Appendix A

2020-2025
Lancashire Serious
Violence Strategy

Lancashire
VIOLENCE REDUCTION
NETWORK

Foreword

Serious violence affects every member of our Lancashire communities. The impact can be life changing, whether you are a victim, you know a victim or you have witnessed an incident personally.

Nationally, serious violence has doubled and across Lancashire we are committed to focussing on the impact of violence and violent behaviour. We know that the financial cost of violent crime to Lancashire is £346 million (2017-2018) but the human impact is much greater. Therefore, whilst we recognise the importance of enforcement I am keen to shift our mind set towards early intervention and prevention. Only by doing this will we be able to change our culture and leave a lasting legacy to support the communities of Lancashire to remain and feel safe from serious violence.

My team and I am absolutely committed to understanding the 'causes of the causes' of violence, developing trauma informed practice for our multi-agency teams and colleagues, and working with local people to develop trauma informed communities.

As the Head of Lancashire Violence Reduction Network, I am very proud to present the Serious Violence Strategy for Lancashire, Blackpool and Blackburn with Darwen.

We have undertaken a lot of work to understand the needs of our communities through producing our pan-Lancashire strategic needs assessment. This has been the foundation of this strategy and has helped us to understand which direction we should take. Our needs assessment has helped us to focus work in our schools, within hospital accident and emergency departments and police custody suites.

We are sponsoring parenting support programmes and community projects to try to alleviate some of the impact of child poverty, deprivation and unemployment across many areas in Lancashire. We cannot do any of this work without working closely with communities and learning from people who have lived experiences, therefore, I want to ensure that this is a strong focus of our work going forward.

We need to build upon our strengths, which was why I was really pleased to see the strategy has recognised some of the fantastic work currently happening across our local areas and partnerships. But, we also understand that there is a lot of work to do. The strategy will help us to develop and co-produce our approach together with our communities, our third sector and our statutory partners. Only by working in this way can we truly achieve our joint vision of keeping the communities of Lancashire safe and feeling safe from serious violence.

Finally, thank you to all of the young people, their families, and professionals that have helped us to develop this strategy. My team and I are looking forward to designing and delivering a comprehensive work plan with the assistance of our colleagues and communities to complement this strategy.

Many thanks,

Sue Clarke
Detective Chief Superintendent
Lancashire Constabulary
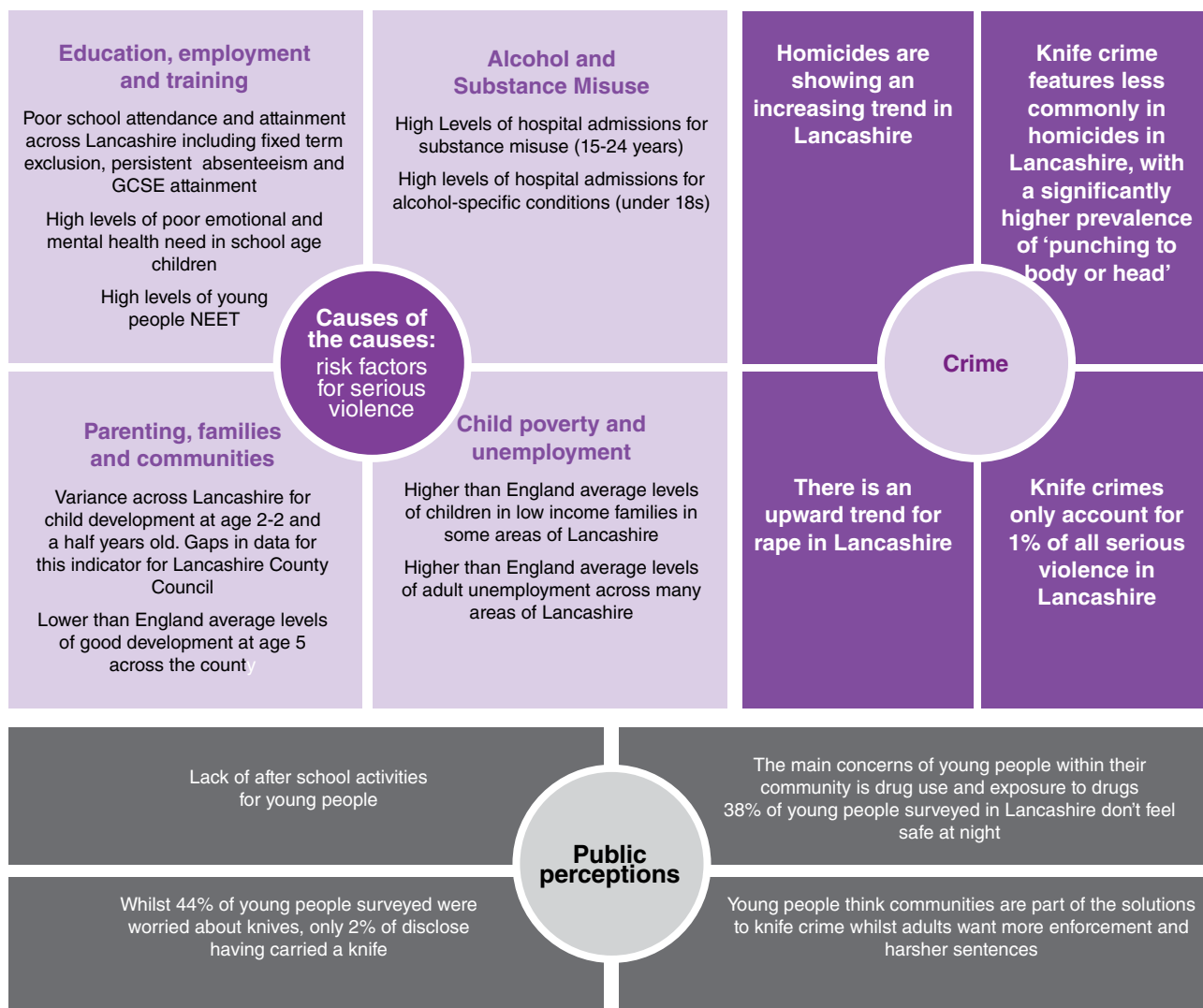
Executive summary

Serious violence has devastating effects across all of our communities and destroys lives with intergenerational effects. At a national and local level it is a priority for government bodies and local communities as we all have a role to play to tackle serious violence and stop the needless loss of lives.

In July 2019, the Government announced Home Office funding to assist 18 police force areas to set up violence reduction units (VRUs). This was supported by a new national public health duty[1] for serious violence, which covers the police, local councils, local health bodies, education representatives and youth offending services. The duty places statutory responsibility on relevant services to work together by sharing data, intelligence and knowledge in order to understand and address the root causes of serious violence, including knife crime. It also requires organisations to target interventions to prevent and minimise the impact of violence.

The Lancashire Police and Crime Commissioner received a £1.16 million (April 2019 to March 2020) grant to establish a violence reduction unit based on local violent crime data. As criteria for the first year of delivery, a needs assessment and strategy have been completed and made the following key findings (figure 1).

Figure 1

Education, employment and training

Poor school attendance and attainment across Lancashire including fixed term exclusion, persistent absenteeism and GCSE attainment

High levels of poor emotional and mental health need in school age children

High levels of young people NEET

Alcohol and Substance Misuse

High Levels of hospital admissions for substance misuse (15-24 years)

High levels of hospital admissions for alcohol-specific conditions (under 18s)

Causes of the causes: risk factors for serious violence

Parenting, families and communities

Variance across Lancashire for child development at age 2-2 and a half years old. Gaps in data for this indicator for Lancashire County Council

Lower than England average levels of good development at age 5 across the county

Child poverty and unemployment

Higher than England average levels of children in low income families in some areas of Lancashire

Higher than England average levels of adult unemployment across many areas of Lancashire

Homicides are showing an increasing trend in Lancashire

Knife crime features less commonly in homicides in Lancashire, with a significantly higher prevalence of 'punching to body or head'

Crime

There is an upward trend for rape in Lancashire

Knife crimes only account for 1% of all serious violence in Lancashire

Lack of after school activities for young people

The main concerns of young people within their community is drug use and exposure to drugs
38% of young people surveyed in Lancashire don't feel safe at night

Public perceptions

Whilst 44% of young people surveyed were worried about knives, only 2% of disclose having carried a knife

Young people think communities are part of the solutions to knife crime whilst adults want more enforcement and harsher sentences

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[1] https://www.gov.uk/government/news/new-public-health-duty-to-tackle-serious-violence

The Lancashire VRU has been named Lancashire Violence Reduction Network (VRN) and this strategy will deliver by prioritising action, leadership and system mobilisation in four priority areas (what we will do):
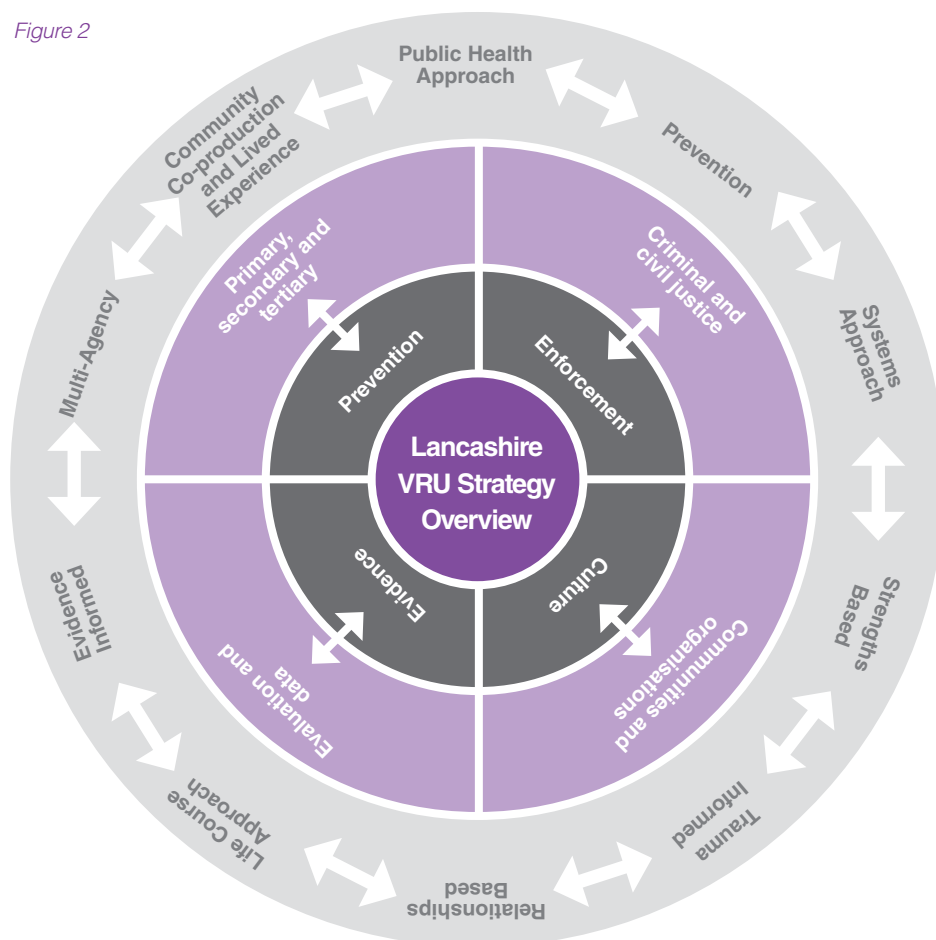
1. Prevention of serious violence
2. Enforcement
3. Cultural transformation and workforce development
4. Evidence: data and evaluation

Through delivery against these four priorities, the VRN and those signed up to this strategy will aspire and strive to ensure that 10 key principles become the 'golden threads' of action (how we'll do it). The strategy and associated principles are intrinsically linked and interchangeable as per the diagram below.

Our vision is for every person living or working in Lancashire to feel and be safe from violence and violent crime[2]. We will achieve this through the four aforementioned priority areas (see figure 2 below).

Figure 2

Contents

1.0 Introduction to the Lancashire Violence Reduction Network

1.1 Background

In July 2019, the Government announced Home Office funding to assist 18 police force areas to set up violence reduction units. This was supported by a new national public health duty[3] for serious violence to include the police, local councils, local health bodies, education representatives and youth offending services. The duty places statutory responsibility on relevant services to work together by sharing data, intelligence and knowledge in order to understand and address the root causes of serious violence, including knife crime. It also requires organisations to target interventions to prevent and minimise the impact of violence.

The Lancashire Police and Crime Commissioner received a £1.16 million (April 2019 to March 2020) grant to establish a violence reduction unit based on local violent crime data. In year one, the Home Office grant stipulation includes the following expectations:

• Produce a problem profile and multi-agency long term strategy for reduction in serious violence;

• Offer leadership and strategic coordination of the local response to serious violence;

• Support a multi-agency public health approach to prevent and tackle serious violence;

• Focus on early intervention;

• Adopt the World Health Organization's definition based on data intelligence done with and for communities.

Preventing rather than reacting to serious violence has both human and economic benefits for individuals, families, communities, services and society as a whole. This strategy has been co-produced across the public, private and third sectors, reflecting a system wide commitment to tackling serious violence. This strategy documents the vision beyond the first year from 2020-2025 and includes the long, short and medium term strategic aims of the Lancashire VRN.

1.2 The Lancashire vision

Our vision is for every person living or working in Lancashire to feel and be safe from violence and violent crime[4] through four key priorities: prevention, enforcement, culture and developing an evidence-base of what works.

1.3 Our definition of serious violence

In April 2018, the then Home Secretary released the national Serious Violence Strategy[5], which acknowledges that there are many different types of serious violence, each with different drivers. There is no agreed inclusion or exclusion criteria for the crime types which make up 'serious violence'.

The Home Office funding criteria allows local violence reduction units to develop their own definition of violence and for the inclusion of domestic abuse and violence (DAV) as well as violence that occurs in the public realm. Taking a public health approach, the following approach to serious violence/violence will be adopted across Lancashire.

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[3] https://www.gov.uk/government/news/new-public-health-duty-to-tackle-serious-violence

[4] Felson, R. B. (2009) Violence, Crime and Violent Crime. International Journal of Conflict and Violence, 3(1), 23-39. Felson (2009) differentiates violence, violent crime and non-violent crime as harm doing; both harm doing and rule breaking; and deviance respectively.

[5] HM Government (2018). Serious Violence Strategy: April 2018. London: Home Office

'Violence is the intentional use of physical force or power, threatened or actual, against oneself, another person, or against a group or community that either results in or has a high likelihood of resulting in injury, death, psychological harm, mal-development, or deprivation.'

World Health Organization (WHO) definition of violence (2020)

At the inaugural meeting of Lancashire Violence Reduction Network's leadership board, data was presented to contextualise the local picture. Lancashire's definition of serious violence was agreed to contain the following crime types and crime descriptors. In making this decision the group used Home Office guidance and high harm values (severity) based on the Cambridge Harm index (see figure 3):

Figure 3

Homicide	**Knife crime**	**Gun crime**
Assault resulting in injury	**Rape**	**Robbery**
Aggravated burglary	**Domestic abuse and violence (DAV)**	**Child exploitation (sexual and criminal)**

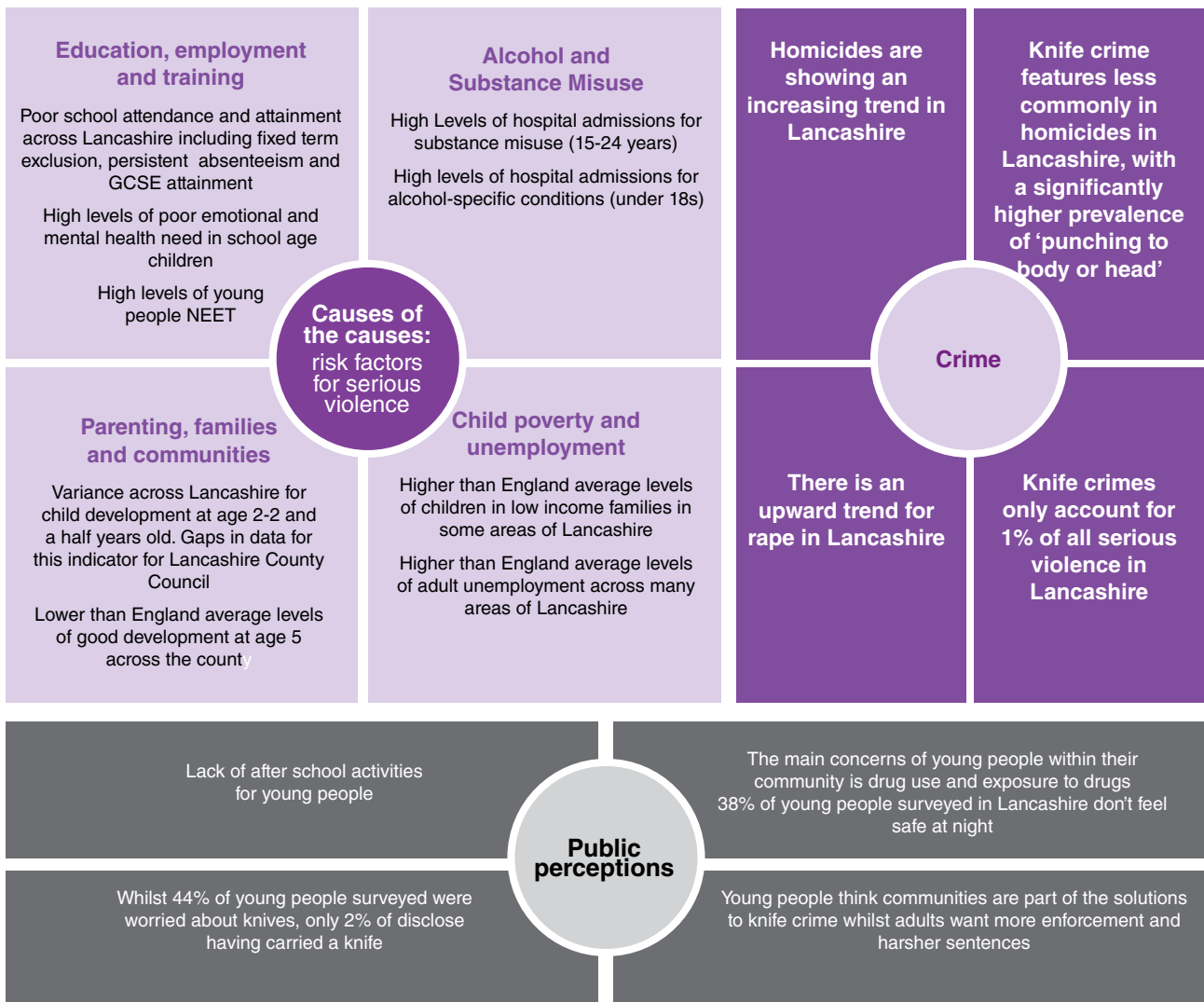## 1.4 What does Lancashire's needs assessment data tell us?

Violence and fear of violence can affect every member of Lancashire's communities and occurs in multiple scenarios, contexts and situations. It is not bound by any restrictions as it crosses cultures, race, gender, socio and economic statuses. For example, hospital admission rates for violence are around five times higher in the most deprived communities than in the most affluent (Bellis et al 2012).

Nationally, violent offences typically make up just 1% of all crime recorded by the police. However, they cause some of the most serious harms to individuals, communities and societies. It is clear that there is a strong link between drugs and serious violence and the related harm and exploitation from county lines operations. The changing drugs market is identified as one of these drivers of the recent increase in violent crime. Therefore, Lancashire Constabulary and its partners are taking a range of actions to tackle county lines and the misuse of drugs and the links with violent crime in Lancashire.

Key findings from the Lancashire Serious Violence Strategic Needs Assessment are in figure 5 below.

Figure 4

Causes of the causes: risk factors for serious violence

Education, employment and training

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Homicides are showing an increasing trend in Lancashire

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Public perceptions

Lack of after school activities for young people

The main concerns of young people within their community is drug use and exposure to drugs 38% of young people surveyed in Lancashire don't feel safe at night

Whilst 44% of young people surveyed were worried about knives, only 2% of disclose having carried a knife

Young people think communities are part of the solutions to knife crime whilst adults want more enforcement and harsher sentences

As suggested in the needs assessment, we will be taking the World Health Organization public health approach to serious violence to develop and embed the evidence base within our implementation plans going forwards. This will enable us to celebrate what is currently working in Lancashire and share best practice across the system (see figure 5).

1.5 How will the VRN achieve its aim?

The Lancashire VRN will achieve its aim through prioritising action, leadership and system mobilisation in four priority areas (what we will do):

1. Prevention of serious violence

2. Enforcement

3. Cultural transformation and workforce development

4. Evidence: data and evaluation

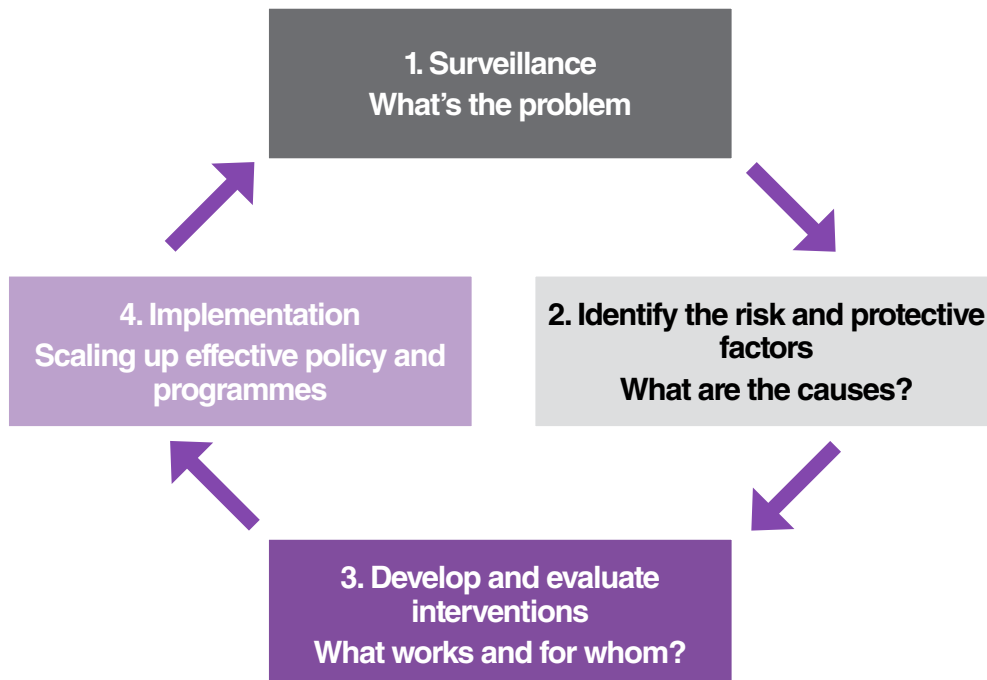Through delivery against these four priorities, the VRN and those signed up to this strategy will aspire and strive to ensure that 10 key principles become the 'golden threads' of action (how we will do it). The principles are detailed in section 2 of this strategy.

The implementation plans, which will sit alongside this strategy, will be regularly reviewed to ensure that delivery against the priorities remains appropriate.

1.5.1 Proportionate universalism

Like many population health concerns, the incidence of serious violence is affected by social inequalities (Lancashire Serious Violence Needs Assessment, 2019). In order to reduce the gradient of inequalities, Sir Michael Marmot describes the importance of proportionate universalism: doing something for everyone (a universal offer) but more for those who need it the most (targeted offer)[6]. Ensuring that there is a population, universal approach alongside targeted intervention ensures the maximise benefits for society as a whole (figure 6) and reduces inequalities in serious violence.

Figure 5

1. Surveillance
What's the problem

2. Identify the risk and protective factors
What are the causes?

3. Develop and evaluate interventions
What works and for whom?

4. Implementation
Scaling up effective policy and programmes

Proportionate universalism

Figure 6

Equality

The assumption that **everyone benefits from the same supports.** This is equal treatment

Equity

Everyone gets the support they need (this the concept of "affirmative action"), thus producing equity

Justice

All 3 can see the game without supports or accommodations because **the cause(s) of the inequity was addressed.** The systematic barrier has been reduced

Through this approach, we will consider primary prevention opportunities at a universal level, targeted interventions for those at risk of being drawn into serious violence and to prevent re-offending by those who have already becoming involved. We will take this a step further through our cultural transformation priority. A contextual violence reduction and public health approach means not just looking at violence as an isolated incident. It does not mean excusing criminality, but it does mean that in order to genuinely change behaviour we need to recognise the context and influences that impact on individuals at significant points in their life; acknowledging that no individual operates in a vacuum but is both part of and influenced by a huge range of other contexts.

1.5.2 Interdisciplinary team

The Lancashire VRN strategy will be driven and delivered by an interdisciplinary team incorporating (but not limited to): education, youth justice, public health, health, police, probation, local government (including child and adult social care), criminal justice, third sector and victim services. Working closely with academics, health professionals and our communities, the VRN aims to provide a much richer insight into serious violence and how to best target resources to more effectively tackle the issue.

The approach to violence in Lancashire requires an integrated, system wide, multi-dimensional response recognising that the criminal justice enforcement led approach, whilst vital, is just one avenue to be pursued. It will include a broad range of activities encompassing public protection, identifying and supporting vulnerable people, building personal and community resilience and hope, and achieving joint aims of a healthy community environment. This will be a key role of the VRN to identify, promote, coordinate and develop opportunities for system leaders to explore and utilise.

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[6] Marmot, M. (2010) Fair Society, Healthy Lives. The Marmot Review.

1.5.3 Delivery, governance, interdependencies and how the VRN interacts with the wider system

The violence reduction network's leadership board has been established to provide oversight and governance of the programme and to ensure that links are in place with other current work programmes addressing similar or complementary issues. As detailed in the Government's (2018) Serious Violence Strategy [7], there already exists a number of programmes of work, which interrelate with the violence reduction strategy. Existing statutory arrangements and interdependencies include, for example: community safety partnerships; health and wellbeing boards; criminal justice boards; road safety partnerships; children's safeguarding assurance partnerships and adult arrangements; and youth justice boards.

In Lancashire, there are also many non-statutory, multi-agency governance groups and boards. The delivery and implementation of many elements of the strategy will capitalise on existing local delivery arrangements. Moving forwards, the VRN will continue to map out further interdependencies within the system in order to work together effectively and efficiently, to learn from and support existing arrangements, and avoid duplication. The VRN will work closely with the 11 Lancashire Community Safety Partnerships to deliver against the requirements of the new statutory public health duty for serious violence.

When thinking about violence reduction, extremism (as defined by HM Gov in 2015 as: the vocal or active opposition to British Values including rule of law, democracy, respect and tolerance for different faiths and beliefs, also regarded as extremism are the calls for the deaths of Armed Forces) and hate crime are just inclusions. Both extremism and hate crimes can manifest in violent behaviour and provoke community unrest, retaliation and perceived hostility. In fact, the 'causes of the causes' for these are often similar to serious violence as a whole. The VRN recognises the impact that both hate crime and extremism can have and their interdependency with the wider VRN agenda.

1.5.4 A short, medium and long term delivery plan

The VRN has one-year and five-year work plans which incorporate both violent and knife crime pilot work streams namely parenting, awareness raising, prevention, multi-agency violence reduction, accident and emergency department interventions, Lancashire Divert, prison and prisoner family programmes and family support to exploitation. The longer-term plan will focus on prevention, enforcement, cultural transformation, workforce development, evaluation and data. Full implementation plans will supplement this strategy.

1.5.5 Sustainability

The Lancashire VRN's strategy will have a focus on how to upscale what works and mainstream this once appropriate. This will include developing plans that ensure longevity, accountability, financial sustainability in order to respond to or prevent serious violence. Whilst the strategy recognises that the current funding is not conditional on providing sustainability plans, we will work with partners across the system to mainstream good practice at the earliest opportunity in line with evaluation. We will continually review and evaluate the strategy and implementation.

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[7] HM Government (2018) Serious Violence Strategy. London, HM Government..

2. Ten key strategic principles

The Lancashire VRN strategy and associated delivery programmes are underpinned by a number of key principles (Figure 2). These 'golden threads' are the foundations that we, our partners and the system will strive to underpin our strategic and operational activity.

Whilst these principles will drive the direction of the Lancashire VRN, they are not exhaustive and can be supplemented in the context of locally driven need. It is important to note that these principles are not hierarchical; all the principles outlined are fundamental to the approach of Lancashire's VRN. However, there will be an aspiration to ensure that system leaders sign up to this strategy and the associated principles.

Figure 2
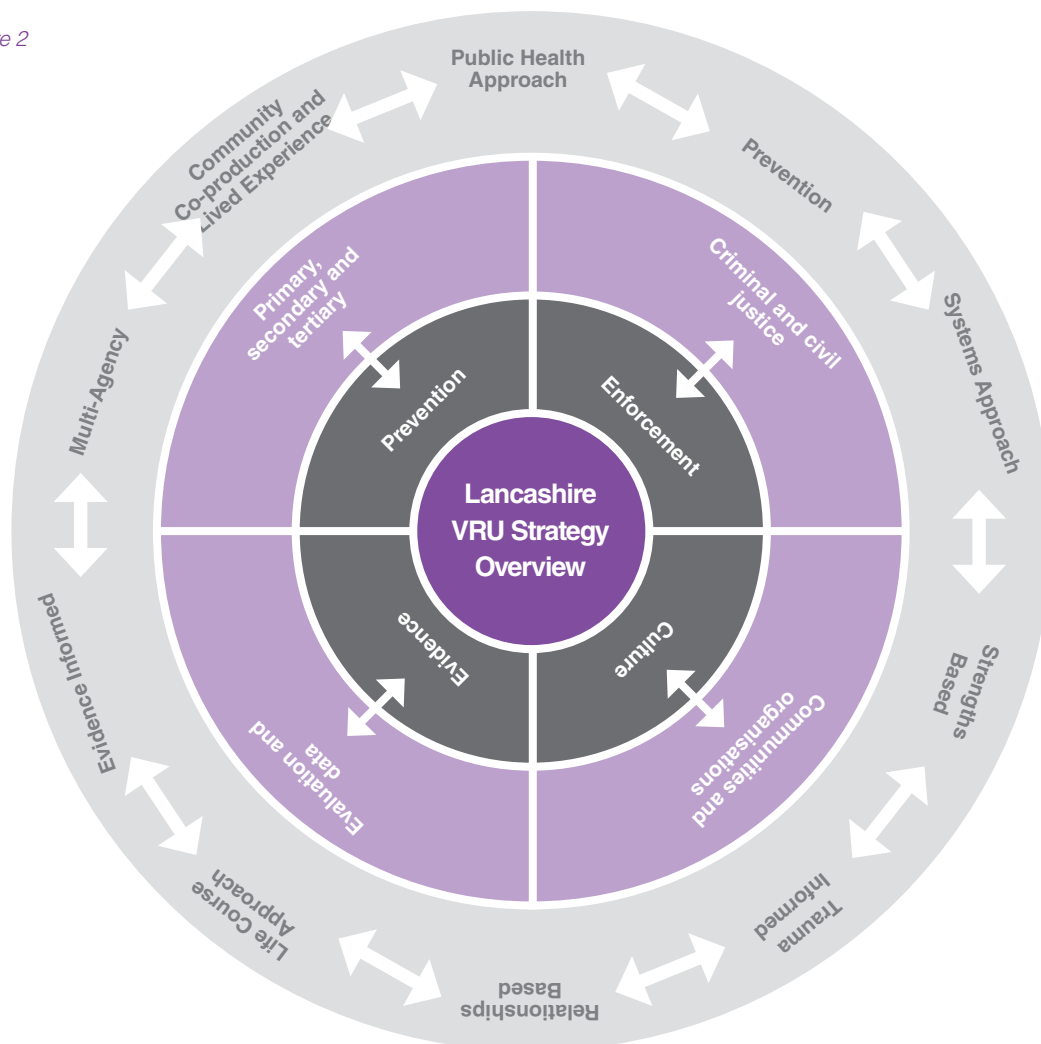
2.1 Principle one: Public health approach

A growing body of evidence tells us that violence is preventable. Since the publication of the World Health Organization's World report on violence and health in 2002 [8], experience, research and intelligence has generated an understanding of the risk factors that contribute to violence, and the tactics, strategies and principles that can be implemented to prevent it. Further, we have a sound knowledge of the impact of violence and those most at risk of being either a perpetrator or victim.
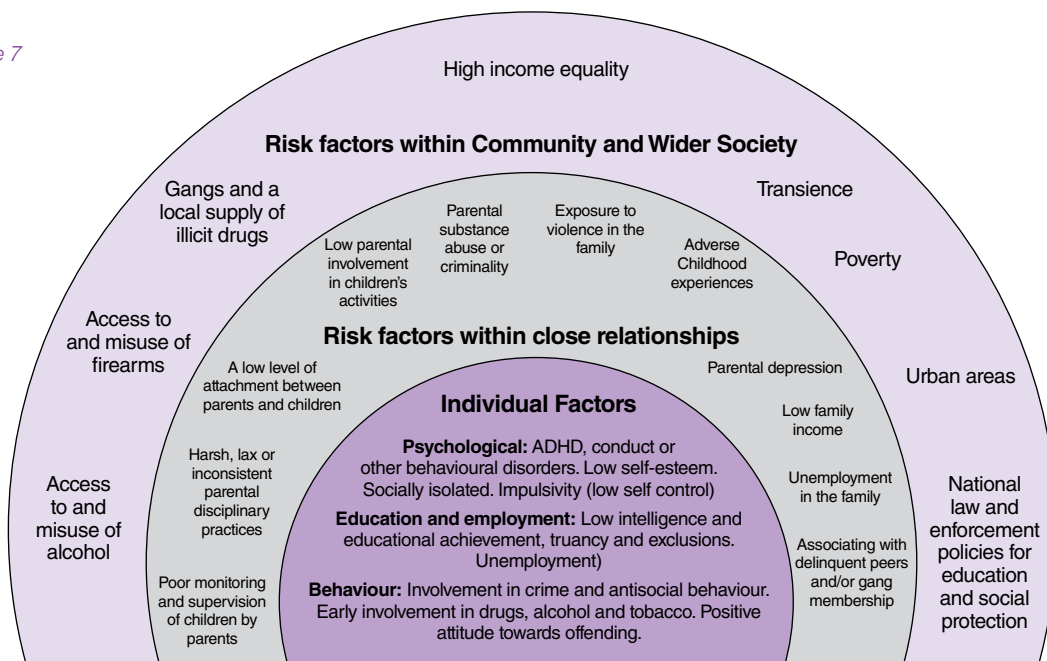
The preventable nature of violence naturally lends itself to a public health approach with a strong focus on the 'causes of causes' [9]. Furthermore, violence reflects many of the other common facets of important public health issues.

There are wide inequalities in the prevalence of violence, with the greatest impacts being felt by the most deprived communities. Further, there is a cyclic nature of violence, meaning, "much like many infections, violence is contagious"[10].

For example, there is a solid understanding that exposure to violence in childhood (amongst other adverse childhood experiences), increases the risk of an individual becoming involved in violence in later life. Adversity in childhood is not deterministic and there are differing views about the appropriate use of the ACE methodology [11]. Finally, there are masses of routine data sources from across a range of partners, which support the implementation of life-course prevention strategies from those at a universal through to a targeted level (see figure 7). The Government's Serious Violence Strategy (2018) advocates for a 'public health approach' (see figures below 8 and 9 opposite), one that seeks to tackle the root causes as well as the immediate symptoms of violence, and that galvanises agencies beyond the police in support of this goal.

Figure 7

High income equality

Risk factors within Community and Wider Society

Gangs and a local supply of illicit drugs

Transience

Poverty

Low parental involvement in children's activities

Parental substance abuse or criminality

Exposure to violence in the family

Adverse Childhood experiences

Access to and misuse of firearms

Risk factors within close relationships

A low level of attachment between parents and children

Parental depression

Urban areas

Individual Factors

Low family income

Psychological: ADHD, conduct or other behavioural disorders. Low self-esteem. Socially isolated. Impulsivity (low self control)

Harsh, lax or inconsistent parental disciplinary practices

Unemployment in the family

Access to and misuse of alcohol

Education and employment: Low intelligence and educational achievement, truancy and exclusions. Unemployment)

Associating with delinquent peers and/or gang membership

National law and enforcement policies for education and social protection

Poor monitoring and supervision of children by parents

Behaviour: Involvement in crime and antisocial behaviour. Early involvement in drugs, alcohol and tobacco. Positive attitude towards offending.

[8] Krug, E.G., Dahlberg, L.L., Mercy, J.A., et al. (2002) World report on violence and health. Geneva: World Health Organization

[8] Dahlgren, G. & Whitehead, M. (1991) Policies and Strategies to Promote Social Equity in Health. Stockholm: Institute for the Futures Studies

[10] Bellis, M.A., Hughes, K., Perkins, C. & Bennett, A. (2012) Protecting people promoting health. A public health approach to violence prevention for England. London: Department of Health

[11] Asmussen, K. Fischer, F. Drayton, E. & McBride, T. (2020) EIF Report: Adverse childhood experiences: What we know, what we don't know, and what should happen next. Early Intervention Foundation

Figure 8

TERTIARY PREVENTION

SECONDARY PREVENTION

PRIMARY PREVENTION

PREVENTION

DATA AND EVIDENCE BASE

CAUSES OF THE CAUSES

PARTNERSHIP

POPULATION

Figure 9

Collaboration

Co-production

COMMUNITY CONSENSUS APPROACH

Counter-narrative

Cooperation in data and intelligence sharing

Further, the social determinants of health or 'causes of the causes', combined with an understanding of approaches to behaviour change suggest that we need to consider interventions across all levels of the socio-ecological model. In terms of prevention or reduction of serious violence, this includes consideration of macro political and policy interventions, environmental design and structure as well as interventions aimed to support those most at risk of violence and primary prevention at population level (Figure 10). Through appropriate Lancashire governance structures, the VRN will attempt to influence and develop local and national macro politics around violence reduction and public health approaches.

2.2 Principle two: Prevention

The Lancashire VRN strategy will focus on the whole spectrum of prevention opportunities available, from preventing the social determinants of serious violence (the 'causes of the causes'), to early identification of those at risk of serious violence and appropriate interventions to address this.

At the far end of the prevention spectrum, we will work with those who have committed serious violence to prevent re-offending, to reduce the harm of crime for victims, families and communities'. This model of prevention is often referred to as primary, secondary and tertiary prevention (figure 11). All partners in the VRN have the opportunity to consider, shape and mould their work, programmes and interventions to ensure that we maximise prevention across this whole continuum.
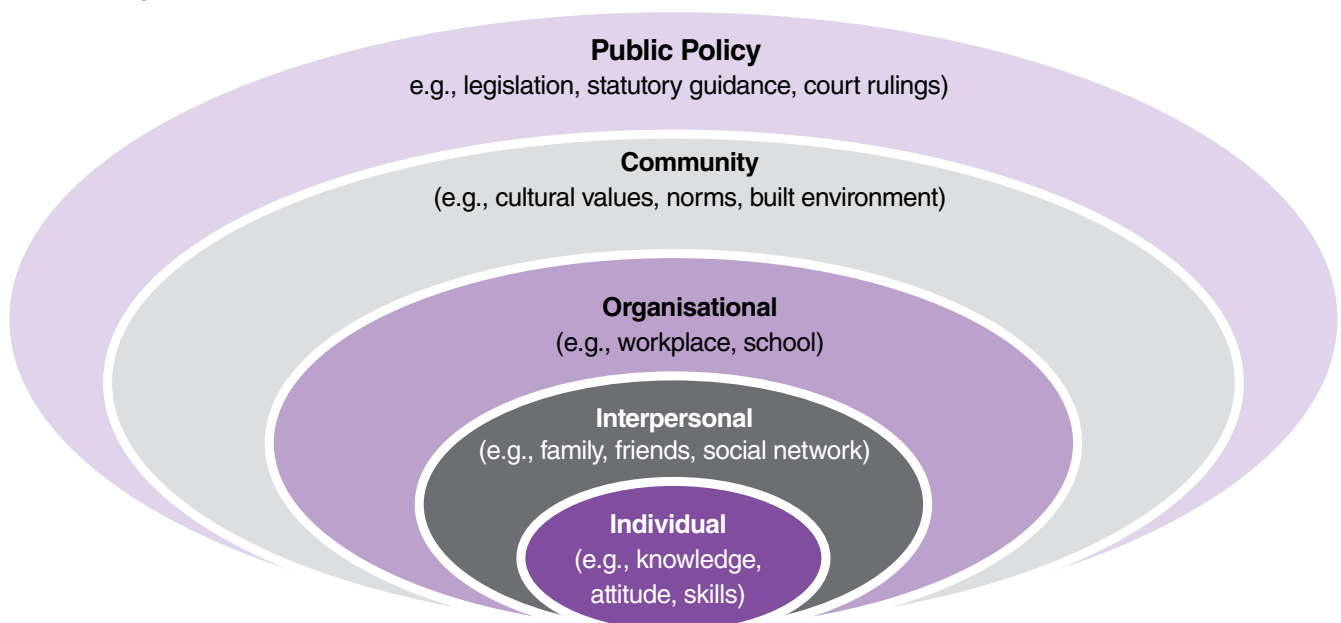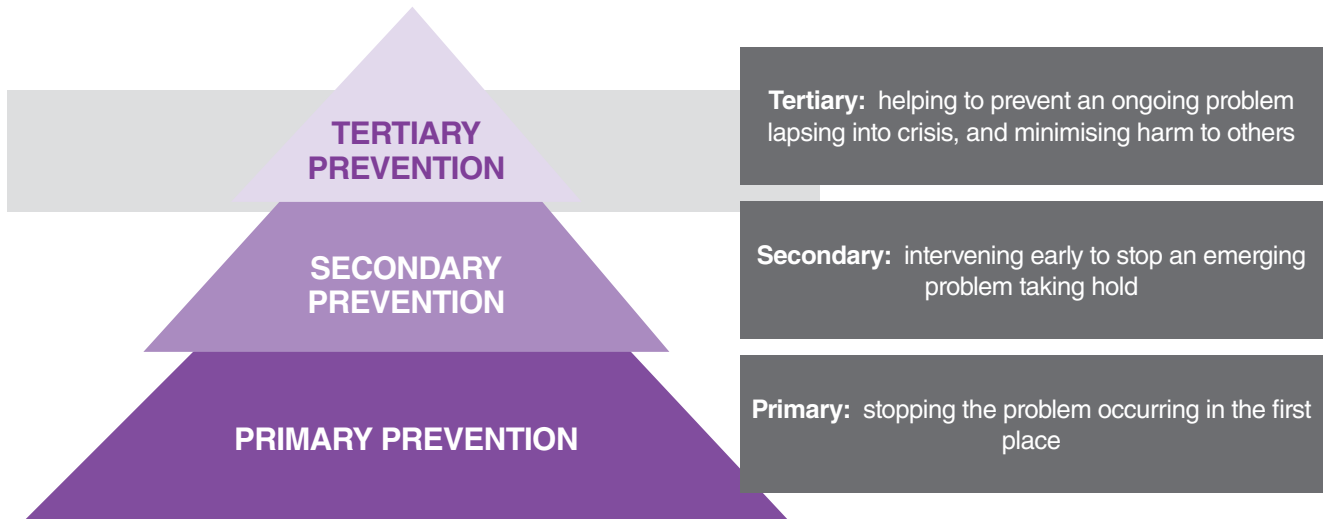
Figure 10

Public Policy
e.g., legislation, statutory guidance, court rulings)

Community
(e.g., cultural values, norms, built environment)

Organisational
(e.g., workplace, school)

Interpersonal
(e.g., family, friends, social network)

Individual
(e.g., knowledge, attitude, skills)

Figure 11

Tertiary: helping to prevent an ongoing problem lapsing into crisis, and minimising harm to others

Secondary: intervening early to stop an emerging problem taking hold

Primary: stopping the problem occurring in the first place

2.3 Principle three: Community co-production and lived experience

Community co-production is about individuals and groups coming together to influence the work of the Lancashire VRN. The following four principles (although there are many more) are critical to putting co-production into action on a continual basis:

1) **Equality:** no one person or group is more important, everyone is equal and everyone has assets to contribute;

2) **Diversity:** we will work extra hard to involve people or groups who are more marginalised;

3) **Accessibility:** ensuring everyone has opportunity to take part (e.g. removing physical barriers and changing our language);

4) **Reciprocity:** everyone should get something out of contributing through a two-way process (e.g. learning, relationships, improved service or payment).

The VRN recognises the need to build upon existing community trust with organisations across the system in order to maximise the potential for community co-production and engagement.

Whilst community co-production involves any person or group - who may or may not have been involved in violence - lived experience is about drawing on the knowledge and understanding people gain when they have experienced violence (either as a victim, perpetrator or both) directly or indirectly. The Lancashire VRN will draw on community and lived experience co-production to plan and develop our approach and work plan.

2.4 Principle four: Whole systems approach

A whole systems approach is based on the idea that if something happens in one part of the system, other parts will also be affected. Another founding belief of systems theory is that it is not the individual elements that are important but the relationships and interactions between the parts, which enable a system to function. One version of a systems approach is the 'Vanguard Method', which uses a 'check-plan-do' cycle to organise, manage and progress work. The Lancashire VRN will adopt the Vanguard Method, as follows:

• **Check:** How the system is currently working;

• **Plan:** Re-design a new purpose and system from the expertise of people who use services;

• **Do:** Implement the plans, evaluate its success and assess the sustainability of the new system.

In order to prevent and reduce violence, we will not complete the three steps once but we will engage in a continual cycle of improvement as we repeat the process over and over again to keep updating the system. We aspire that the VRN strategy is communicated, adopted and delivered with all levels of the system in Lancashire e.g. Communities, frontline practitioners, middle and senior leadership.

2.5 Principle five: Life course approach

Life course and developmental factors are the ecological contexts, experiences, outcomes, and individual factors across the lifespan that increase or decrease the chances that a person will engage in violence[12] . During childhood, a combination of individual characteristics, genetics, social and physical environmental experiences lead to increased risk of violence or development of protective factors, which protect against it. Taking a life course perspective to serious violence will allow the Lancashire VRN to understand the points at which individuals are most likely to be perpetrators or victims of violence. Taken within the wider socio-ecological model, the life course approach allows appropriate targeting of both population and individual programmes (figure 12).

Figure 12

**The life course approach
Life stages**
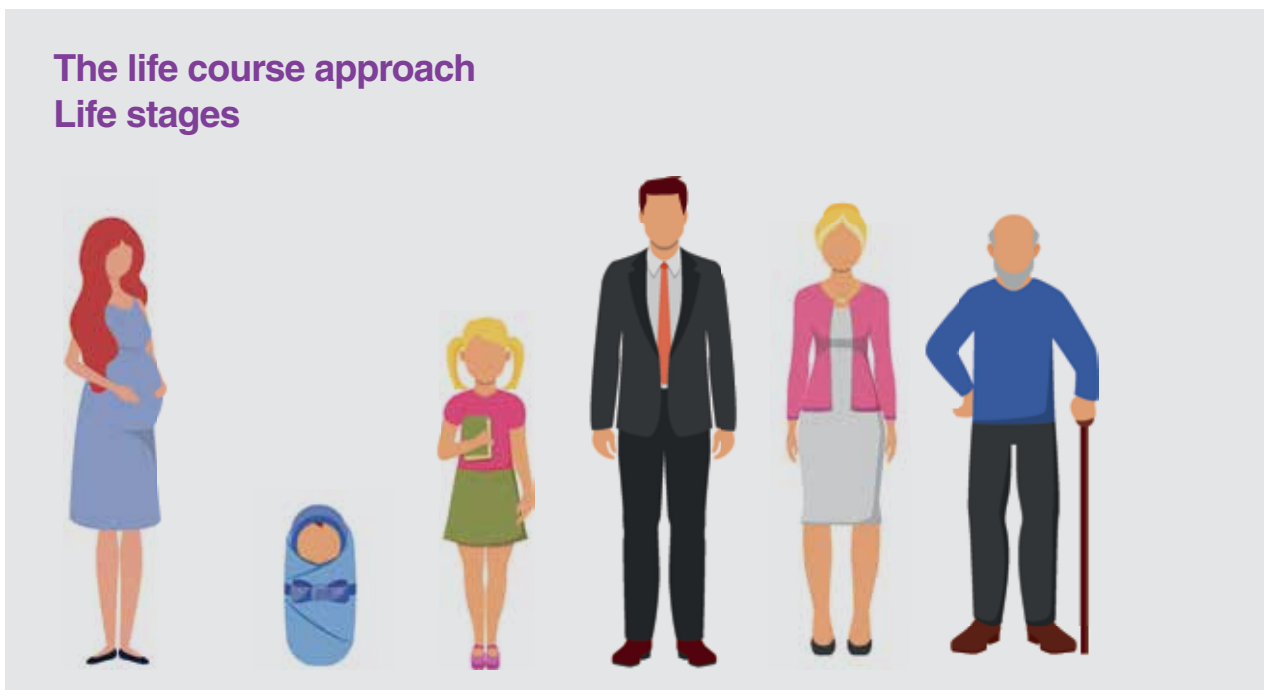
2.6 Principle six: Trauma informed approach and practices

SAMHSA[13] describes individual trauma as:

'An event, series of events of set of circumstances that is experienced by an individual as physically or emotionally harmful or that has lasting adverse effects on the individual's functioning and mental, physical, social, emotional or spiritual wellbeing.'

Trauma is a term that refers to an emotional response to a distressing experience. The Lancashire VRN will adopt a trauma informed approach which:

• Refers to an understanding of trauma;

• Realises the potential neurological, biological, psychological and social impact of trauma;

• Recognises that anyone we come into contact with may have experienced trauma;

• Responds to the impact of trauma;

• Moves aware from blaming and judging people for their behavioural and psychological reactions, which may play out in acts of violence, to recognise that these responses may be a result of trauma;

• Understands that people with a history of trauma may find it more difficult to trust and engage with people, particularly professionals who are often seen to be in a position of power and authority;

• Promotes strengths, protective factors and resilience;

• Recognises the importance of relationships;

• Emphasises the importance of support mechanisms for professionals and families to reduce the impact of secondary vicarious and secondary trauma[14].

2.7 Principle seven: Relationship based approach

Relationships based practice is founded on the argument that relationships are of paramount importance and should be at the heart of all good practice. Physically, emotionally and sexually abusive relationships; emotionally and physically neglectful relationships; interpersonal conflict; relationships breakdown; and bereavement are all examples of traumatic events, which increase the risk of being a victim or perpetrator of violence.

Unsurprisingly, given their importance throughout life, relationships also play a fundamental role in preventing, triggering and responding to violence. Relationships play a pivotal role in rebuilding a sense of safety, trust and self-worth. For these reasons, Lancashire VRN will aim to develop healthy and supportive relationships, to prevent violence and enable people to recover from trauma.

2.8 Principle eight: Strengths based approach

Through a strengths based approach, the Lancashire VRN will work with individuals and communities to draw upon a person's or local area's assets and resources to reduce and prevent violence.

People who are victims of violence may have low self-confidence, feel unworthy or may even feel guilty for being involved in behaviour that is not socially acceptable. Similarly, perpetrators may feel a sense of guilt that they have broken moral standards. Whilst guilt refers to having been involved in wrongdoings ("I have done bad things"), shame is seen as more destructive and long lasting, where an individual actually believes "I am a bad person". Both guilt and shame are emotions, which can prevent people from seeing their own strengths.

Enabling a person to recognise their strengths can be key to changing a person's self-perception and building protective factors. A strengths based approach demands a move away from labelling, blaming, stigmatising or judging people who have been involved in violence, to focus on capitalising on available personal and community assets to enable them to find turning points to live safer and happier lives.

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[12] Blue Shield of California Foundation (2019) Breaking the Cycle: A Life Course Framework for Preventing Domestic Violence. San Francisco, CA: Blue Shield CA Foundation

[13] SAMHSA Substance Abuse and Mental Health Services Administration

[14] Vicarious trauma can occur when a professional's perception of the world becomes distorted as a result of their particular area of work. Secondary trauma is when another person's experience of trauma starts to affect you.

2.9 Principle nine: Evidence informed approach

Lancashire VRU takes an evidence-informed approach. Adopting a research in practice[15] perspective, evidence-informed practice is not only about applying academic research to practice situations. It is a two-way process whereby practice informs evidence and evidence informs practice. Whilst we support, value and aim to embed the use of academic evidence, we do not consider it superior. Instead, we follow a model that brings together various forms of evidence:

• Lived experience and wider community perspectives;

• Professional experience and expertise;

• Local, national and international data;

• Published and grey literature.

We define our evidence-informed approach as a process of integrating evidence-informed interventions with community and professional experiences to reduce violence . Although, we strive to take into consideration "what works" and the "best" evidence, we remain aware that evidence is limited as people, programmes, practices, resources and wider societal factors change, evidence develops and new findings emerge.

Evidence informs us about the impact of an intervention, at a particular point in time, in a particular place, with a particular population. It does not mean that the same programme will necessarily have the same impact or be the "best" approach within Lancashire. Even within Lancashire, different communities will benefit from different interventions. Taking into consideration the limitations to "what works" and "best" evidence - whilst adopting a systems approach - we take into account that:

• **Evidence is constantly evolving:** therefore we need to re-evaluate and adapt our response;

• **There is a need for continual monitoring:** a lack of evidence does not necessarily mean that an intervention is 'ineffective', often this can be for a whole host of different reasons (e.g. a programme is in the early stages of development or has not yet evaluated outcomes). It is therefore fundamental to continue to reflect and monitor programmes.

• **Evidence forms part of a bigger system:** evidence of effectiveness is useful to guide our approach, but the evidence forms part of a larger picture that involves consideration of resources and the needs of different local populations.
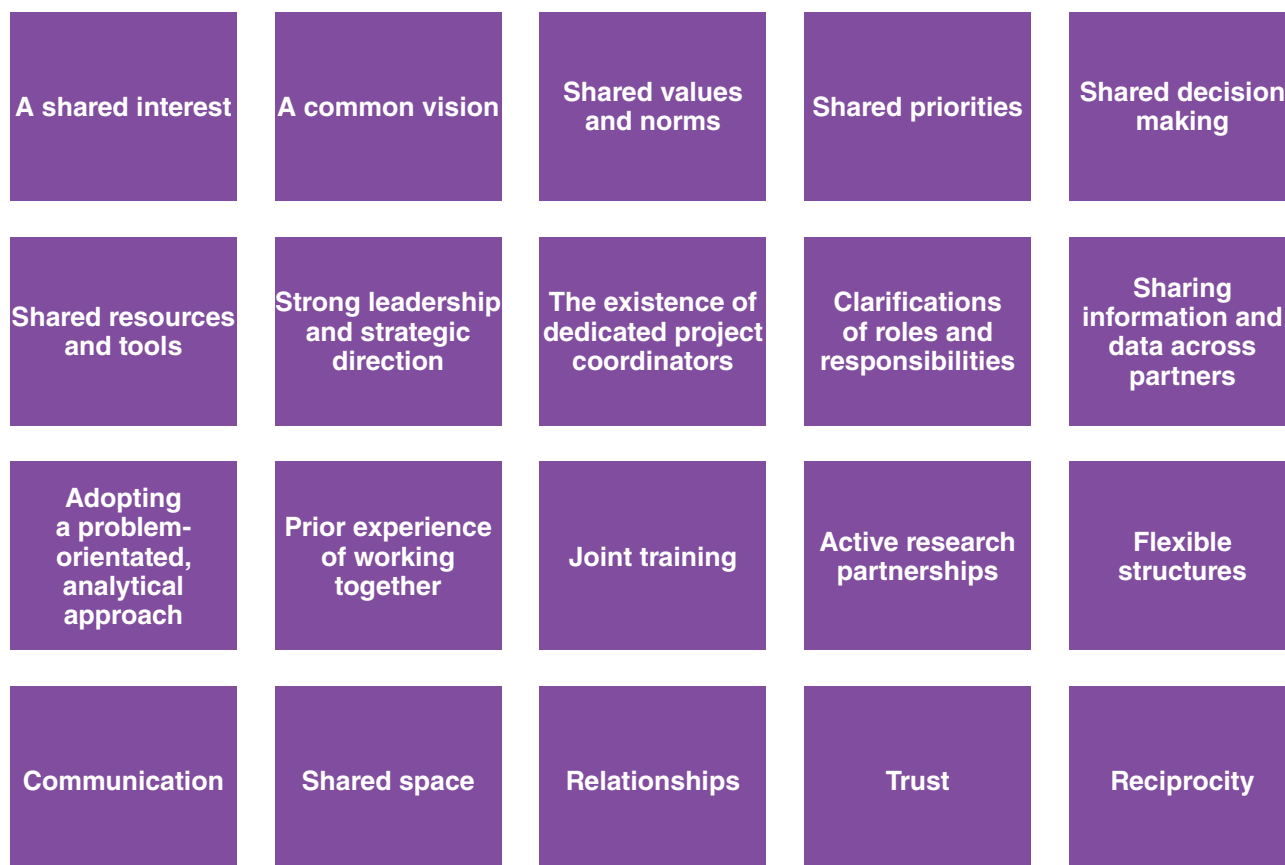
2.10 Principle ten: Integrated approach

'Partnerships enable different people and organisations to support each other by leveraging, combining and capitalising on their complementary strengths and capabilities[17]':

Preventing violence goes beyond the responsibilities, competencies and expertise of any one agency or profession. There is no single cause or solution to violence. As a result, in order to identify where there is a risk of violence, and to respond accordingly, we need to work in collaboration[18] .

A collaborative approach brings stakeholders together from public, private and third sectors – from a broad range of backgrounds and disciplines, across practice and research, at all levels – to jointly develop and take ownership of preventing violence. Our approach in Lancashire moves beyond "multi" agency working, where multiple organisations work in parallel, yet maintain distinctive professional and organisational boundaries. Instead, we advocate an "integrated" approach, which is associated with a greater degree of engagement, interaction and merging of ideas to form new practices.

Lancashire's VRN will challenge traditional organisational structures to: combine and coordinate effectively the contributions of different actors towards a collective and clear understanding of the problems; jointly deliver appropriate interventions[19] ; work in partnership to evaluate impact; and capitalise on different expertise in order to continually learn and adapt [20] . We will work together to build mechanisms associated with effective partnership working [21],[22] including (but not limited to, see figure 12):

Figure 13

A shared interest	A common vision	Shared values and norms	Shared priorities	Shared decision making
Shared resources and tools	Strong leadership and strategic direction	The existence of dedicated project coordinators	Clarifications of roles and responsibilities	Sharing information and data across partners
Adopting a problem-orientated, analytical approach	Prior experience of working together	Joint training	Active research partnerships	Flexible structures
Communication	Shared space	Relationships	Trust	Reciprocity

[15] Broome, J. (2014) 'What does evidence-informed practice look like?', Research in Practice, 29 September [Blog]. Available at: https://www.rip.org.uk/news-and-views/blog/what-does-evidence-informed-practice-look-like/

[16] Reducing violence includes strengthening protective factors and reducing risk factors before violence occurs.

[17] Lasker, R., Weiss, E., and Miller, R. (2001) Partnership synergy: A practical framework for studying and strengthening the collaborative advantage. The Milkbank Quarterly, 79(2), 179-205.

[18] Wilkins, N., Tsao, B., Hertz, M., Davis, R., and Klevens, J. (2014) Connecting the Dots: An Overview of the Links Among Multiple Forms of Violence. Atlanta, National Center for Injury Prevention and Contol, Centers for Disease Control and Prevention.

[19] Crawford and L'Hoiry (2017) Boundary crossing: networked policing and emergent 'communities of practice' in safeguarding children. Policing and Society, 27(6), 636-654.

[20] The work on the VRN will evolve from a central base however learning will be harness locally from within Lancashire, as well as nationally and internationally.

[21] Berry, G., Briggs, P., Erol, R. and van Staden, L. (2011) The effectiveness of partnership working in a crime and disorder context. A rapid evidence assessment. London, Home Office.

[22] Youansamouth, L. (2020) 'Surfing the edge of chaos': An ethnography of police joint working. Unpublished PhD thesis. Lancaster, Lancaster University

3. Priorities

Whilst the principles of this strategy provide a golden thread for the way that the VRN will develop its approach and work programmes, the four priority areas (prevention, enforcement, cultural transformation, including workforce development, evaluation and data) set the plan of action and direction of travel for work programmes 2020-2025.

The initial priority objectives have been designed to address the findings of the strategic needs assessment at the outset of the Lancashire Violence Reduction Network.

The work programmes under these are likely to flex and develop over the period of the strategy in accordance with identified need and evidence base, locally, nationally and internationally. This will also include learning from developing practice within the Lancashire VRN and that of our partners in other VRUs across the UK.

We recognise that the development of a successful VRN, which has significant impact for and with our communities will require us to take calculated risks, undertake pilots and experiments and learn along the way.

2019-2020

Violence Reduction Network - Projects and Workstreams						
Parenting	**Awareness raising and prevention**	**Multi-agency violence reduction**	**Accident and emergency navigators**	**Lancashire Divert Programme**	**Prisoners and prisoner's families**	**Exploitation and family support**
Lead: Hazel Gregory	**Lead: Justin Srivastava**	**Lead: Ian Whitehead**	**Lead: Hazel Gregory**	**Lead: Dave Oldfield**	**Lead: Sue Clarke**	**Lead: Ian Whitehead**
Aim: To identify evidence based programmes which focus on parenting, to reduce intergenerational adversity across the population, maximising resilience for current and future generations	Aim: To adopt a Trauma informed approach across all agencies Aim: To work with children who are at high of missing education to become resilient violence and abuse. *Commissioned services for joint working with the third sector*	Aim: To target families with prevalence of serious violence (including Domestic Violence) where children are involved	Aim: To help stop revolving door of violent injury in our hospitals *Commissioned services for joint working with the third sector*	Aim: To get offenders to charge their behaviour, to reduce the likelihood of them returning to police custody	Aim: To help prisoners understand their own behaviour Aim: to increase the family's wellbeing, assist in reintegration and reduce further offending post release.	Aim: To increase support for individuals and their families who have been victims of exploitation and violence

- Produce a problem profile and multi-agency long term strategy for reduction in serious violence;

- Offer leadership and strategic co-ordination of the local response to serious violence;

- Support a multi-agency public health approach to preventing and tackling serious violence;

- Focus on early intervention;

- Adopt the World Health Organization's definition based on data intelligence done with and for communities.

Lancashire Violence Reduction Network
Development Plan 2020-2025

Prevention	**Enforcement**	**Cultural transformation and workforce development**	**Evaluation and data**

Primary	**Secondary**	**Tertiary**	**Crime**	**Civil**	**Community**	**Partnership**	

Life course approach

- Early years
- Adolescence
- Trauma informed schools
- Lived experiences
- Physical activity

The cause of the causes

- Education
- Employment
- Training
- Alcohol
- Substance misuse
- Poverty

Community engagement/lived experience

- Adolescent pathway activity
- Designated out crime
- Co-production with communities
- Low income

- Knife crime
- Homicide
- Assault by kicking and punching
- Rape
- Organised crime and county lines
- CSE
- Hospital admissions

Communities

Creating trauma informed environment

Workforce

Trauma informed workforce development

Evaluation

- Learning from current workstreams and established practice
- Upscaling where appropriate
- Celebrating success and sharing evidence of what works

Data

- Building multi-agency data sets
- Predictive analytics
- Sourcing new data sets
- Collaboration and new partnerships
- Multi agency info sharing

3.1 Priority 1: Prevention

3.1.1 Aim

To prevent violence and its social determinants.

3.1.2 Objectives

The aim of this priority will be achieved through three levels of prevention:

- Primary prevention: Preventing the problem occurring in the first place. Acting to prevent the 'causes of causes' or risk factors for serious violence. Action to reduce inequalities in the risk factors for violence.

- Secondary prevention: Early identification of risk factors of serious violence. Intervening early when risk factors of serious violence are identified to prevent violence incidents.

- Tertiary prevention: Reducing reoffending or the negative consequences of serious violence.

3.1.3 How will this reduce violence in Lancashire?

The strategic needs assessment identifies priority areas for prevention of violence in Lancashire. These priorities include both for the 'causes of causes' or social determinants of violence, and for specific violence types, victim profile and offender profile. Some of the areas for action may span the three objectives of primary, secondary and tertiary prevention approaches. Programmes of work will be evidence informed. Overall VRN spending will take into consideration opportunities to maximise primary prevention.

Prevention programmes will be developed over the course of the strategy in line with the strategic needs assessment and ongoing understanding of local needs and assets. A full delivery programme and action plan will be developed for each year of this strategy implementation to work alongside existing practice and ethos such as contextual safeguarding.

The following table (table 1) details evidence based prevention programmes either currently being delivered by the Lancashire VRN or partners, or those, which might be considered to meet local, need over the duration of this strategy. Further information about the evidence for these approaches can be found in the detailed Lancashire Serious Violence Needs Assessment. This is not intended to be an exhaustive list for the duration of the strategy, but rather provides examples of programmes that fall into each of the prevention domains (primary, secondary and tertiary). The Lancashire VRN will work in partnership across the system in Lancashire to influence, deliver and support prevention programmes.

Table 1

Primary Prevention	Secondary Prevention	Tertiary Prevention
• **Trauma informed schools** • **Operation Genga prevention activities in schools and communities** • Universal parenting programmes: EPEC • Universal self-defence programmes • Evidence informed interventions to improve school attendance e.g. bullying prevention programmes and financial incentives for adolescents to attend school • PSHE curriculum materials to support learning around violence and vulnerability including Bystander education programmes delivered at high school age • Minimum unit price for alcohol • Universal adolescent activities • Life and emotional skills training • Adolescent friendly communities • 'Designing out' crime: street lighting, public transport, alcohol licensing	• **ENCOMPASS Programme** • **DRD and NFO Panel pilot in Blackpool** • **Operation Genga: Partnership working to identify those at risk of being drawn into organised crime and effective interventions; identifying and addressing vulnerable locations** • Targeted parenting programmes which address parental conflict and couple relationships • A&E Navigators • Diversion activities for adolescents identified as having risk factors for serious violence • Therapeutic approaches for young people at greatest risk of becoming involved in violence • Vocational training for young people at risk of being involved in violence • Multi-agency plans to support and divert those with identified vulnerability • Exploration of opportunities for single record ACE information sharing to aid early identification and prevention opportunities • Stop and search: utilising contacts to identify risk factors of violence and work positively to signpost into preventative diversionary offers	• **Restorative justice** • **Operation Genga: creative and effective use of civil and ancillary orders** • Prisoner family conflict programmes: Strength Inside • Trauma informed Youth Offending Services • DIVERT Programme • Employment programmes for ex-offenders • Working with those with lived experience

Programmes in purple are already in place, black are in development, and those in lilac are aspirational projects that the VRN intends to influence with partner organisations.

3.1.4 Outcome measures

Process and delivery

1. At least 50% of VRN prevention activity delivering primary prevention interventions (both VRN funded and VRN team membership activity)

2. Prevention programmes which span the life course of serious violence

3. Prevention considered as a key interdependency in all other priority areas where appropriate

Prevention programme outcomes

1. All programmes within the VRN influence and delivery will consider how they can demonstrate outcomes which show improvement in the social determinants of health (the causes of the causes), particularly those highlighted as areas of concern or need for Lancashire

2. All prevention activity will provide outcome measures for impact on serious violence incidents

3.2 Priority 2: Enforcement

This VRN strategy places strong emphasis upon the recognition that we cannot enforce our way out of the problem of serious violence. However, enforcement activity remains a component of the overall strategy as a complementary element of the approach.

3.2.1 Aim

To reduce serious violent crime and the opportunity to commit serious violent crime within Lancashire.

3.2.2 Objectives

- To direct proactive operational enforcement activity within hot-spot areas across Lancashire to target serious violent crime.

- By using a problem analysis approach to identify the location, offender and victim will inform multi-agency operational activity.

- To carry out proportionate enforcement activity that is focused on the identified problem profile.

- To develop innovative evidenced-informed multi-agency enforcement activity across Lancashire and use appropriate civil and criminal legislation to do so.

- To maintain the 4P delivery framework of: prepare, prevent, pursue and protect in line with the National serious and organised crime strategy.

- To strengthen the restorative and rehabilitative approach to our enforcement practice throughout Lancashire.

3.2.3 How will this reduce violence in Lancashire?

The primary objective is to reduce serious violence in public places.

It is essential that Lancashire continues to pursue, disrupt and prosecute those who commit serious violent crimes, ensuring an effective policing and criminal justice system response, especially for victims in the future. This strategy's message is that a multiple strand approach is essential to tackling and reducing serious violence. A proactive robust response to law enforcement remains a critical strand within this approach.

Force and regional strategic assessments and serious and organised local profiles have identified new and emerging global threats affecting Lancashire's communities. All this presents a complex demand profile that needs the support of partners at local, regional, national and international level to ensure the government 4P approach is delivered effectively.

The threat of serious and organised violence is often hidden and/or unreported. The most direct harm continues to be through the distribution and supply of controlled drugs, the adverse impact of drugs and vulnerabilities associated with these crimes remains one of the most significant threats within Lancashire. The secondary impact from drug dealing is associated violence and threats, including the use of weapons and firearms and the harm it causes amongst the community. The work of the Lancashire VRN will support key interdependencies with the 'Pursue' activities of the Serious Organised Crime Strategy.

In Lancashire we know that violent crime tends to be concentrated in small areas, usually urban, and by focusing resources and activities on these 'hotspots', evidence shows that crime is reduced not only in

these specific areas but potentially also in the wider geographic area. Hot spot targeting been found to be particularly effective for offences involving violent crime, especially when used in conjunction with problem-oriented partnership approaches.

Lancashire VRN will endeavour to ensure resources with the requisite capabilities and capacity are dedicated to delivering against the strategy. A wider response with co-ordinated use of organisations tools and powers will commission resources from statutory, private and third sector organisations to provide effective enforcement where required to address serious violence through an integrated multi-agency response.

3.2.4 Outcome measures

Our focus will include serious violence that is identified as a key trend in exploitation, domestic abuse, county lines and drug supply.

Primary measures of success at a national level for knife crime are as follows:

• A reduction in hospital admissions for assaults with a knife or sharp object and especially among those victims aged under 25.

• A reduction in knife-enabled serious violence and especially among those victims aged under 25.

• A reduction in all non-domestic homicides and especially among those victims aged under 25 involving knives.

The key serious violence outcome measures include:

• Reduced homicide

• Reduced rape

• Reduced knife crime

• Reduced gun crime

• Reduced violence with injury

• Reduced robbery

• Reduced aggravated burglary

• Reduced domestic abuse

• Reduced child exploitation

• Reduced re-offending for serious violence

• Increase trust and confidence in public service

3.3 Priority 3: Cultural transformation and workforce development

3.3.1 Aim

For Lancashire to be a trauma informed county.

3.3.2 Objectives

The VRN will contribute to this aim by:

• Harnessing and sharing resources and good practice on the implementation of a trauma informed approach;

• Challenging resistance to change;

• Supporting the development of trauma informed practice across Lancashire through a phased approach (see figure 14).

Road map to Trauma Informed Care (TIC)

Figure 14
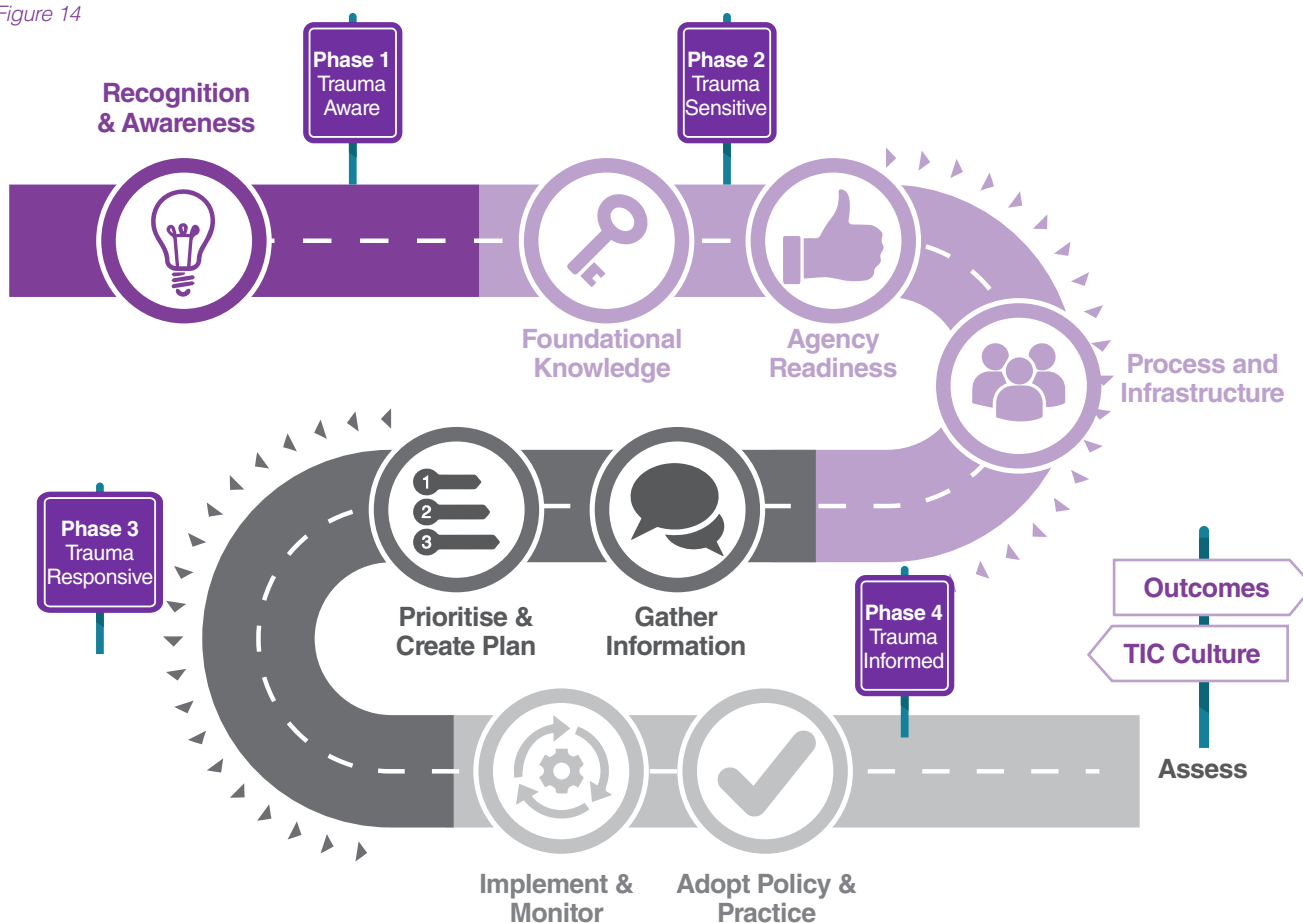
Engage with Agents of Change	Conference/Video Conferences Learning Conversations/ Workshops 1:1 Drop in Sessions Widespread availability of BwD ACEs animation, Resilience Film, Paper Tigers, Language, Hearts & Minds, Culture
CPD for Skill Set Development	Awareness & Informed - Layered Audit Tool Specific CPD for Role Monitor and Evaluate
Reflective Practice & Supervision (Appendices)	Rationale Skill set developed Benefit & Models of good practice Implementation Monitor and Evaluate
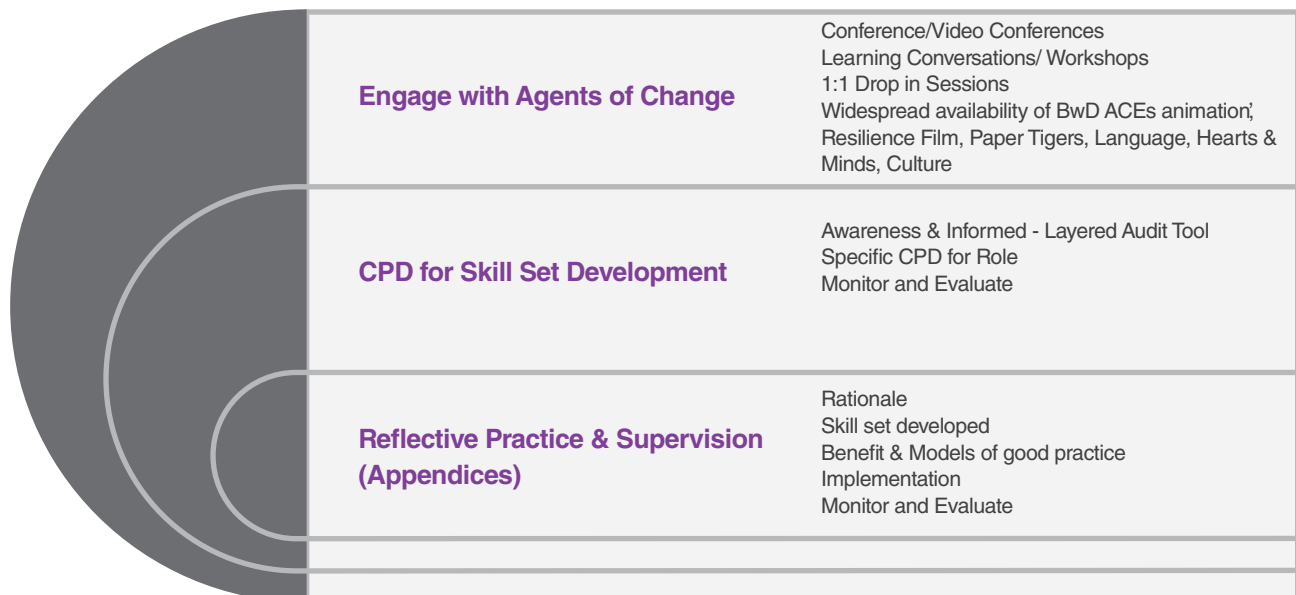
3.3.3 How will this reduce violence in Lancashire?

It will help communities and the workforce understand violence and its relationship to trauma, by focusing on the following eight principles:

1) Recognise trauma: find out if a person has experienced trauma.

2) Safety: Enable people accessing services to feel culturally, physically and psychologically safe.

3) Avoid re-traumatisation: Be conscious to prevent triggering feelings of powerlessness.

4) Person-centred: Recognise that every person's experience of trauma is unique and requires an individualised approach.

5) Trust: Organisational procedures and decisions to be transparent, including providing timely, accurate and honest information about what is happening, what will happen next and why.

6) Collaboration: Understanding power imbalances and working to 'flatten the hierarchy' and make shared decisions.

7) Empowerment: Enable people to feel valued, recognise their strengths, develop new skills and become independent.

8) Choice: Promote choice.

3.3.4 Outcome measures

Year 1:

• Recognition, awareness and commitment from all partners through change agents

• TI strategy shared with partners (organisation readiness; process and infrastructure)

• Development and action plans

• Strength based approach to address current skills, differentiated knowledge and needs of the workforce

• TI agents of change gathering information to inform review process

• Case reflections: demonstrate impact of skills implementation, training offers; inform review process

Year 3:

• Paradigm shift for all partners with regard to their culture around TI Practice – through implementation and monitoring (most changes to policy, practice or environment have been initiated)

• Less burnout and compassion fatigue/attendance at work/better health and well-being

• Capacity building and sustainability within workforce through completion of all phases of the TI Practice Strategy Model addressed – includes reflection and review of policies and procedures

• A phased approach to trauma intervention and recovery

Year 5:

• TI Cultures evident through the: adoption of changes within policies and procedures, which have been documented; whole system

• Data used to validate the need for trauma informed cultures

• Impact of TI communities change is evaluated for staff, service users and the whole system

3.4 Priority 4: Evidence, data and evaluation

3.4.1 Aim

To capitalise on the use of evidence, theory, data and evaluation to reduce violence and serious violence within Lancashire.

3.4.2 Objectives

• Take into consideration the "best" available evidence to reduce violence within Lancashire.

• To harness evidence and data through cross-agency collaborations to foster learning and knowledge exchange.

• To contribute to the development of available evidence and data usage to address the problems of violence.

3.4.3. How will we use evaluation and data to reduce violence in Lancashire?

We will:

1) Establish the extent to which evidence-informed approaches, including parenting programmes, good quality early years education, life and emotional skills training, bullying prevention programmes and therapeutic approaches for young people at greatest risk of becoming involved in or already involved in violence:

a. Are currently provided across Lancashire;

b. Have been evaluated and what the findings suggest;

c. Could be implemented.

2) Target resources and promoting shared understanding of local approaches to "hotspot" policing, "place-based" approaches or "problem-orientated policing" and restorative justice approaches and establish their effectiveness and the potential for further development.

3) Establish the underlying causes of local patterns of violence and selecting approaches that would address the associated risk factors and enhance protective factors, based on learning from well-evidenced approaches, however if there is a limited evidence base, it will be important to:

a. Conduct systematic literature searching and critical appraisal of published and grey literature to establish the availability and quality of evidence regarding different approaches to reduce violence, in addition to the risk and protective factors for violence;

b. Pilot new approaches, whilst ensuring rigorous evaluation of such pilots prior to further expansion.

4) Continually monitor the development and implementation of interventions.

5) Carry out ongoing environmental scanning in order to keep up-to-date with the external environment, including formally published, grey literature and practice developments to identify newly emerging data and evidence.

6) Embed ongoing learning in order to adapt Lancashire's approach to reduce violence in the future.

3.4.4 Outcome measures

A key outcome measure will be a reduction in violence and serious violence offences. However, we are also interested in outcome measures, which span wider than recorded offences of violence and serious violence.

We are committed to enhancing protective factors, whilst reducing risk factors for violence. The outcomes will therefore be tailored to measuring the impact of the needs of Lancashire (as identified in the Lancashire Serious Violence Strategic Needs Assessment) and dependent on the aims of the specific interventions. For example, as part of the A&E navigator's programme of work, we will work with health colleagues to ascertain

whether there has been a reduction in emergency attendance at hospitals as a result of violence. In relation to the prisoners and prisoners' families work stream, we will evaluate reductions in for example, reoffending, involvement with children's social care and economic impact.

However, not all the work of the VRN will be quantitatively 'measurable'. As part of the same prisoners and prisoners' families' initiative, we will seek to capture the extent to which the programme of work improves personal relationships through qualitative research to capture subjective, lived experiences.

The Lancashire VRN is taking part in a Home Office commissioned evaluation work of VRUs nationally. The central evaluation will focus on evaluating VRUs as a whole, meaning the totality of the strategic multi-agency response to violence, rather than the individual interventions that are implemented by the VRUs. To avoid duplication, the focus of the Lancashire VRN local evaluation work will be on understanding what works at an intervention level. Moving forwards, we aim to conduct process, impact and economic evaluations of VRN programmes.

Example outcomes and measures: Based on the Strategic Needs Assessment	
Outcomes	**Measures**
Improvements in education	Rates of persistent absentees; exclusions; attendance; % of children achieving 5+ GCSEs/grades A*-C (including maths and English); reported behavioural issues
Improvements in child development	Child development problem solving/ personal-social/gross motor/fine motor/ communication/'good' level of development
Improved mental health/wellbeing	% of pupils with social, emotional and mental health needs; % of people bullied in past 2 months aged 15; numbers of mental health hospital admissions; estimated prevalence of mental health disorders; resilience/wellbeing psychometrics; professional/self-reported quality of relationships.
Improved poverty and employment	Numbers of homeless people/children in low income families; numbers of unemployed adults.
Reductions in hospital admissions for substance and alcohol 'misuse'	Numbers of hospital admissions due to substance 'misuse'/alcohol issues.
Reductions in serious violence	Numbers of arrests/charges; attendances at A&E with assault or weapon injuries; referrals to YOT; reported crime.
Improved feelings of safety	Community perceptions; reported crime.
Economic benefits	Costs of intervention compared to cost savings.

5. Communications strategy

Our VRN communications strategy focuses on keeping partners informed of VRN activity with a secondary audience of members of the public.

Separate communications plans will work to inform and influence members of the public on the realities of violence in Lancashire, including what causes violence, to encourage a more compassionate, trauma-informed culture. An example of this is knife crime, where we

have implemented an in-depth research programme which is now informing our communications approach including channels, messaging and imagery.

A full communications strategy exists alongside this VRN strategy. Below is an indication of how each communications channel will be used to promote the work of the VRN brand (figure 13).

Figure 16

Audience	Communications Channel									
		Website	VRU enews	Twitter @ LancsVRN	Events	Lancs Police intranet	Partner comms channels	In The Know	Media	Press releases
	Partner orgs	✔	✔	✔	✔	✖	Secondary channel	✖	Secondary channel	✖
	Lancs Police	✔	✔	✔	TBC	✔	✖	✖	Secondary channel	✖
	Members of the Public	✔	✖	Secondary channel	✖	✖	Secondary channel	✔	✔	✖
	Media	✔	✖	✔	TBC	✖	Secondary channel	✖	Secondary channel	✔

Main Audience Chanel   **Secondary Audience Chanel**   **Not likely to be Applicable to this**

Stay In the Know is the community messaging service provided by Lancashire Police. It enables members of the public to find out what's happening in their area through regular updates from both local neighbourhood teams and Media & Engagement. These alerts are sent primarily by e-mail but can also be sent by text message or voice mail in the event of an urgent issue or emergency

6. Lancashire case studies

6.1 Prevention

Blackpool Better Start (BBS) is a National Lottery funded place-based approach to breaking the intergenerational cycle of poor outcomes including the NSPCC, Blackpool Council, Blackpool Teaching Hospitals, the Clinical Commissioning Group, Police and the community. The Centre for Early Child Development (CECD) is the 'engine room' of the partnership, working closely with the workforce and community to mitigate the impact of early adversity, build resilience and improve the outcomes of communities for generations to come. The CECD has invested in a suite of trauma informed interventions within a wider pan-Blackpool strategy, training and in depth trauma informed work.

Interventions include:

- 350 police officers, detectives and special constables have attended ACE awareness briefings.

- 89 police officers have been involved in workshops to identify recollection of the ACE Awareness training and, utilising the six principles of trauma-informed care, begin to explore what a trauma informed approach may look like and how it can be integrated into practice.

- Health visiting service as part of the enhanced health visiting programme discuss ACEs with parents during the antenatal visit. Training has included both theoretical information and crucially practical skills support on asking the questions within the context of an attuned relationship. Approximately 100 mothers have been asked about their adverse experiences, gaining their feedback on this experience.

- Development of the Brain Architecture Game adaptable to audiences of different knowledge levels. The game is used to help share learning about the impact of toxic stress and trauma on the developing brain and the importance of building resilience. It builds understanding of the powerful role of experiences on early brain development; what promotes it, what derails it and the potential consequences. Nearly 600 community members and professionals have taken part in the Brain Architecture Game in Blackpool gaining a memorable and compelling perspective on the lifelong impact of early childhood experiences.

- The Survivor Mums' Companion Developed by the University of Michigan and University at Buffalo, and edited for a UK context by the CECD in partnership with community members, this trauma specific intervention has been delivered to pregnant women. This is an antenatal psycho-education programme for pregnant women who have experienced early trauma and adversity and who may be experiencing symptoms of post-traumatic stress disorder. Work to date has not only generated learning in terms of the interventions and approaches themselves, but also what families need in addition to these programmes to ensure positive outcomes are sustainable and families experience a consistent and seamless journey through trauma informed services.

6.2 Lancashire case study-knife crime

Since February 2016, the Government has supported national weeks of action against knife crime by police forces under the banner of Operation Sceptre. Under Operation Sceptre, police forces have a choice of taking all or selecting specific actions from targeted stop and search activity against those suspected of carrying weapons, weapon sweeps of areas of suspected knife activity, educational activities in schools or youth groups, test purchases of knives from retailers, and encouraging the use of surrender bins for knives.

During a single week of action in September 2019, Lancashire Police took part in Operation Sceptre and the outcome was:

15 test purchase operations were carried out against retailers. Of these, 11 were passes, 4 resulted in retail outlets failing the test purchase;

147 knives or weapons were surrendered;

32 weapon sweep operations were conducted with 4 knives recovered;

70 engagement/ education events were held where key messages and information were distributed.

Test purchases undertaken by Trading Standards, with support from police forces, are a very important part of Operation Sceptre. This has focused on shops and stores rather than online retailers, and the actions taken against retailers who fail the test purchase has been mainly to warn them that they have broken the law and to take action to avoid such a test purchase failure happening again. This approach will continue, however, it is also important that prosecution of retailers is considered in relevant cases, especially if there is a repeat test purchase failure.

Operation Siren is an operation being developed across the region involving the Border Force and local police forces with the intention of intercepting weapons ordered online and then appropriate intervention undertaken. Further activity will then be required to be developed to target websites that sell weapons over the internet.

Lancashire continues to adopt MAPPA (Multi Agency Public Protection Arrangements) and Genga principles for dealing with high risk violent offenders. Operation Genga is Lancashire's multi-agency approach to tackle Serious and Organised Crime across the county. Working with other agencies and all local authorities by means of pursuing criminals in disrupting and deterring organised criminality, protecting the most vulnerable communities and preparing them to be resilient against Organised Criminality.

Lancashire will work to provide in-depth analysis and information to enable a sound, evidenced-based licensing policy, incorporating the public health perspective.

Lancashire will support operational policing to undertake enforcement and innovative practice to tackle emerging or persistent violence.

Stop Search trend for Lancashire
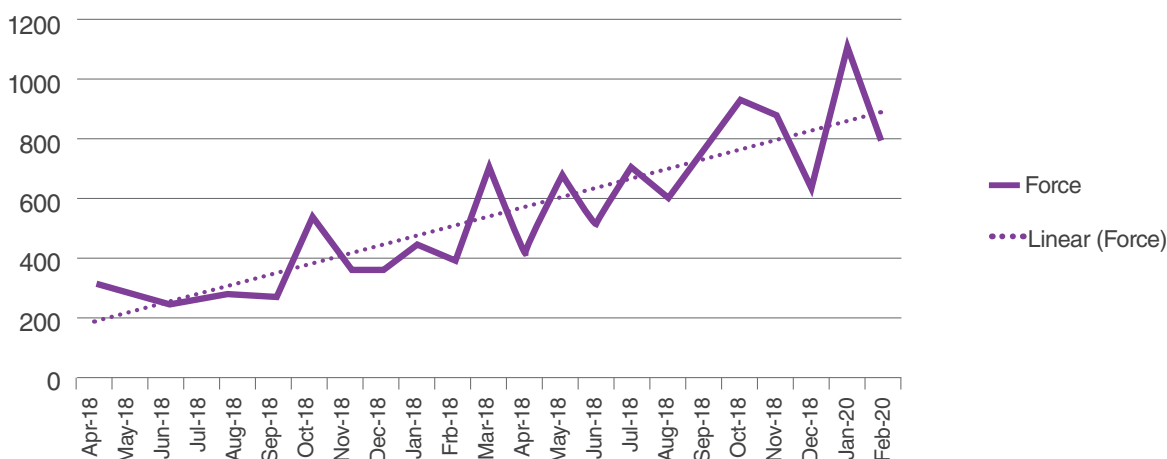
Multi Agency Database Exchange (MADE)

In 2004 Lancashire County Council in collaboration with other partners set up a database exchange under the Crime and Disorder Act for Community Safety Partners to understand, monitor and develop a problem-solving approach to reducing crime and disorder. Working alongside Blackpool Council and Blackburn with Darwen Council data is shared to help all agencies to understand the variables for the whole of Lancashire area.

MADE is part of the larger Lancashire Insights database, which is available to the public and incorporates public data on demographics, environment, education, deprivation, economy, health and social care. MADE provides a more in-depth understanding for partners on Community and Road Safety issues incorporating anti-social behaviour, crime, police and fire and rescue incidents, serious and organised crime and, ambulance and accident and emergency incidents. It also looks more in-depth at offending and victim data as well as the causation of crime such as alcohol and substance misuse and mental health.

The data held by MADE, where possible, is broken down into nationally agreed geographic areas, that is Local Authority Districts and Wards, however due to differences in boundaries for partner agencies this is not always possible.

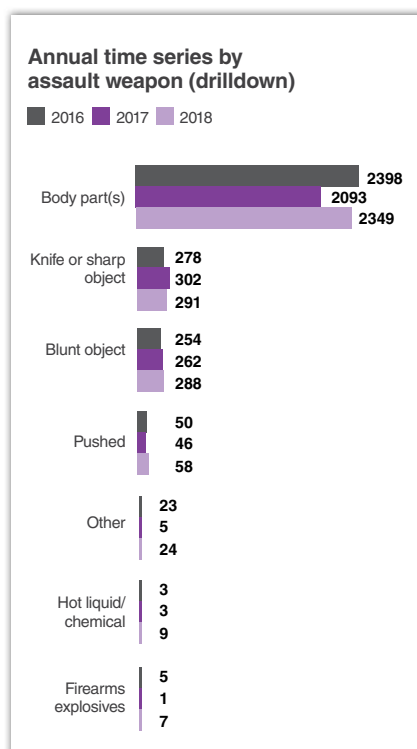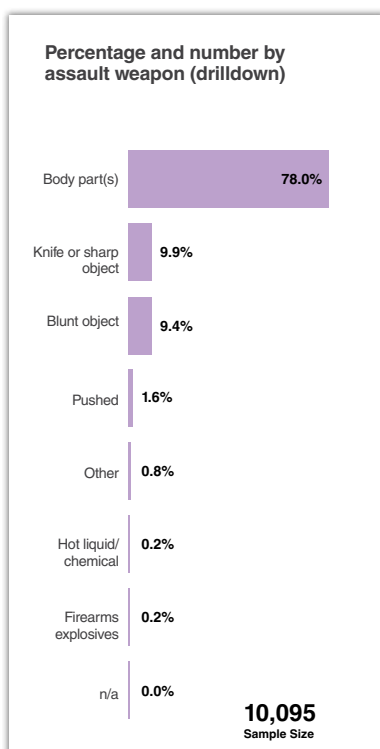MADE also hosts Needs Assessments and Partnership Intelligence Assessments for partners to access and learn from evidence-based research and study.

Developing the data

Data is not always captured within similar coterminous boundaries, to present data that is more useful partners should consider providing data in smaller geographies to enable scaling up for similar boundaries.
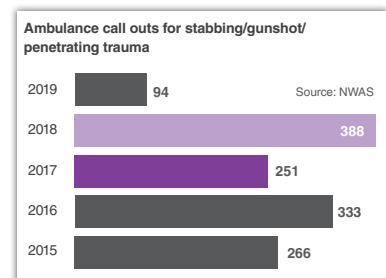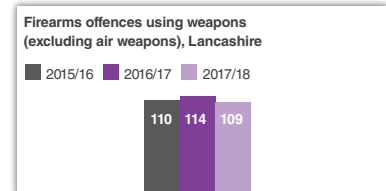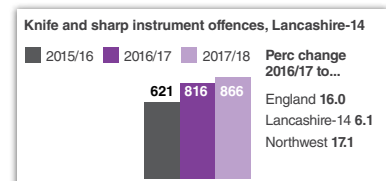
Quality of data is always a challenge especially as it is often captured by front line professionals in demanding roles. Providing more accurate and consistent data would present more accurate analysis, research and interpretations to deliver better interventions.

Work is ongoing to expand the datasets to present more variables and in-depth knowledge of the risks to society, vulnerabilities and service provision to enhance future strategies and priorities for all partners.

Percentage and number by assault weapon (drilldown)

Weapon	Percentage
Body part(s)	78.0%
Knife or sharp object	9.9%
Blunt object	9.4%
Pushed	1.6%
Other	0.8%
Hot liquid/chemical	0.2%
Firearms explosives	0.2%
n/a	0.0%

10,095 Sample Size

Annual time series by assault weapon (drilldown)

■ 2016 ■ 2017 ■ 2018

Weapon	2016	2017	2018
Body part(s)	2398	2093	2349
Knife or sharp object	278	302	291
Blunt object	254	262	288
Pushed	50	46	58
Other	23	5	24
Hot liquid/chemical	3	3	9
Firearms explosives	5	1	7

Offences involving the use of weapons
Police recorded crime. ONS

Knife and sharp instrument offences, Lancashire-14

■ 2015/16 ■ 2016/17 ■ 2017/18

2015/16	2016/17	2017/18
621	816	866

Perc change 2016/17 to...
England **16.0**
Lancashire-14 **6.1**
Northwest **17.1**

Firearms offences using weapons (excluding air weapons), Lancashire

■ 2015/16 ■ 2016/17 ■ 2017/18

2015/16	2016/17	2017/18
110	114	109

Ambulance call outs for stabbing/gunshot/penetrating trauma

Source: NWAS

Year	Value
2019	94
2018	388
2017	251
2016	333
2015	266

Examples:

YOT Team: A priority for Lancashire Youth Offending Team is to work towards becoming a Trauma Informed Service. Alongside this the key principles of child first and restorative approaches underpin our vision and work with children in contact with the youth justice system

Divert: Impact of implementing and exploring how offenders have changed their behaviour, to reduce the likelihood of them returning to police custody; developing the workforce to build capacity and sustainability

Trauma Informed Schools: Reduction in Exclusions (prevents keeps vulnerable children in the system and enhances life chances); Working with partners to provide a consistent approach to addressing the needs of vulnerable children and their families

Trauma Informed Police Force: Includes training Sergeants around reflective practice and supervision

In 2012, Blackburn with Darwen published the first ACEs study in the UK. Epidemiological evidence found that almost half (47%) of adults across the borough have suffered at least one ACE, with 12% of adults in Blackburn with Darwen having suffered four or more ACEs. Adverse childhood experiences (ACEs) have been linked to increased risk of future victimisation or perpetration of violence by those who experience them. Evidence shows an intergenerational cycle of ACEs, so prevention and early support is imperative to positively impact upon this.

Senior executive level leaders from across the Lancashire partnership met and provided the mandate for the planning, design and delivery of trauma informed practice to be co-led and produced by the three Directors of Public Health (Blackpool, Blackburn with Darwen and Lancashire) working closely with senior leaders across the partnership. This meeting provided the foundation for 'Trauma Informed Lancashire' with a strong focus on local communities and schools through cultural change, leadership and practice inputs. They recognised the significance of having

ACE Aware/Trauma Informed Communities and links to serious violence namely:

Identify the risk factors due to ACEs;

Understand root cause; break the cycle; develop more Resilient Families

Students with 3+ ACES- more likely to experience academic failure, have attendance issues or exhibit behavioural problems.

Reducing ACEs- enhance life chances, improve life choices, reduce exclusions, decrease % of Vulnerable Children 'lost' in the system.

Decreasing the number of Vulnerable Children staying within the system -reduces the number who could potentially be targeted for criminal activities (including County Lines, involvement in knife crimes and drugs)

The trauma informed root cause approach to behaviour management and personal development for pupils, their families and the wider community and has seen the following impact so far:

Ofsted feedback- improved to 'GOOD' rating from 'requires improvement'

'There have been considerable improvements in pupils' behaviour and attendance. Leaders' high expectations of pupils and staff mean that **there has been a change in the school's culture.** Pupils value their education and the opportunities it can provide, and they want to do well'

'Pupils explained to inspectors that the **best thing** about their school is their **teachers**. They value the help and support they receive. Staff foster **strong and supportive relationships** with pupils'

'The **behaviour** of pupils is **good**'

'There is a **calm atmosphere** around school'

'Pupils appreciate the benefits that a small school community can offer, t**hey liken their school to a family**'

Parents are ACE aware

Improved attendance- Whole school 1.8%, Disadvantaged 2.4%, SEND 3.3. %

Senior school case study-exclusions

The proportion of pupils excluded for a fixed period has decreased.

Year	Total	Repeat
2016	7.7%	5.1%
2017	15.1%	3.2%
2018	4%	0.7%

The number of students permanently excluded from school has halved.

Case study Two - Primary Head Teacher:

"When working in a trauma informed way you have more of a direction. You have a purpose. All staff and the community know why you are doing something. For example, now that we are all trauma informed, it allows us to be more streamlined, effective, efficient, identify need and put support/ intervention in place more quickly so that you make a difference. By looking through the same lens rather than different ones you understand it more, which is more effective and efficient. This is especially the case in a primary school as this is where it all starts. This is where we can be more nurturing. However, trauma informed practice needs to be everywhere, which also includes adult and young people's services. It is important too that the voluntary sector understand about trauma informed practice. Everybody should be made aware that resilience and self-esteem underpins learning, life, and the future decisions children make when becoming independent. This includes making wrong decisions. It is important to look at the bigger picture as the cycle will continue if not addressed".

By undertaking a trauma informed approach, the VRN and co-production teams can address the preventative measures and data from the needs assessment 2019-2020: **Educational achievement and youth employment; Truancy and Exclusions; Crime and antisocial behaviour; School readiness (including attachment and parenting)**

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