Sharing and Collaborating –
Improving outcomes for victims of crime

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Abstract
Significant progress has been made to improve victims’ experiences of the criminal justice system and more recent attempts have been made to improve victim access to appropriate support services. Collaborative partnerships between statutory and non-statutory agencies are essential in order to ensure that victims of crime can access their entitlements to information and support. However, a consequence of the increasing competitiveness for limited funding has resulted in support services having to adopt protectionist strategies in order to survive, resulting in a reluctance to share good practices and develop collaborative partnerships. This paper draws together the findings of a rapid evidence assessment on what works in supporting victims of crime and the preliminary findings of an evaluation study of a model of victim care which promotes the sharing of best practice, and further explores the benefits of developing communities of practice.

Key Words
Victims, multi-agency, victim services, best practice, community of practice, Victims’ Commissioner

As part of a plan to improve the delivery of support services, the Ministry of Justice (2012) published a consultation document ‘Getting it Right for Victims and Witnesses’, and following the consultation announced that the majority of support services for victims of crime would be commissioned at a local level by Police and Crime Commissioners. This has introduced a new mixed model of commissioning, with PCC’s responsible for commissioning local support services, while some national services remain funded by central government (for example, the Witness Service now operated by Citizens Advice). However, further clarity is still sought regarding the sustainable funding of domestic abuse and sexual violence support services.

This new approach has marked a significant change in the commissioning of support services for victims and, to assist with this transition, a number of PCCs commissioned research to clarify existing services, identify what support is required and to highlight gaps in provision (Sarkis, 2013; Avon and Somerset PCC, 2014; Tapley, Stark, Watkins and Peneva, 2014). These victim service audits revealed a landscape consisting of a complex network of statutory and non-statutory agencies, all competing for funding with other providers in order to sustain and develop the services they provide. This reflects the essentially organic way in which support services have evolved in England and Wales since the late 1960s, historically consisting of a range of voluntary and third sector agencies, responding to specific needs and providing services where none previously existed. Whilst some voluntary services have benefited from government funding, the more politically driven agencies, campaigning for changes to legislation and often critical of the poor treatment of victims by
criminal justice professionals, have had to operate in an environment of short-term funding from a range of disparate sources, thereby creating an environment of victim services that lack clarity and coherence, often with conflicting aims and overlapping priorities (Wedlock and Tapley, 2016: 6). In times of austerity, increasing competition for limited funding has created tensions and distrust between agencies, actively discouraging information sharing and building barriers to partnership working. This has resulted in the duplication of services in some areas, whilst services remain patchy and inconsistent in others, leaving victims of crime exposed to a postcode lottery of service provision across England and Wales (Tapley et al, 2014).

The PCC commissioning framework, guided by the Ministry of Justice (2013), has provided a valuable opportunity for all PCC’s to improve the co-ordination of local victims’ services and to develop a consistent, coherent and sustainable approach to the provision of high quality support, accessible to all victims of crime who need and require it. This has undoubtedly presented some challenges and a number of different models have subsequently evolved across England and Wales. Some PCCs were early adopters and started in October 2014, whereas the remaining PCCs started in April 2015. Whilst some PCCs have chosen to remain with their existing service providers and referral processes, others have embraced the challenge and sought to adopt more innovative approaches. Some PCCs have adopted a significant focus upon improving communication with victims and keeping them updated (Dorset and Avon and Somerset), as despite being well documented throughout the last 30 years, failures to provide sufficient information about the criminal justice process and keep victims updated about the progress of their case, still remains a major cause of dissatisfaction for victims of crime (Wedlock and Tapley, 2016: 13).

Avon and Somerset PCC was an early adopter and set up Lighthouse Victim Care, which is a multi-agency team of police staff and independent support organisations co-located and working together to provide victim care. The officer in the case is initially responsible for updating victims, but if a victim is required to attend court as a witness, they are allocated a Victim and Witness Care Officer to be their main point of contact as the case progresses to court. Dorset PCC set up the Victim’s Bureau, which is a team of police staff who contact victims to update them on the progress of their case and inform them of the support services available. It is understood that plans are also in place to re-locate the Victim’s Bureau with other support services in order to create a multi-agency model. Kent PCC has set up Compass House, which is a co-located multi-agency hub, including Victim Support, the Witness Care Unit, the Witness Service and links to independent support providers. Compass House also has meeting rooms available and a live video link facility so that victims can give their evidence to the court remotely in a safe and secure environment. Cambridge PCC introduced the Victim and Witness Hub, which involves an initial needs assessment undertaken by the responding police officer and then referral on to a relevant support service if required.

The local strategies introduced to improve the co-ordination and delivery of support services to victims have been in operation for at least 18 months now
and provides PCCs with an opportunity to evaluate the impact of the model adopted in their local area. An author of this paper has been commissioned to evaluate the model of victim care introduced in Devon and Cornwall in April 2015. The Victim Care Unit (VCU) is located within Devon and Cornwall Constabulary, thereby alleviating issues regarding the transfer of data between agencies, and is based in Exeter. The VCU is staffed by VCU officers, two Victim Care Advocates who provide outreach for victims with complex needs, and a seconded mental health practitioner. The VCU process starts with the responding police officer completing a Victim’s Needs Assessment (VNA) with the victim, asking how the crime has initially impacted on them and asking what needs they may have. The VNA is returned to the VCU, whereby VCU officers contact all victims who are identified as having a need within 24 hours, and for those victims where no needs have been identified, a letter is sent outlining what support is available and where more information can be found, including the contact number of the VCU and details of the MyVCU website (victimcaredevonandcornwall.org.uk). A number of issues have been identified regarding the accuracy and efficiency of the completion of VNA’s and these are explored further in the forthcoming evaluation report.

A fundamental principle of the VCU is the targeting of services to those individuals who require support at a time appropriate for them. Everyone’s experience of victimisation is very personal and depending upon their circumstances, people may require support at different times. A pro-active approach initially ensures that people receive information about the support services available and they are then able to make an informed choice as to when and how they access these. This helps to ensure that victims are referred to the relevant support services available to assist them when they choose to. Previous referral processes have adopted a blanket approach whereby all victims are contacted, often by letter, whether support is required or not, and specific needs have often remained unidentified and consequently unmet (Tapley et al, 2014). VCU officers contact victims by their preferred method of contact where the VNA indicates a need. Many needs are often met at this initial contact stage, with the VCU officer able to provide information, practical support, or provide details of other relevant organisations that are more suited to addressing the needs of the victim.

Victims who would like additional support to help them to cope with the impact of crime give their consent to the VCU to be referred on to an accredited support agency that is a member of the Victim Care Network. Referrals are made through MyVCU, a secure cloud based management system that allows secure referral, case and performance management. The Victim Care Network consists of a diverse range of agencies that provide support to victims of crime. Some are single-issue services, for example, focusing on victims of specific crimes (domestic abuse, sexual violence, child abuse, fraud), some work with specific groups (children and young people, the LGBT community, elderly people, people with disabilities, and people with mental health problems). Other agencies provide more generic support services within the community, working with families and young people, and providing a more holistic service addressing a range of needs, including housing, addictions, debt, education and employment).
Support agencies apply to become an accredited member of the Victim Care Network and if successful receive funding in the form of a grant from the PCC. A key purpose of setting up the Victim Care Network was to increase the visibility of support services across the county, raise awareness of the types of support available and to encourage the development of partnership working to reduce duplication of services and identify gaps in service delivery. The Network now consists of over 70 agencies and a preliminary analysis of the results of an online questionnaire (34% response rate), demonstrates an overwhelming support for belonging to the MyVCU Network, with responses highlighting the following benefits:

- The VCU provides a valuable service for victims across the region, a seamless referral pathway to ensure clients' needs are met.
- Belonging to the Network enables greater up-to-date knowledge of existing services and increases awareness of the services available.
- Membership has opened up new opportunities to network with other agencies and to share knowledge, understanding, experience and best practice. There is much less repetition as a result.’

The impact membership has had on referral numbers to the support agencies is not yet clear. Some organisations have indicated an increase, whilst others state there has been little impact or that referrals have actually decreased, indicating that further analysis of the referral process is required. However, of significant importance, is that some agencies are seeing a change in the profiles of victims they are supporting, indicating that referrals from the VCU has enabled harder to reach groups to access support services. This has included male victims, victims of domestic and sexual abuse, and has also revealed higher rates of victimisation amongst young people and people with disabilities who are now able to access support, and has also helped to identify where gaps in services exist.

Networking Days are held three times a year, providing agencies with an opportunity to meet up and share news and information of initiatives and services, and undertake joint training. The majority of organisations highlighted the benefits of attending these days, with one respondent commenting on how “uplifting” the Networking Days were: ‘it’s good to see how much good work is being done and to share our values and commitment’. This demonstrates the valuable role of peer support and partnership working, particularly at a time when increasing competition for funding has had a negative effect upon partnership working, due to agencies having to compete against each other for funding. The exchange of information, the topics covered by speakers and the updates on the VCU were all found to be useful by participating agencies.

As part of the evaluation study, semi-structured interviews were undertaken with some support agencies. Participants described the often multiple and complex needs of many victims, but stated that belonging to the Network
enabled them to make referrals on to other services with confidence, as they were more aware of what support could be offered. For example, through their membership of the Network, one agency working with a victim of hate crime was able to refer the client on to an agency that they were confident would be able to help them to improve and secure their business premises, thereby increasing the victim’s access to appropriate services and helping them to gain the support needed. The findings indicated that whilst some agencies were effective at developing and maintaining partnerships, others remained protectionist and reluctant to engage with others, turning down potential opportunities to collaborate. Some participants suggested that it should be the role of the PCC to facilitate and encourage closer partnership working through the allocation of joint funding, thereby actively promoting a more efficient use of resources and the development of new services where gaps currently exist.

In an attempt to capture an understanding of the types of intervention provided and measurable outcomes for victims, Devon and Cornwall PCC have put in place from April 2016 performance measures to enable services to indicate more clearly the work they are undertaking and the intensity of the support provided, in order to assist in the better targeting of funding. Evidence from the research so far indicates the pivotal role of PCC’s in encouraging the creation of collaborative partnerships and innovative practices through the development of networks and the allocation of funding. A recent evaluation of the Safer Stronger Consortium in Cornwall (Westpoint, 2016: 2), a member of the Victim Care Network, emphasises ‘the need for the provision of specialist and multi-faceted support interventions for victims and their families’ and highlights the breadth of expertise and multi-agency collaboration found within the Consortium. Other agencies are in support of the PCC offering funding incentives to develop further consortiums, indicating an appetite for the development of wider communities of practice.

The approaches adopted in some of these localised funding practices by PCC’s has demonstrated that a joined up multi-agency approach is key to successful delivery of services that provide effective and meaningful support for victims at the local level. There are still, however, benefits to the learning and sharing of good practice at the national level. Although many victims’ services are no longer commissioned centrally, there is still a place for learning and sharing at the national level in order to benefit from the knowledge and experience held across England and Wales, and in order to reduce the potential for victims to receive a different quality of service dependent upon their location.

The Victim’s Commissioner (VC) aims to set up a community of practice which will facilitate learning and collaboration across statutory and non-statutory practitioners, in order to develop and disseminate good practice in supporting victims of crime, to guide them through the criminal justice process if they have reported the crime, and to assist them in their recovery through the provision of timely and appropriate services.

The VC’s role is defined in the Domestic Violence, Crime and Victims Act 2004 and can be summarised as:
• Promoting the interests of victims and witnesses;
• Encouraging good practice in the treatment of victims and witnesses; and,
• Keeping the operation of the Victims’ Code under review.

Sharing and collaborating within and between criminal justice agencies and third sector practitioners can contribute greatly to each of these three key aims. The aim of the VC Community of Practice will be to act as a hub for this sharing and collaboration, bringing practitioners together physically and virtually to share their experiences and learn together how to best support victims.

The concept of a community of practice is age-long. People have always come together to learn and share their experiences about a subject that they are interested in. But the term ‘community of practice’ and the theory behind why they can be so helpful in supporting learning and practice was developed by Etienne Wenger (1998), with a focus on formalising the key attributes of a community of practice and developing them in relation to theories around social learning. Wenger (1998) describes communities of practice as groups of people with a shared concern and a passion for learning how to do it better. They learn together how to improve their practice as they interact on a regular basis. Wenger (1998) claims that the very act of knowing is fundamentally a social act, therefore, communities of practice are a form of social learning.

In a social learning situation practitioners act purposefully, learning their way from finding out about the problems inherent to a situation to taking action to solve them. It is not just about finding one single solution to a single problem, but about learning about the situation, learning about the process and making continual improvements to practice along the way. As learning develops and changes in practice are implemented, the situation in turn will change, there isn’t necessarily one permanent solution. Problems in real life are not static, they alter as changes are made in the practice addressing them. There are also multiple perceptions of what the problem is in the first place. For example, the victims’ perspective of the criminal justice system will be very different to that of the police, judges, and support practitioner perspectives, and yet all may agree that changes could be made to improve the situation for all, however complex the problems appear.

Learning can be social in that, not only can practitioners come together as a group, rather than just individually, but also there is often a potential unintended emergent outcome. Participants may also learn something about each other and their relative views on the subject, creating a greater understanding of differences in professional agendas and cultures. A social learning system, and particularly a community of practice, can then become more than the sum of its parts.

Wenger (1998) defined a community of practice as a form of social learning consisting of three key components: domain, community and practice. The domain of a community of practice is the particular focus that the members are passionate about. The focus defines what they do (at least partially). The domain
of the VC’s Community of Practice is working with victims, ensuring they are
guided and kept informed throughout the criminal justice process and beyond,
and provided with appropriate and targeted services to assist with their
recovery. The domain is also about delivering justice for victims and achieving
this whilst according victims the dignity and respect that they are entitled to as
citizens. All members of the VC Community of Practice will have this as a core
focus of their work.

Wenger (1998) defines the community aspect of a community of practice in
terms of both its members and the high quality relationships that bind them. An
ideal community of practice will encompass a wide range of perspectives.
Membership of the VC Community of Practice will aim to include all of those
agencies with responsibilities to provide the services stipulated in the Victims’
Code of Practice (Ministry of Justice, 2015). However, it is acknowledged that a
victim’s true experience is not limited only to those agencies covered by the Code
and so the VC’s Community of Practice will aim to broaden its membership to all
statutory bodies that interact with victims, for example, judges; magistrates;
defence lawyers and registered intermediaries, etc. Membership will also
include third sector organisations that are commissioned to support victims
along with victims themselves.

As a working group, the VC Community of Practice will aim to make a real
difference to the practical ways in which victims are supported. This means
building a membership of participants from an organisational level that have
practical experiences to share. The Victims’ Commissioner will seek commitment
from senior stakeholders within the criminal justice system, but the core social
learning will be carried out by participants who are on the ‘coal face’ of working
to support victims. By sharing practical learning and good practice, participants
of the VC Community of Practice will be able to share their learning with
colleagues from their own organisations who work directly with victims. The
commitment and leadership provided at senior level will mean that VC
Community of Practice members can also cascade their learning up to senior
stakeholders in their organisations, with a view to informing and improving
national policies and guidance to support victims.

Wenger (1998) states that in order to function successfully, a community of
practice should have an effective co-ordinator and a core group to facilitate
practical organisation. The Victim’s Commissioner’s Office will co-ordinate the
VC Community of Practice and will seek the support of a core group of
practitioners to support practical elements, such as organising meetings and
providing venues with an appropriate geographical spread across England and
Wales. It is envisaged that much of the work of the Community can be carried
out virtually through emails, newsletters and online, but occasional face to face
meetings can help to cement relationships and provide opportunities to network
and share experiences informally.

Membership should reflect the diversity of the organisations that they represent
and the diversity of the victims that they aim to support. It is important,
therefore, to ensure that membership of the VC Community of Practice is
inclusive, encouraging practitioners from all backgrounds, regardless of gender, ethnicity, culture, disability, social class and geographical region.

The sense of belonging to the community is essential in a community of practice. It provides a foundation for learning and collaboration. There may be instances of collaboration between criminal justice agencies and there is increasing evidence of successful multi-agency working at the local level (Tapley et al., 2014). However, the VC Community of Practice will be in a unique position to provide a sense of community for practitioners with a focus on supporting victims across England and Wales by sharing examples of local practices nationally.

Wenger (1998) identifies that there should be space at the periphery of a community of practice to develop ideas and raise issues that are not central to the group. Smaller subgroups can develop over time which can then report back to the core group. Specialist areas of victim support can be discussed within smaller subgroups that have a particular interest in an aspect of supporting victims, for example, supporting young and vulnerable victims, or supporting victims of domestic abuse. Learning from these subgroups can then be fed back to the core group for wider dissemination. Concentrating on specialist areas that tie into the wider area of victim support provides a ‘Landscape of Practice’ (Wenger-Trayner et al. 2014).

It is envisaged that the VC Community of Practice will start by outlining some initial terms of reference, but the theory states that at their most effective, communities of practice are flexible, evolving through time as they interact with the landscape of the situation that they are seeking to learn more about. Developments in the victim landscape will lead to subsequent changes for the VC Community of Practice. For example, the introduction of a Victims’ Law would bring about a new set of complexities for those who work to support victims of crime (Strickland, 2016).

The final key aspect of a community of practice as defined by Wenger (1998) is the practice of the community. The practice element will be evident in the sharing of good practice, learning together how to better support victims through the practitioners own experience of what worked well. The mechanisms for engagement are diverse and may cover activities such as workshops, sharing case studies, developing theoretical frameworks and practical guidelines. Through this practice the VC Community of Practice will aim to become a centre of excellence, collating and disseminating good practice in supporting victims of crime.

The practice of sharing what works in supporting victims through the criminal justice system can be broad and so the Community may focus on particular work streams, for example:

- providing timely and accurate information;
- victim personal statements;
- restorative justice;
• handling complaints;
• working with children and vulnerable victims;
• a victims’ law;
• compensation.

In summary, recent changes in the commissioning of support services to PCC areas provides a valuable opportunity to improve the co-ordination and coherence of support services for victims of crime, providing a more targeted approach in the allocation of resources to ensure that people are informed of the services available and are able to gain access to them when required. To ensure that a wide range of services exist to address the often complex and multiple needs of victims, it is essential that policies and reforms are implemented as intended. To achieve this, it is essential that barriers preventing the development of effective partnership working and collaboration are addressed, including information sharing, communication, IT systems, professional cultures, joint training, funding and the sharing of resources. Lack of information sharing and poor communication between agencies, results in the duplication of some tasks, the failure to undertake others and wasted resources, leaving victims to face a postcode lottery in the responses they receive from both statutory and non-statutory agencies (Tapley, et al, 2014; Wedlock and Tapley, 2016).

The VC Community of Practice will aim to support and facilitate the social learning of practitioners across all criminal justice agencies and commissioned services nationally. It will aim to become a centre of excellence to gather and disseminate good practice in supporting victims, working together to improve victims’ experiences of the criminal justice system and assisting in their recovery.

As Henry Ford once said ‘Coming together is a beginning; keeping together is progress; working together is success.’

References


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