

NHS Violence Prevention Teams

Background

The Wales Violence Prevention Unit (VPU) established the NHS Violence Prevention Team (VPT) in November 2019 in Cardiff, at the University Hospital of Wales. In January 2022, a second VPT was established in Swansea's Morriston Hospital, based on the original 2019 model. The funding for both is administered by the VPU through funds received from the UK Home Office and the Youth Endowment Fund (YEF).

The VPTs are unique in the UK; each VPT is made up of two nurses and a

community-based caseworker. The role of the VPT is to offer advice, support and guidance to any patient attending the hospital's emergency department with an assault related injury, with the aim of engaging with those injured whilst they are in hospital (at the point of crisis), and to promote movement away from violence by encouraging engagement with support, intervention and wider services.

Evaluations

The VPTs have been a focus of three core evaluations since they were established:

1. A Service Evaluation of the Delivery and Implementation of a Hospital-Based Violence Prevention Team within the University Hospital of Wales.

Conducted by and funded through the VPU, this was a process and outcomes evaluation of the Cardiff-based VPT which explored the development and implementation of the service within the ED department, including the nature and level of support provided to patients with violence-related injuries. This was a mixed methodology with online surveys, 1:1 interviews and service level data from the VPTs on patients identified and supported. This evaluation was reviewed and approved by the Research and Development offices of Public Health Wales and Cardiff and Vale University Health Board.

2. South Wales Hospital-Based Violence Intervention Programmes: Implementation and Process Evaluation.

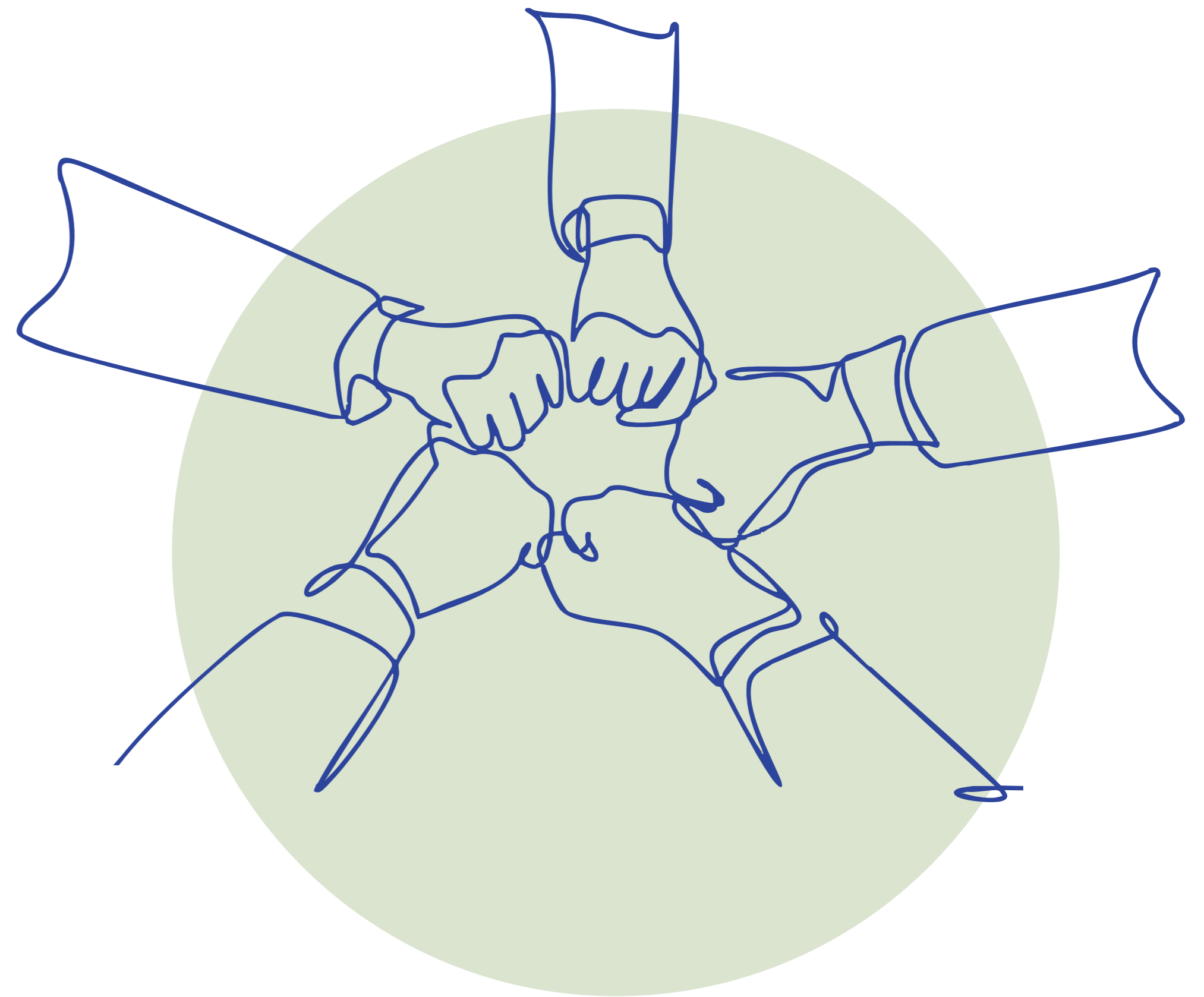
Conducted by Cardiff University, funded by YEF, this was a process evaluation which aimed to understand the functioning of the existing VPT models in Cardiff and Swansea by examining their implementation, mechanisms and context using qualitative methods, document analysis and secondary analysis of routinely collated data. This evaluation also aimed to understand how the Cardiff VPT model was adapted to fit the needs of Morriston Hospital's, Swansea. This evaluation received ethical permissions from Cardiff University School of Dentistry Research Ethics Committee.

3. [Coming Soon] The Effectiveness and Cost-Effectiveness of a Clinical Violence Prevention Team Based in the Emergency Department.

Conducted by Cardiff University, and funded by NIHR, this effectiveness and cost-effectiveness evaluation of the VPTs will be available later this year (2025).

Findings

- The VPTs were viewed by stakeholders to be important and needed.
- Having the VPTs in the ED departments improved the ability of the hospital to identify patients who had experienced violence, with 40% of the violence-related patients identified by the VPT not being identified by the ED's patient management system.
- The intelligence collected by the VPTs was used to inform the local multi-agency understanding of violence.
- The VPT staff were seen as 'violence prevention champions' and their nursing experience, skillset, personalities and abilities to work in an agile manner was highly praised.
- The VPT can be flexible to the patient's individual needs, and work in a trauma-informed way.
- The VPT have established a wide network of external agencies who can provide support to the patient and reduce the risk of further involvement in violence.
- The VPTs have offered informal training to other staff members on violence, prevention and improving data quality.
- Other staff within the hospital were keen for VPT capacity to increase, ensuring the VPT are available in the ED during peak hours for violence-related injuries (e.g. weekends).



Limitations

For both published evaluations, data was collected over a limited period. VPTs continually adapt, and it is possible that further changes had taken place since the data collection took place.

Due to ethical and resource implications, capturing the experiences of service users was not possible for the two published evaluations.

Recommendations

1. The NHS secure longer-term commitment of funding for the VPTs and explore opportunities to continue to develop the services within the health boards.
2. The VPTs continue to operate as a collaboration between police and health to ensure the service maintains a focus on violence prevention and associated vulnerabilities.
3. The VPTs identify further opportunities to enhance collaboration with support services to better support individuals affected by violence.
4. The VPTs work with the VPU to fully understand the challenges with the existing standardised data collection system and consider opportunities to further improve data collection.
5. The VPTs should explore how to better engage with children and young people, particularly those who are involved in school-based violence.
6. Future work should consider conducting bespoke and targeted research with patient populations to make explicit their experiences and perspectives of the intervention. This would generate further insight into who the VPT intervention may and may not be most appropriate for.
7. Future work might consider workforce modelling to appreciate the extent to which whole system multi-agency collaborations are able to provide continuity of care and support those who are exposed to violence.

Resources

www.violencepreventionwales.co.uk



Cardiff University,
Youth Endowment Fund
Evaluation



Cardiff University,
NIHR Evaluation Protocol



VPU evaluation