wilsic Hall and Wheatley House, located in Doncaster and operated by the Hesley Group).

Building on this review, this second report makes nine recommendations for government departments, inspectorates and NHS England that aim at ensuring children with learning disabilities, autism and complex health needs have the support they need to thrive. The recommendations include:

- Department for Education (DfE) and Department of Health and Social Care (DHSC) should develop statutory guidance to require local authorities and integrated care boards (ICBs) to jointly commission safe, sufficient and appropriate provision for children with disabilities and complex health needs.
- Government should commission an integrated strategy for the development of the children's workforce in residential settings - this should include training on the



appropriate use of physical restraints and restrictive interventions and their authorisation.

- Government should ensure all children with disabilities and complex health needs have access to independently-commissioned, non-instructed advocacy.
- Systems for the early identification of safeguarding risks in residential settings should be strengthened through an enhanced role for host local authorities and ICBs in the oversight of residential settings in their area.
- DfE and DHSC should revise the regulatory framework for residential settings and immediately establish arrangements for joint inspection by Ofsted and CQC of residential settings for children with disabilities and complex health needs.
- National leadership and investment by providers is urgently required to address the longstanding challenges in recruiting, retaining and developing a skilled workforce in residential settings.

### **Association of Directors of Children's Services (ADCS). An alternative vision of Regional Care Cooperatives.**

In this paper, published following the government's response to the Independent Review of Children's Social Care, ADCS says that the government should focus on increasing the number of children's homes run by voluntary organisations rather than creating regional care cooperatives (RCCs) to solve an ongoing sufficiency crisis.

It quotes figures from the Local Government Association (LGA) and Department for Education which find that in 2021, voluntary agencies owned 4% of children's homes compared with 17% in 2016.

The paper criticises plans for the creation of RCCs across England which would see local authorities work together within regions to commission children's home and foster care placements.

### **Children's Home Association. State of the Sector survey.**

Key findings in relation to fees include:

- The average weekly minimum price charge has risen 11% from £4,180 in May 2022 to £4,637 in May this year.
- One in five providers held prices in 2022, compared with more than a third the previous year. Only one respondent reported reducing fees.

- The average maximum charge has increased more markedly, by 17%, from £5,070 to £5,937 over the same time frame.

### **What Works for Early Intervention and Children's Social Care. Social Workers in Schools: implications for policy and practice.**

Based on a large randomised controlled trial, the report concludes that a scheme placing social workers in schools does not reduce children's need for statutory social care services.

In addition, when the costs of the programme, schools' referrals to children's social care and children's social care interventions for pupils were taken together, the average was higher in intervention schools (£245,000 per 1,000 pupils per year) than controls (£210,500). As a result, researchers concluded that the scheme was not cost-effective.

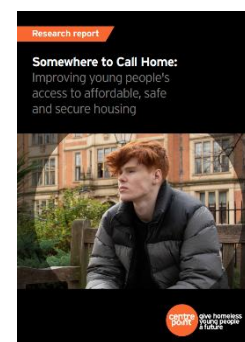


The results came despite the role being generally well-received by the social workers themselves, school staff and students. Most pupils interviewed who had had direct involvement with the programme were positive, reporting that they trusted the social worker and that the practitioner understood them better than any other member of school staff.

### **Centrepoint. Somewhere to Call Home: improving young people's access to affordable housing.**

This report concludes that vulnerable young people are being pushed into homelessness by overcrowding and lack of safety in local authority housing. It includes recommendations such as:

- Incentivise the development of more social housing, especially one bedroom and studio accommodation.
- DLUHC should support the development of innovative solutions to the housing crisis, such as Centrepoint's Independent Living programme.
- DLUHC should create clearer guidance detailing the statutory responsibilities of local authorities to prevent resources scarcity leading to gatekeeping (participants identified that some local authorities were increasingly rationing access to services).
- Provide under 25s living independently with the same Universal Credit rate received by over 25s.
- Local authorities should work with supported accommodation, schools and social care to develop co-ordinated approaches to promoting confidence and capacity building before young people transition into independent accommodation.



## Briefings

### Education Policy Institute. The impact of the Nationality and Borders Act on the educational outcomes of refugee and migrant pupils.

The summary outlines potential challenges for young people in education and identifies the following guidance:

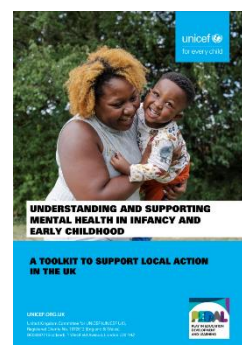
- Improve English Language Assessment to ensure that pupils with English as an additional language (EAL) have access to appropriate learning materials and are supported in their language acquisition.
- Invest in continuing professional development for teachers, teaching assistants and senior leadership teams.
- Include supporting refugee and migrant pupils in Initial Teacher Training.
- Reach out to the community to build trust.
- Develop smoother processes for admitting midyear arrivals and older pupils.
- Build a culture of inclusion.
- Focus on educational attainment, not only providing a safe and welcoming environment.
- Prioritise person-centred approaches, rather than a one size fits all policy, for such a heterogenous group of children and young people and amplify their voices and experiences.

### UNICEF UK. Understanding and supporting mental health in infancy and early childhood.

UNICEF UK and the University of Cambridge's Centre for Research on Play in Education, Development & Learning (PEDAL), have developed a resource to support local areas in a shared understanding of mental health in infancy and early childhood.

The toolkit aims to:

- Help partners to develop a deeper, shared understanding of mental health in infancy and early childhood, and the factors that influence it.
- Develop whole-system responses to ensure babies and young children are mentally healthy now, and are supported to develop the skills they need to continue to be mentally healthy throughout their lives.





- Provide resources, signposting, and conversation guides to support constructive local discussions, decisions and action about the needs of babies and young children in their area, and what more might be done.



## Criminal Justice

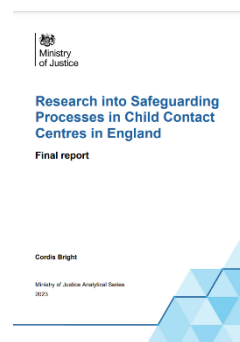
### Reports

#### **Ministry of Justice. Research into safeguarding processes in Child Contact Centres in England.**

Cordis Bright carried out a significant review for the Ministry of Justice of Safeguarding Processes in Child Contact Centres in England, the report for which has now been published.

It provides a broad overview of current processes, as well as views on their effectiveness and six key recommendations to improve current provision:

- Introduce robust, mandatory safeguarding and domestic abuse training for all contact centre staff and volunteers.
- Ensure robust, system wide approaches to risk assessment and risk management, including the provision of specialist support for parents/carers and children.
- Establish processes to centre the voice and experience of the child and parent/carer at all stages of parental involvement.
- Establish mechanisms to support and develop the role of contact centres in multi-agency risk assessment at a local level.
- Support greater exchange of learning and good practices, to improve consistency across contact centre practices and policies.
- Review funding and investment into contact centre provision, to ensure locally accessible and affordable provision across England.



#### **Youth Justice Board for England and Wales. Enhanced case management evaluation: phase one report**

This report considers the implementation of enhanced case management (ECM) as well as the impact on practice and children's and practitioner's perceptions of outcomes in youth justice services (YJSs) in four pilot areas: Bristol, North Somerset, Bath and North-East Somerset and South Gloucestershire.

As this report is only on Phase one, there are limitations to conclusions drawn, however several key reflections were identified in regard to ECM's implementation and perceived impact:

- There is promising evidence to suggest that ECM is associated with improvements in children's justice and non-justice psychosocial outcomes.
- Further embedding of trauma-informed practice in YJSs and in partner agencies is a long-term outcome of the Theory of Change. Given that ECM has influenced case managers' practice with all children and not just those in the ECM cohort,



there is also evidence of the potential benefits of wider adoption of trauma-informed practice in YJSs

- The findings are broadly in line with the two previous evaluations of ECM. These evaluations showed that the ECM approach led to changes in the practice of YJSs and partner agencies, which in turn led to improvements in a range of outcomes for children.
- Psychology provision and senior level buy in were central to ECM's effectiveness.
- There is a need to clarify the roles of key professionals delivering and overseeing ECM.
- It should be considered how children's and families' feedback can be incorporated into ECM.

### **Ministry of Justice. Evaluating the Building Better Relationships programme: Feasibility study for an impact evaluation of proven reoffending**

This report explores the feasibility of conducting a quantitative impact evaluation of the Building Better Relationships (BBR) programme on rates of proven reconvictions. BBR is a moderate-intensity cognitive-behavioural programme for adult men convicted of an intimate partner violence (IPV) offence.

The report suggested that due to the results of Phases 1 and 2, together with the sample size analyses, provide evidence that an impact evaluation is feasible, with sufficient sample sizes to be able to detect an intervention effect.

However, several methodological concerns were also identified that make a reoffending impact evaluation challenging. These include not being able to account for the quality of programme delivery in the evaluation, which has been shown to be important to reduce reoffending.

Given the time and resources required to deliver evaluations, the report concluded that an impact study would provide limited operational insight until the methodological issues could be resolved.

### **Youth Justice Board for England and Wales. Understanding ethnic disparity in reoffended rates in the youth justice system**

The findings for this research are split into two parts, [a child and practitioners perspectives report](#) and an [analysis of reoffending data report](#).

The former includes the following findings:

- Nearly all children interviewed had been excluded from school prior to, or as a direct result of their first offence.
- Poverty and social class were key issues highlighted by both practitioners and children that influence offending and reoffending rates. These background factors



contribute to a system in which ethnic minority children were overpoliced but under protected.

- Children involved in crime are more commonly treated as adults – especially those from ethnic minority backgrounds – which can lead to a lack of safeguarding.
- A lack of diversity among the police and courts system was felt by many interviewed to underline systemic racial bias.
- Building strong, trusting relationships with children was viewed as a prerequisite to delivering effective interventions.
- A shortage of wraparound services such as Child and Adolescent Mental Health Services and employability support was identified as a potential driver for reoffending.
- The lack of information for children navigating the youth justice system is reported to be a driver of ethnic disparity in reoffending rates. This is exacerbated by negative experiences of police custody and inadequate legal representation as reported by many children.

The report also included several recommendations, including the following:

- exclude children from education only as a last resort;
- prioritise funding for local services aimed at children;
- offer online tutoring for excluded children;
- provide weekly allowances for children at risk of reoffending;
- standardise intelligence collection;
- increase diversity within the system;
- amplify the voices of youth justice practitioners.

The analysis of reoffending data included the following findings:

- A very strong link between practitioners' assigning a higher initial assessment of the risk of reoffending (YOGRS), risk of serious harm (ROSH) and actual higher rates of reoffending.
- The type of crime influences the likelihood of reoffending, with those undertaking fraud and forgery much more likely to reoffend than others.
- A strong link between either being in care or having been in care and higher rates of reoffending.



- A close link between lower levels of reoffending and positive attitudes on learning and employment, and similarly a link between less reoffending and positive perspectives on parenting, family and relationships
- Those children from a Black or Mixed background are, respectively, 20% and 16% proportionally more likely to reoffend compared to children from a White background, after the above contextual factors (such as YOGRS and attitudes to learning and employment) have been taken into account.

### **Home Office. Quantitative Analysis of Domestic Homicide Reviews October 2020 – September 2021**

This report summarises information from Domestic Homicide Reviews (DHRs) for the 12 months from October 2020. It includes findings on the victims and perpetrators as well as comparison with previous reports. These findings include:

- 77% of the victims were female and 23% were male. For perpetrators, 89% were male and 10% female.
- For 68% of the victims, the perpetrator was a partner or ex-partner. Within these relationships 29% were partners who had separated or were separating from the perpetrator.
- 32% of the victims had a family relationship with the perpetrator and, of these, half the victims were parents.
- 58% of victims had vulnerabilities. One third of the vulnerabilities was mental ill-health, for 27% it was problem alcohol use and for 18% illicit drug use.
- 36% of victims had been the target of an abuser before.
- Aggravating factors were recorded in 61% of the reviews. Of these, coercive control was the largest and financial control second.
- 60% of perpetrators where information was given were recorded as having a previous offending history.
- 55% of perpetrators were known to agencies as abusers. Of these agencies 44% were the Police, 18% Probation, seven percent Children's Social Services and four percent Adult Social Care.
- The proportion of perpetrators where mental health issues have been identified increased from 31% in the 2019-20 report to 60% in the 2020-21 report.
- In the 2020-21 reports 40% of perpetrators were being supervised or managed by an agency in the previous report this was 15%. Some of the change may come from improvements in the data recorded.

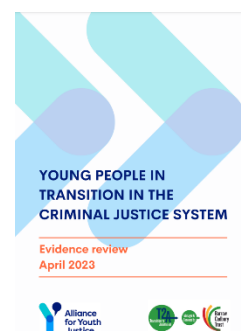
### **Ministry of Justice. Blended Advice and Access to Justice.**

The report identified the following key findings:

- There is no ‘one size fits all’ model for blended advice provision.
- The incorporation of new communication methods into the advice process has created several challenges in terms of exacerbating resource constraints, the ability to forward-plan, as well as increased burdens in terms of workload and wellbeing.
- Clients emphasised several benefits of blended advice, including increased accessibility and flexibility, with clients able to access advice at a time and in a format that suits them, as well as improved confidence and autonomy within the advice process due to being able to choose for themselves how to receive advice.
- Face-to-face interactions will always be needed by some clients.
- In some circumstances, positive use of blended advice models can be associated with certain client characteristics, such as those living in remote areas, younger age groups, or those with mobility-related disabilities. However, there is some evidence to suggest that blended advice models may have the opposite effect in other circumstances, such as clients with mental health problems and other kinds of disabilities, who were frequently at risk of disengaging from services entirely if face-to-face appointments were not offered.
- Further evaluation and investigations are needed to assess the suitability of blended advice models in the future.

### **Alliance for Youth Justice. Young people in transition in the criminal justice system: Evidence Review**

The review suggests that the criminal justice system is less likely to support young people from racial minorities when they transition to adult prisons and services. ‘Adultification bias’ is a major factor in this disparity, with young people from racial minorities perceived as less vulnerable than their white peers. This is despite this group of young people having “greater vulnerability” due to experiences of racism during their childhood.



The report also warns that a lack of trust and confidence in the system is impacting the effectiveness of support for young offenders from racial minorities.

### **HMIC. An inspection of how well the police and National Crime Agency tackle the online sexual abuse and exploitation of children.**

The report includes 17 recommendations aimed at improving the consistency of the police’s approach and the timeliness of their investigations, reducing the availability of child sexual abuse material, and getting better outcomes for children. These recommendations include:


- The National Police Chiefs' Council lead for child protection should work with chief constables and chief officers with responsibilities for regional organised crime units to introduce regional collaboration and oversight structures to support the Pursue board.
- Chief constables, the director general of the National Crime Agency and chief officers with responsibilities for regional organised crime units should make sure they have effective data collection and performance management information.
- The National Police Chiefs' Council lead for child protection, the director general of the National Crime Agency and the chief executive of the College of Policing should jointly agree and publish interim guidance for all officers and staff dealing with online child sexual abuse and exploitation.
- The Home Office and relevant National Police Chiefs' Council leads should consider the scope of the Transforming Forensics Rape Response Project to assess the feasibility of including online child sexual abuse and exploitation cases in it.
- Chief constables in England should satisfy themselves that their forces' work with schools is consistent with the national curriculum and National Crime Agency educational products on online child sexual abuse and exploitation.

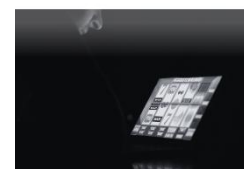
### **Howard League for Penal Reform. Commission on Crime and Gambling Related Harms.**

The UK's first-ever inquiry into crime linked to gambling has published a final report that calls on the government, health bodies and criminal justice agencies to take a strategic approach to tackling the issue.

It calls for a "greater central drive" from the Home Office and Ministry of Justice, together with more funding to be provided locally and regionally, to develop a treatment and support infrastructure through the police, courts and prisons, which would help to reduce crime and enable more people to access services.

The Commission also recommends the creation of a national board to address crime linked to gambling – including senior representatives from the police, police and crime commissioners, prosecution, courts, probation, prisons, public health, victims' advocates, and representation from those with lived experience of gambling-related harms related to crime.

 Commission on Crime & Gambling Related Harms



The Commission on Crime and Gambling Related Harms  
Final Report