TONIC

NOTTINGHAMSHIRE
POLICE & CRIME
COMMISSIONER

Victim Needs Assessment

June 2022

Final Report

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Finally, we would like to thank the local charities and support services who assisted with the promotion of the consultation.

EXECUTIVE SUMMARY

Background and Context

Across England and Wales, there was a 14% increase in total crime between 2019 and 2021, driven by a 47% increase in fraud and computer misuse. Latest estimates reveal that around 2 in 10 adults were a victim of crime in the year ending September 2021, with this most commonly being fraud (8.9%), computer misuse (3.6%), criminal damage (2.9%), and vehicle-related theft (2.9%). However, a smaller but significant percentage experience more interpersonal crimes such as violence (2.0%), burglary (1.7%), and theft or robbery from the person (0.6%). Specifically in Nottinghamshire, for the year ending September 2021, police recorded 89,873 crimes, with a further 7,908 fraud offences.

It is well documented that the impact of crime on victims can be far reaching, including physical and emotional injury, long-term psychological and mental health effects, negatively influencing future trust, sense of fear, and feelings of safety, all of which can impact on various aspects of a victim's life, consequently meaning crime is extremely costly to society. Accordingly, there has been a shift in the culture of the Criminal Justice System (CJS) to recognise the importance of better engaging with, and supporting the needs of, victims.

The Office of the Nottinghamshire Police and Crime Commissioner (OPCC) is responsible for commissioning the Nottinghamshire Victim CARE (Cope and Recovery Empowerment) service. The service, currently delivered by Catch22, provides victim-centred and outcomes-focused support to empower victims and survivors to cope and recover from crime, anti-social behaviour, hate incidents, and identity theft, whether the crime has been reported to the police or not. The service is for all victims of crime and anti-social behaviour, with the exception of domestic abuse and sexual violence for which specialist services are separately co-commissioned. In addition, Nottinghamshire Victim CARE also provides a Restorative Justice (RJ) service.

In order to shape the commissioning of future victim support services in Nottinghamshire, social research organisation TONIC were commissioned to conduct an independent Victim Needs Assessment (VNA) and review the current model.

Design, Methodology and Sample Overview

To undertake this VNA, TONIC conducted the following work, which engaged over 450 local victims and professionals:

- **Literature review** of existing research, surveying, and synthesising both national and international literature, to provide insight into the current understanding and knowledge.
- **Quantitative data analysis** covering national trends in crime, local police recorded crimes, and referral and intervention information alongside demographic data of those accessing Nottinghamshire Victim CARE.
- **Surveys** reaching 401 people, including 355 victims and service users and 46 key stakeholders.
- **In-depth interviews** with 50 people, including 22 victims and service users and, 28 key stakeholders.

The landscape of support

Nottinghamshire Victim CARE is a free, independent, and confidential service that aims to provide a wide range of victim-centred and outcomes focused support services to empower victims and survivors to cope and recover from crime[1] and anti-social behaviour, regardless of when the crime occurred and whether the incident has been reported to the police or not. Support from Nottinghamshire Victim CARE is available to those of all ages and referrals can be made by the police, professional agencies, or individuals can self-refer into the service.

The model operates through a Victim CARE hub which delivers expert, tailored, one-to-one victim support as well as offering a Restorative Justice service. Additionally, the model manages a Community Points Programme, which enables individuals to access a diverse range of victim friendly services via community groups and organisations within their communities.

The level of need for victims in Nottinghamshire

Latest estimates from the Nottinghamshire Police and Crime Survey suggest that as much as 52% of crime in the year to March 2022 may have gone unreported. Although the Nottinghamshire Victim CARE service offers support to all victims, even those who have not reported a crime to the police, the data shows that self-referrals and those from community points are very low, and that the majority of referrals (over three quarters) are made through the police when a crime is reported. This means that there is a significant level of unmet need in relation to victims of unrecorded crime in the community. One of the challenges for future services is to increase the reach of support to these 'hidden' victims.

Of those who do report a crime to the police, only 14% receive a referral to Victim CARE. This means that the majority of victims who report a crime are not being referred for support. Victims and stakeholders feel that the offer of support is often not made at the right time or in an manner they fully understand. In addition, opt-in consent procedures act as a further barrier relying on victims giving their consent at a time many are experiencing high levels of stress and anxiety due to the crime they have experienced.

This is a crucial touchpoint in the system where victims can slip through the net, and it poses a real challenge for Nottinghamshire Police and future support services to ensure more victims are aware of and understand the support offer, receive it at the right time and continue to have access to the offer beyond the initial point of reporting.

Once referred into the service, over a third of victims are not successfully contacted due to incorrect contact details or not answering the phone. This becomes another point at which victims slip through the net unnecessarily, and fall away from services and support.

In the end, only around 10% of victims who report a crime to the police receive support through Victim CARE; 8% receive standard support and 2% receive enhanced support. When estimated crime prevalence is taken into account, including unrecorded crime, this reduces to only 5% of all victims who receive support through Victim CARE.

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[1] Nottinghamshire Victim CARE does not support those who have experienced domestic or sexual abuse, as these services are delivered by other specialist providers

A priority moving forward must be to ensure that more victims are aware of and are able to access support after becoming the victim of a crime, and that access points into support are embedded throughout the victim journey.

Once receiving support, the Victim CARE service meets the needs of victims very well and provides a tailored and individual approach to care. In particular, victims and stakeholders value the caseworker approach which provides service-users with a single point of contact and a trusted professional who understands their circumstances and is aware of their individual needs at each point in the journey.

Despite these high levels of satisfaction among service-users, there are always areas for improvement. The views and experiences of victims provide a clear set of priorities for the areas in which service development is needed. These include: greater awareness, understanding and visibility of the service within communities, police stations and online; better mental health advice, guidance and support within the service; more specialised support in relation to being the victim of fraud; a more trauma-informed approach from partner agencies such as the police; and greater cultural awareness within the service of the diverse needs and experiences of minoritized ethnic communities across Nottinghamshire.

Although many victims are still being missed, the demand for the Victim CARE service has been increasing year-on-year and referrals are at their highest ever level, up 26% in the last year. As current capacity is stretched, there is a risk of losing the one-to-one individualised approach that is so valued by victims and proven to meet support needs to high levels of satisfaction. Moving forward, it is important to ensure resourcing meets the increasing demand for the service in a manner that can retain the offer of tailored intervention.

Recommendations

A number of recommendations are set out below which address the levels of need for victims in Nottinghamshire that have been identified in this assessment. They are intended to guide the commissioning of future victim support services.

Ensure sufficient resources are provided to meet the needs of service users and to accommodate fluctuations in demand and crime trends

A future Victim CARE service should provide a flexible model for commissioners such that resources can be scaled up or down depending on changing need and demand. The current picture suggests a high level of unmet need as only a small proportion of victims are referred to, and then take up, support. The ambition for future services should be to engage with victims who are either not known or not being referred at the point of reporting, and to increase levels of victim engagement, particularly from minoritized ethnic communities.

To achieve this, alongside a baseline of increasing demand, additional resource should be allocated to:

- Broadening the reach of the service and engaging a larger proportion of victims (e.g. through embedding additional caseworkers in the community)

- Addressing current gaps in provision (e.g. mental health specialist support; dedicated outreach caseworkers to engage particular communities)
- Ensuring caseloads continue to enable tailored intervention by identifying appropriate practitioner/caseload ratios to ensure sufficient capacity is maintained.

Consider a hybrid approach to opt-in/opt-out consent where identified crime types and/or victim profiles are automatically referred for support (opt-out) while others identified continue on an 'opt-in' basis

There are opportunities to improve and increase access to support for victims through a revised approach to referral and consent procedures. While opt-out procedures would ensure reaching a greater number of victims, this will also require increased resource within the service in relation to a) an estimated fourfold increase in referrals for follow-up contact and b) an increase in caseloads as more victims are contacted and take up the offer of support.

Develop clearer, robust referral pathways, and disseminate these to all potential referrers

Victims and stakeholders highlighted a need to improve referral pathways into Victim CARE. Clarifying the message for victims, potential service users, and all relevant professionals of what support is available and who the service has been designed for is essential in order to support stronger referral pathways. For example, some agencies were not aware that support through Victim CARE is available even if the crime has not been reported to the police.

Improve website functionality and ensure all information provided is up-to-date and accurate

Information on the website is relatively static and needs to be updated more regularly with accurate information, changes and updates. We recommend developing the website to be more victim-focused speaking directly to individuals seeking support and providing comprehensive information and resources. In order to ensure people are directed to the right information for them, we suggest demarcating sections of the website 'for professionals' and 'for victims'. We also advocate developing a self-service web mechanism by providing an online portal for users. A portal can include mechanisms for accessing further information, providing case details, providing automated updates and a messaging service.

Improve data recording and information sharing agreements between Victim CARE and key partners

Data and information sharing was frequently raised by stakeholders as a key barrier to providing a seamless and robust service, with significant delays in access to information. This was the case in particular for the restorative justice service, where clear information pathways between key partners (e.g., Probation and Victim CARE) were not readily available. However, Victim CARE staff also reported difficulty in accessing data from the police where this was needed to follow up for particular support cases. In addition, without full data on who is not taking up the service, which is held only by the police, it is difficult for the service to monitor and analyse demand, need and gaps. We would advocate reconsideration of previous data sharing agreements with Nottinghamshire Police to support better information, sharing and monitoring.

Notts Victim CARE should proactively seek to engage with individuals who have protected characteristics using a range of approaches

Victims from minoritised ethnic backgrounds are less likely to access support. Whilst the reasons for this are not fully understood and require further research, it is vital that this is not overlooked and that Nottinghamshire Victim CARE attempts to overcome such barriers as effectively as possible. There is a particular need for awareness raising initiatives within these communities. There should be availability of appropriate interpreters/translators as needed for anybody whose first language is not English, and consideration should be given to translating the website to include versions in multiple languages.

Consideration should also be given to provision of support for individuals with specific protected characteristics facilitated by someone of their background, accepting that there may also be preference for help from outside of the community, and this should be guided by the individual and their circumstances. As such, we recommend Victim CARE consider recruiting outreach caseworkers from particular communities of interest. This would require a dedicated and skilled individual who could take on an assertive outreach role, to ensure communities feel represented in the service offer.

Reconsider the function and purpose of community points in the wider victim CARE model and consider moving to a 'narrow and deep' versus 'wide and shallow' approach

Currently, there are a high number of community point organisations which are inactive or engage very little with the Victim CARE hub, despite resource being dedicated to outreach and development work. In addition, referrals into the service through community points are very low. We would advocate reconsidering the referral and support function of the community point model and refocusing resource on a narrower but deeper engagement with identified organisations. A more targeted approach could yield better results more efficiently. Resource could be redirected from the community point programme to employing the dedicated outreach caseworkers identified above and embedding them in a number of local community organisations on a walk-in/surgery basis.

Engage the victim voice in the future design and implementation of Notts Victim CARE

Wherever possible, Victim CARE should consult with victims on what support is needed and how victims want support to be delivered. This activity should be over and above service evaluation and feedback surveys, which should also be regularly collected, it should be responsive to victims' needs and be used pro-actively to drive improvements. We would advocate a wide programme of victim voice engagement activity, including providing opportunities for consultation and co-design of any future service. In particular, it is vital in recommissioning to engage potential service users who have protected characteristics in facilitated co-design and co-production activity in order to ensure the service is meeting the needs of those individuals and communities.

Broaden the Restorative Justice offer through co-missioning and improved partnership working and education

It is currently not possible to truly estimate the need and demand for a restorative justice service in Nottinghamshire, as there are systemic barriers that have resulted in a very low take up and a lack of awareness of the current restorative justice offer. The need, therefore, is to promote a system change in partnership working and collaboration across the spectrum of victim and offender services

in order to lead the restorative justice agenda across Nottinghamshire and promote buy-in from key stakeholders. Initial investment should be on addressing these system barriers and improving education and understanding among key stakeholders.

Incorporate the need to raise awareness of the service into the future contract

A future service must take a pro-active approach to service promotion and awareness of the support offer. Although there is currently outreach and promotion work being undertaken, for many key stakeholders, partner agencies and victim themselves, these messages have not been landing sufficiently and general awareness of the service was poor. Clear visibility of the service, including information and contact details, must be in place at all police stations, on social media platforms and in community settings with active and dynamic engagement with the public.

1. Introduction

The Police and Crime Commissioner (PCC) for Nottinghamshire, Caroline Henry, has published her new 'Make Notts Safe' Police and Crime Plan for 2021-2025. Within this, she sets out as one of her three key priorities 'supporting victims and survivors, witnesses, and communities'. In order to shape the commissioning of future victim support services in Nottinghamshire, PCC Henry instructed TONIC to conduct an independent Victim and Restorative Justice Needs Assessment (VNA) and review the current Nottinghamshire Victim Cope and Recovery Empowerment (CARE) model.

The Office of the Police and Crime Commissioner (OPCC) is responsible for commissioning the Nottinghamshire Victim CARE service. The service, currently delivered by Catch22, provides victim-centred and outcomes focused support to empower victims and survivors to cope and recover from crime, anti-social behaviour, hate incidents, and identity theft, whether the crime has been reported to the police or not. The service is for all victims of crime and anti-social behaviour with the exception of domestic abuse and sexual violence, for which specialist services are co-commissioned separately.[2] In addition, Nottinghamshire Victim CARE also provides a Restorative Justice (RJ) service.

1.1. SCOPE

TONIC commenced work on the 16th December 2021 with a view to identifying:

- The support needs and profile of victims and survivors of crime in Nottinghamshire
- Considerations required for victims with protected characteristics
- Victims and stakeholders' views on RJ provision
- The extent to which current services within the Victim CARE and RJ offer are responsive to the needs of victims
- An appraisal of consent procedures for referral to Victim CARE
- Victim and stakeholder views on Nottinghamshire Police's adherence to the Victims' Code in relation to victim support
- Strengths, weaknesses, and gaps in the current model
- Existing barriers to accessing support
- Recommendations for improvements and future service delivery.

1.2. ABOUT TONIC

TONIC are specialists in social research and public consultation with a focus on criminal justice and public health. With a team of highly experienced and skilled researchers, academics, practitioners, and analysts, TONIC aims to help organisations make the best use of public funds and to assist them in improving outcomes for the public, especially vulnerable and under-represented groups. TONIC values the voice of service users, as well as stakeholders, partners, providers, and commissioners, to inform real-world change based on the evidence. This consultation was led by Dr Amanda Carr, working

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[2] Specialist services for domestic abuse and sexual violence are not in scope of this VNA. These services do not form part of the Victim CARE model and have been subject to separate reviews. However, where relevant to national and local crime trends we have included data on domestic abuse and sexual violence for comparative purposes, but have not reviewed services nationally or locally in relation to these crimes.

alongside Senior Researcher and Analyst Daisy Elvin, Research Associate Sanjidah Islam, and Director of TONIC, Matthew Scott.

2. DESIGN AND METHODOLOGY

2.1. LITERATURE REVIEW

We provide a brief literature review of existing research and policy, to offer insight into current understanding, knowledge, and best practice. Relevant research was identified using a systematic approach to literature searching, primarily using Google Scholar and databases such as PsychINFO. There was no restriction on publication year. Abstracts were read and screened to establish relevance and reference lists were subsequently searched, with a focus on UK and local documents. In addition, we used key websites and best practice guidance such as Home Office data, Crime Survey of England and Wales (CSEW) data, Government guidelines, and third sector organisations' reporting action research.

2.2. FIELDWORK – SURVEYS AND INTERVIEWS

In consultation with the OPCC commissioning team, two anonymous online surveys were developed: one for victims and service users, and one for key stakeholders including service providers and frontline practitioners. The surveys were hosted by TONIC on SurveyMonkey and yielded both quantitative and qualitative data. There were two pre-existing inclusion criteria for victims, which meant they must have been:

1. the victim of crime in Nottinghamshire within the last 3 years
2. the victim of a crime other than Domestic Abuse and Sexual Violence.

Individuals who did not meet the eligibility criteria were automatically transferred to a disqualification page that provided signposting to relevant support services if desired.

Interview schedules were developed for victims/service users and for stakeholders, also in consultation with the OPCC commissioning team. Interviews were semi-structured and designed to feel like a 'conversation with a purpose' (Burgess, 1982).

Victims and service users were recruited to take part in the survey and interviews through a combination of promotional materials that TONIC produced, distributed through social media by the OPCC, Nottinghamshire Police, and Victim CARE, and where possible, directly through service user databases. In addition, TONIC used targeted paid for social media advertising and panel responses in order to directly recruit victims and service users in Nottinghamshire. In order to hear from a representative sample, and in addition to our targeted advertising, we also directly approached community organisations including the Community Listening Groups, NottsEqual, Nottingham Together, The Green Academy Trust among others, in order promote our survey directly within the community.

At the end of the survey respondents had the option to sign up to 'Tell us more' if they were willing to take part in an interview, which took place by telephone or video call depending on participant preference. All victims and service users received a £20 Amazon voucher as a thank you for taking part in an interview.

The OPCC and Victim CARE provided the contact details of relevant professionals and stakeholders and an introductory email encouraging stakeholders to engage with the VNA and provide feedback. TONIC followed this up with a request to sign up for stakeholder interviews. Many stakeholders who were unable to take part in an interview completed the online survey as an alternative way of engaging. All fieldwork for this VNA was conducted between 21st January 2022 and 16th March 2022.

To analyse the qualitative data, TONIC researchers used Braun and Clarke's (2006) six-step method of Thematic Analysis:

> Step 1: Become familiar with the data
> Step 2: Generate initial codes
> Step 3: Search for themes
> Step 4: Review themes
> Step 5: Define themes
> Step 6: Write-up

Thematic Analysis was chosen due to its flexible nature and compatibility with a social constructionist approach. Thematic Analysis was used to explore the dataset as a whole and consider themes that emerged across survey responses and interviews, applying a constant comparison approach (Butler-Kisber, 2010), considering similarities as well as differences between individual narratives and sources of feedback. Within this framework, we used an inductive method, whereby themes were derived and grounded in participant responses, rather than being imposed on the data from a pre-existing theory or hypothesis.

The TONIC Project Lead remained in regular contact with the OPCC commissioning team via weekly progress meetings and/or email updates throughout the duration of the consultation.

2.3. QUANTITATIVE DATA

We have used a number of sources of quantitative data in this assessment. For national trends and crime prevalence rates we used the Crime Survey for England and Wales published by the Office for National Statistics. For local data we have drawn on Nottinghamshire Police recorded crime statistics for 2019, 2020 and the first 6 months of 2021. We are also received data from the Nottinghamshire Police and Crime Survey which monitors self-reported experience of crime from a representative sample. We also requested comparative data from other PCC areas within the Most Similar Group for further comparison. However, we received very little data from other areas and have therefore not included a most similar group comparison.

2.4. ETHICAL CONSIDERATIONS

TONIC researchers were extremely conscious of the sensitive nature of this VNA. In line with TONIC's safeguarding policy, the team all had enhanced DBS certification and worked in accordance with the British Psychological Society's Code of Ethics and Conduct.

Surveys and interview schedules were designed in a way that meant participants were only asked to share information they felt comfortable doing so. TONIC endeavoured to make the experience of contributing to this project as empowering as possible and all interview schedules and survey content were signed off with the OPCC commissioning team before being used. At each stage, during the survey and interviews, we offered details of support from Notts Victim CARE for any participants negatively affected by their participation in the research. In addition, signposting to Notts Victim CARE was given to all participants.

The TONIC team all have experience in motivational interviewing and are able to establish and build a rapport with service users, skills which were utilised in an attempt to make participants feel as comfortable as possible. Throughout, service users were able to remain completely anonymous (even from the researchers) if they wanted to, and only the TONIC team involved in this project had access to the raw data collected.

Responses to the questions have been used for the purpose of this project only. All identifiable information has been removed from quotations used within this report, and participants' data protected in line with the EU General Data Protection Regulation (GDPR, 2018).

3. LITERATURE REVIEW

3.1. TRENDS IN CRIME AND VICTIMISATION

3.1.1. National Trends in Crime and Victimisation:

According to the Office of National Statistics (ONS, 2022), based on estimates from the CSEW[3], for the year ending September 2021, there was a 14% increase in total crime compared to the year ending September 2019 – this was driven by a 47% increase in fraud and computer misuse. When excluding fraud and computer misuse crimes, there was a 14% decrease, largely driven by an 18% decrease in theft offences. The CSEW includes data on domestic and sexual violence and abuse.

The Telephone-Operated Crime Survey for England and Wales (TCSEW) estimated that adults aged 18 and above experienced 12.9 million offences in the year ending September 2021, while police recorded 5.8 million crimes in this period (a 2% increase compared to the previous year). Latest estimates reveal that 8 in 10 adults did not experience any of the crimes covered by the TCSEW in the

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[3] The CSEW estimates provide the best indicator of long-term trends in crime – estimates from the TCSEW 2021 (used to capture trends in crime while face-to-face interviewing was suspended) have been compared with the pre-coronavirus year ending September 2019.

year ending September 2021. The graph below displays the likelihood of being a victim of different crime types between October 2020 and September 2021, this demonstrates that:

- 77.9% of adults did not experience a crime
- 8.9% experienced fraud
- 3.6% experienced computer misuse
- 2.9% experienced criminal damage
- 2.9% experienced vehicle-related theft
- 2.0% experienced violence
- 1.7% experienced domestic burglary
- 1.5% experienced bicycle theft
- 0.4% experienced theft from the person
- 0.2% experienced robbery

Figure 1: The likelihood of being a victim of crime, by crime type in England and Wales, October 2020 – September 2021 (ONS – TCSEW)
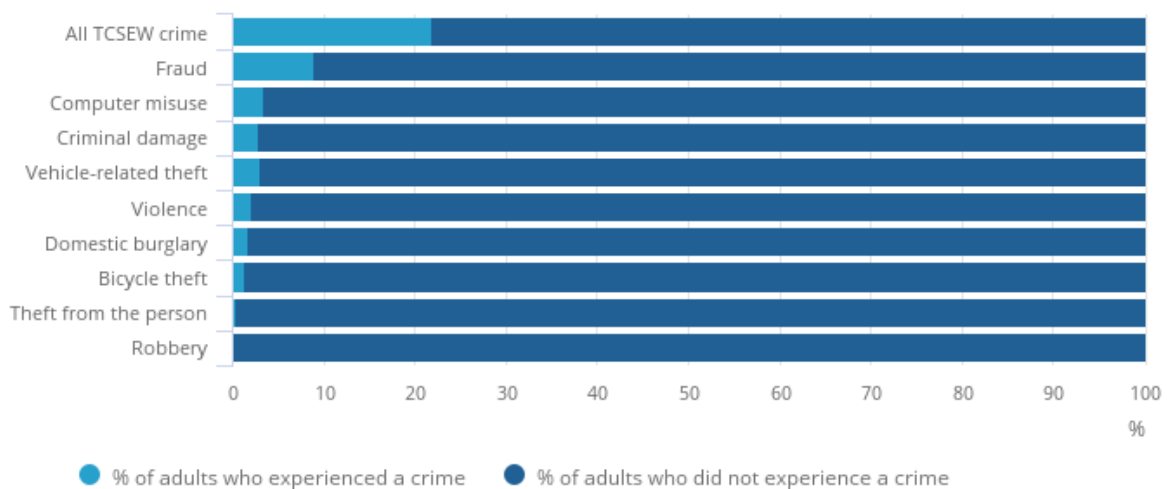
The TCSEW indicated little change in the total number of incidents of violence, but a 27% decrease in the number of victims of violent crimes – mostly related to reductions in violence perpetrated by a stranger, where the number of victims has declined by 50%[4]. Police recorded crime data demonstrates that compared to the year ending September 2020, there was little change in the number of homicides – with a 5% increase to 666 offences recorded[5], a 9% decrease in the number of police recorded offences involving firearms, and a 10% decrease in offences involving knives or sharp instruments.

3.1.2. Local Trends in Crime and Victimisation

3.1.2.1. The Nottinghamshire Police and Crime Survey

The Notts Police and Crime Survey is commissioned by the Nottinghamshire Police & Crime Commissioner and has been undertaken on a quarterly basis across the police force area since June

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[4] This is not indicative of levels of domestic abuse during the pandemic.
[5] Excluding the Grays lorry incident.

2017. The survey tracks indicators of public trust and confidence in the police and resident's experience of crime and ASB and their satisfaction with any policing services received. The survey achieves over 4,260 responses per year based on a sampling scheme representative of the local population at local authority level by age, gender, employment status and ethnicity.

Aggregated data from the survey for the 12 months to March 2022, shows that crime prevalence and the experience of being the victim of a crime in Nottinghamshire is broadly in line with national trends. In the Nottinghamshire Police and Crime Survey, 31% of respondents reported being the victim of a crime. When online fraud and computer misuse offences are excluded, this is reduced to 17%.

Figure 2: The likelihood of being a victim of crime (excluding online fraud) in Nottinghamshire May 2021-March 2022 (Notts Police and Crime Survey)
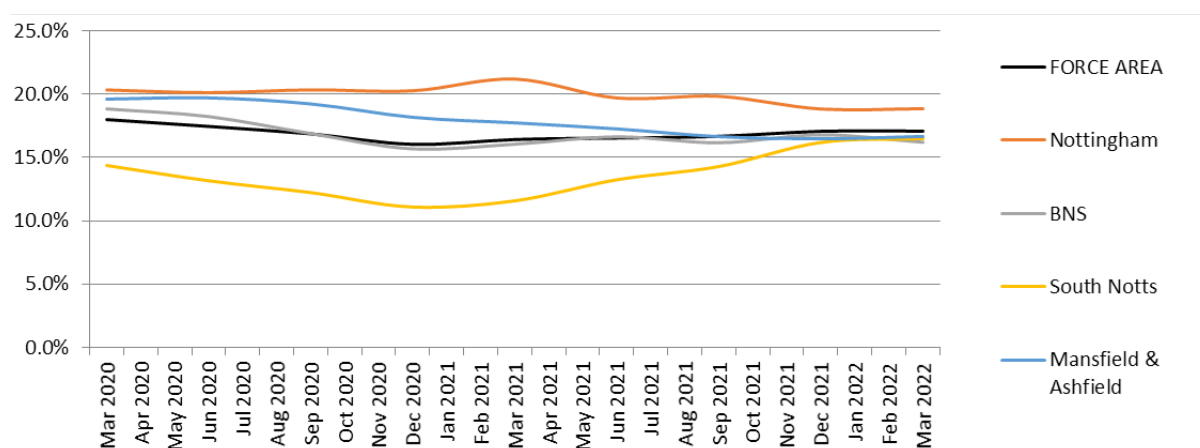
1 in 5 respondents reported being a victim of online fraud in the 12 month to March 2022, which remains the most commonly experienced crime type across Nottinghamshire. As seen nationally, this crime type has significantly increased in recent years. Although early signs from Quarter 4 in the 2021/2022 Notts Police and Crime Survey, suggest this may be starting to reduce; over the course of the year to March 2022 online fraud increased by 2.0% points. There were also small increases reported in intimidation and harassment (+1.8% points) and hate crime (+ 1.4% points); all other crime types saw a year on year reduction in reported prevalence, compared with the previous year.

3.1.2.2. The Nottinghamshire Police recorded crime

The Nottinghamshire Police recorded a total of 89,873 crimes (excluding fraud) for the year ending September 2021 (as detailed in the table below), this represented a 7% decrease in recorded crime on the previous year, mirroring the trend across the whole of England and Wales. There were a further 7,908 fraud and computer misuse offences recorded by the police in Nottinghamshire for the year ending September 2021. Additionally, there were a total of 48,206 incidents of anti-social behaviour in Nottinghamshire for the year ending March 2021.

In the year ending September 2021, police in Nottinghamshire recorded an increase in sexual offences, public order offences, and fraud and computer misuse offences compared to the year ending September 2020. This generally reflects trends across the whole of England and Wales; although there were also increases in violence against the person and miscellaneous crimes nationally. All other crime

types recorded by the police in Nottinghamshire decreased. In the year ending September 2021, Nottinghamshire made up between 1.3% (robbery) and 2.5% (miscellaneous crimes) of each crime type in England and Wales and made up 1.8% of the total recorded crime in England and Wales (excluding fraud). In terms of incidents of anti-social behaviour, recorded statistics for Nottinghamshire have been steadily rising in recent years.

Table 1: Police recorded crime in England and Wales (ONS), and Nottinghamshire for the years ending 2020 and 2021.

	England and Wales		Nottinghamshire	
	2020	**2021**	**2020**	**2021**
Violence against the person	1,791,757	1,928,366	32,210	31,653
Sexual offences	153,136	170,973	2,940	3,027
Robbery	75,070	61,486	1,002	782
Theft offences	1,588,165	1,361,665	33,442	28,092
Criminal damage and arson	521,383	502,138	10,911	10,557
Drug offences	198,780	191,402	4,540	4,241
Possession of weapons offences	46,679	45,408	1,082	1,072
Public order offences	477,449	548,177	7,484	7,692
Miscellaneous crimes	108,865	112,344	2,997	2,757
Total recorded crime (excluding fraud)	**4,961,284**	**4,921,959**	**96,608**	**89,873**
Fraud	352,132	441,837	6,566	7,908

3.2. THE IMPACT OF CRIME ON VICTIMS

It is well documented that the impact of crime on victims can be far reaching, including physical and emotional injury, long-term psychological and mental health effects, negatively influencing future trust, sense of fear, and feelings of safety, all of which can impact on various aspects of a victim's life,

such as housing, employment, finance, and relationships. Furthermore, crime is extremely costly[6] to society, with a minimum estimated cost of £10,407 per incident of violence against a person (Heeks et al., 2018). This covers costs from the Criminal Justice System (CJS) administration, through to supporting a victim following the incident. Over half of victims report substantial psychological harm, with nearly a quarter describing having to change their daily routine, and 10% indicating negative repercussions on their family (Pettit et al., 2013). Unsurprisingly, the detrimental physical and psychological impact of victimisation is more likely for individuals who already experience existing mental or physical health problems (Pettit et al., 2013).

3.3. SUPPORTING VICTIMS

As outlined in the Victims' Commissioner's Annual Report (2015-16), Baroness Newlove highlighted a critical gap between policy and the lived-experience of victims:

"I have no doubt that criminal justice agencies are genuinely aware of the importance of engaging with victims and treating them decently. There is certainly no lack of written statements and intentions. Yet from what my reviews have highlighted there is a gap between what is intended and what actually happens." (p4)

Around the same time, the Victims' Services Commissioning Framework (2013) set out eight categories of need for victims:

1. Mental and physical health
2. Shelter and accommodation
3. Family, friends, and children
4. Education, skills, and employment
5. Drugs and alcohol
6. Finance and benefits
7. Outlook and attitudes
8. Social interactions

These categories of need are the key areas in which service providers should aim to help victims of crime achieve improvements in their life following the crime that occurred.

More recently, there has been a shift in the culture of the CJS to recognise the importance of better engaging with, and supporting the needs of victims, with the aim of instigating change in constitutional law (i.e., see Ministry of Justice [MoJ], 2021). A consultation paper hosted by the MoJ (2021) recognises that in order to create such legislation, further understanding and development is needed into what victims should expect from the CJS (in particular communication with the Crown Prosecution Service [CPS], police, and other agencies); the performance and accountability of those responsible

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[6] For estimates of unit costs of crimes by cost category please see:
https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/732110/the-economic-and-social-costs-of-crime-horr99.pdf
However, it is important to note that these figures are likely to have increased since estimates were made.

for supporting and engaging with victims; the 'Victim Surcharge'; improvement in the community-based support service; and improved advocacy support.

When looking at the support needed by victims, the government has increased its funding for victim support, including substantial increases for domestic abuse, sexual violence, minoritised ethnic communities[7], those identifying as LGBTQ+[8], and disabled victims. Although this is welcome for improving the treatment of victims, it could be argued that the MoJ (2021) consultation focuses too heavily upon the overarching structure for support, failing to attend to specific needs. In terms of what victim-focused agencies have suggested for the future of working with victims, it is evident more specific action is needed. For example, Victim Support have recognised the changing landscape following the COVID-19 pandemic and would like to see the government focus additional attention on early intervention services (in particular for domestic abuse, i.e., through education), alternative funds for domestic abuse victims with no access to public funds, outreach services for victims of hate crime, and additional funding to provide COVID-19 safe spaces for face-to-face and private meetings (Almeida, 2020).

The commissioning landscape for victim support services is complex, with responsibility divided over national commissioning bodies such as government departments (i.e., MoJ) or NHS England, and local commissioning bodies such as PCCs, Clinical Commissioning Groups (CCGs), and local authorities (MoJ, 2021). Accordingly, this can lead to a disjointed landscape of support, including difficulties in partnership working, ownership, accessing funding for specialised support, and can create gaps in provision (MoJ, 2021).

More generally, there is a recognition of 'what works' for supporting the needs of, and engaging with, victims. Summarised from a recent rapid review (2019), this includes:

- Providing information and good communication with victims
- Allowing victims to access procedural justice
- Multi-agency working
- Employing professionals within specialised services, which can include having individualised support, and allocating case workers to support a victim through their entire recovery journey.

Encouragingly, contact with victim services has increased over the years (Victims Statistics, 2020). Although, the Victim's Commissioner report (2020) indicates that victims who have reported a crime

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[7] We have used the term 'minoritised ethnic communities' to refer to any individual or community which is marginalised or minoritised. The term has been recommended more recently as it recognises that individuals have been minoritised through social processes of power and domination rather than just existing in distinct statistical minorities. It also better reflects the fact that ethnic groups that are minorities in the UK are majorities in the global population. We have used the term in the report in replace of 'BAME'.

[8] It is important to recognise the diversity of sexuality and gender identities that exist, and to acknowledge that not all transgender individuals identify as being LGB. Where possible, support services, should consider distinctions between issues of sexual orientation and gender identity in recognition of the fact that those identifying as part of the LGBTQ+ community are not a homogeneous group and should not be treated as such. We have used the umbrella term LGBTQ+ believing this to be the most inclusive; however, we recognise that this acronym does not necessarily reflect the nuances and individual journeys and is, as such, arguably becoming increasingly less inclusive. The + is intended to extend to other non-normative sexualities such as asexual or pansexual.

to the police are far more likely to have contact with victim support services, than those who do not report the crime (Victims Statistics, 2020). According to this report, of those who made contact with victim services, the majority said the support they received helped them to cope with the impact of crime, and some stated that it helped them recover. Face-to-face support was seen to help them cope the most, followed by telephone support. Support was described as more beneficial for helping a victim to cope with certain crime types – namely, violent or sexual offences and burglary – over others. While the majority of victims report not receiving any information about services following a crime, many stated they would not have wanted any support.

The overall ethos of supporting victims emphasises adopting a whole-systems approach with collaborative working and communication between all in the process, better accessibility, identification of needs and quality of provision through evidenced-based interventions and transparency about services efficiency. The ultimate aim is service development that provides a process which puts victims first, helping them to cope and recover, whilst still adhering to the Code of Practice for Victims of Crime 2015 (updated 2020; MoJ).

3.3.1. The Code of Practice for Victims of Crime 2021

The Victims' Code of Practice (VCOP) forms part of a wider Government strategy to transform the CJS by putting victims first, making the system more responsive and easier to navigate. The document sets out that victims of crime should be treated:

"In a respectful, sensitive, tailored, and professional manner without discrimination of any kind. They should receive appropriate support to help them, as far as possible, to cope and recover and be protected from re-victimisation."

Police and Crime Commissioners are responsible for ensuring effective delivery of the VCOP for victims of crime within their area. They have a legal duty to consult with victims in setting the policing priorities for their area, and are responsible for commissioning many of the services that support victims outlined in the Code.

The VCOP was updated in November 2020 by the MoJ and makes clear that victims of crime should know what information and support is available to them from reporting a crime onwards and who to request help from if they are not getting it. The VCOP sets out the services and minimum standards that must be provided to victims of crime by organisations in England and Wales. It applies to all criminal justice agencies, including the police, CPS, courts, and the probation service. In summary, the Rights are as follows:

1. To be able to understand and to be understood
2. To have the details of the crime recorded without unjustified delay
3. To be provided with information when reporting the crime
4. To be referred to services that support victims and have services and support tailored to your needs
5. To be provided with information about compensation
6. To be provided with information about the investigation and prosecution
7. To make a Victim Personal Statement

8. To be given information about the trial, trial process and your role as a witness
9. To be given information about the outcome of the case and any appeals
10. To be paid expenses and have property returned
11. To be given information about the offender following a conviction
12. To make a complaint about your Rights not being met.

Which Rights apply will depend on whether the crime is reported to the police, if the case goes to court, and whether the defendant is convicted, as well as the individual's personal needs and circumstances. Rights 1, 4, and 12 apply to all victims, while the remaining Rights only apply where a crime has been reported to the police. In addition, victims can expect to be treated with respect, sensitivity, compassion, dignity, and courtesy, have their choices and privacy respected, and be supported in a professional manner by services to navigate the criminal justice process (MoJ, 2020). Relevant service providers are expected to inform victims of their rights.

It is important to note that, building on the foundations laid by the VCOP, the current Justice Secretary Dominic Raab has set out plans for the first ever Victim's Law that would guarantee greater consultation with victims during the criminal justice process to ensure their voices are properly heard, and hold agencies such as the police, CPS, and courts to account for the service they provide to victims. An 8 week Victims' Bill consultation was conducted between 9th December 2021 and 3rd February 2022. The consultation sought to increase understanding of how victims can be better supported through and beyond the CJS across England and Wales focusing on questions around:

- What victims should expect
- Performance and accountability
- The Victim Surcharge
- Community-based support services
- Improved advocacy support.

Feedback from the consultation was still being analysed at the point of writing this report.

3.3.2. The Nottinghamshire Police and Crime Plan 2021-25

The PCC for Nottinghamshire, Caroline Henry, has recently published her new 'Make Notts Safe' Police and Crime Plan for 2021-2025[9]. The plan was informed by evidence of issues that are impacting upon Nottinghamshire based on a review of local and national threat assessments, feedback from professionals and practitioners, and listening to the views and concerns of local residents and victims.

PCC Henry's vision is that by the end of her term in office:

"there will be fewer victims, greater trust and confidence in the police and CJS and a stronger and more resilient network of services supporting victims to recover from harm."

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[9] To see the full Police and Crime Plan 2021-2025 for Nottinghamshire, please see:
https://www.nottinghamshire.pcc.police.uk/Document-Library/Notts-Police-Crime-Plan-2022-V5-15-02-22-Digital-Version.pdf

Accordingly, the plan centres on:

1. Preventing crime and protecting people from harm
2. Responding efficiently and effectively to community needs
3. Supporting victims and survivors, witnesses, and communities.

Across each of these areas, the plan includes priority focus on the following issues:

- Serious violence and knife crime
- Violence against women and girls
- Neighbourhood crimes, including burglary, vehicle crime, robbery, and rural crime
- Other high harm offences such as slavery, exploitation, and abuse.

PCC Henry reports being committed to fulfil responsibilities to:

- Promote equal opportunities and community cohesion between diverse communities and work to eliminate discrimination and harassment.
- Have regard to the national priorities for policing set by the Home Secretary, which include terrorism, serious and organised crime, cyber-crime and child sexual exploitation.
- Have regard to the need to safeguard and promote the welfare of children.
- Achieve value for money and keep collaboration opportunities for policing under review.
- Support changes in policy and practice that help to reduce our carbon footprint and enable our buildings, fleet and workforce to become more energy efficient.

3.4. THE IMPACT OF THE COVID-19 PANDEMIC

Criminal activity is an ever-changing landscape; however, the global Coronavirus (COVID-19) pandemic has had a distinctive influence in changing trends in crime, and subsequently the provision of support required by, and offered to, victims (ONS, 2022). As outlined within our summary of the national trends in crime and victimisation, patterns of crime in the year ending September 2021 were significantly affected by the pandemic and government restrictions on social contact. There was substantial variation in the level of restrictions in place during this time and, at times, further variation across regions. This creates a challenge in isolating and uncovering the level of impact that restrictions may have had on patterns of crime. While the number of incidents decreased for many types of crime during periods of national lockdowns, police recorded crime data show indications that over the last 6 months, certain offence types are returning to, or exceeding, the levels seen before the pandemic. This pattern has not yet emerged in the TCSEW data, possibly reflecting the time lag in recording incidents via the survey.

At the beginning of the pandemic and subsequent national and local lockdowns across the UK, there was a noticeable increase in violent crimes (with and without injury, including sexual offences) and fraud, with decreases in burglary, theft, arson, and criminal damage (Almeida, 2020). The Notts Police and Crime survey shows that, while there were regional fluctuations within the county, the most significant increase in crime during the pandemic was online fraud in line with the national picture, the majority of other crimes remained relatively stable. The most recent Police and Crime survey in

Nottinghamshire has shown a small reduction in online fraud in quarter 4 of 2021/2022; a pattern that will only reveal a consistent trend into the next reporting period.

Nationally, the TCSEW (2021) shows a 54% increase in reported experiences of fraud and computer misuse crimes (although other records suggest there has been up to 86% increase in fraud victims seeking support; Poppleton et al., 2021; Almeida, 2020; ONS, 2022). COVID-19-related scams, online shopping fraud, social media and email hacks, bank-related frauds, and dating fraud have been more frequent means of facilitating fraud (Poppleton et al., 2021). Despite not typically being considered to have substantial impact on victims, nearly a quarter of fraud victims are thought to be individuals from highly vulnerable groups, including those who suffer severe psychological and financial harm from fraud, or those who have existing vulnerabilities (i.e., elderly, or young individuals). Therefore, for young victims in particular, fraud can create severe or multiple emotional reactions to their financial loss (Poppleton et al., 2021). Thus, when fraud is so prevalent (believed to currently account for over a third of all crimes), the impact from this crime on society is highly significant (Poppleton et al., 2021).

As expected, the increase in certain types of crime has correlated to increases in the number of victims; however, the effects of this have been most apparent for children and young people (CYP) and those experiencing domestic abuse, who have reported being the most negatively impacted by lockdowns (Almeida, 2020). Increases in victimisation amongst those with protected characteristics has also been seen. For example, people from minoritised ethnic backgrounds have reported more hate crime (Almeida, 2020). This patters in reflected in the Nottinghamshire data, which showed a 1.4% increase in hate crime within the region in the year to March 2022 (Notts Police and Crime Survey 2021/22).

Lockdown added complexity and intensity to the needs of victims. For example, according to Victim Support, increases in mental health problems, decreases in emotional wellbeing, additional pressures (i.e., financial uncertainty, or lack of employment) and a lack of available coping mechanisms during lockdown were thought to make experiencing victimisation more difficult, or exacerbate pre-existing mental health issues like anxiety (Almeida, 2020). Being in isolation for prolonged periods of time has changed the requirements and expectations of victim services, particularly for specific groups of people, such as co-parents, the elderly, those who identify as LGBTQ+, have disabilities, or are financially insecure (Almeida, 2020).

A change in requirements and expectations has resulted in modifications to the way in which victim support services operate. Although they experienced an initial decline in the number of victims accessing services during lockdown (especially from CYP, a trend that did not increase again until schools reopened), this was followed by a sharp increase in demand for services like Victim Support, who noted victims to have found lockdown not only impacted victimisation, but also created barriers for them accessing and engaging with the police, courts, support agencies, and other statutory services like housing, healthcare, and social services (Almeida, 2020). In response to the increased needs of victims, and added difficulties, which have emerged from these barriers, victim services have had to change their ways of working to ensure they continue to meet the needs of victims. The introduction of virtual support (i.e., facilitated via video conferencing) has been a common response by victim support services (Almeida, 2020; The Friendship Project for Children, 2021). Though virtual engagement strategies allow services to continue contact with victims, it can hinder the efficiency of

risk assessing, building rapport, is vulnerable to technical issues, and does not always guarantee a confidential safe space (Almeida, 2020). Limited access to technology or not being confident in using technology are likely to be additional barriers, thus isolating some victims further. Furthermore, staff shortages due to sickness from COVID-19 have exacerbated existing challenges around managing high caseloads, and staff have reported higher levels of stress and burnout, difficulties coping with the emotional strain, issues with accessing/contacting other services for referrals or joint working and it is believed that these concerns will continue to increase (i.e., due to the impact of long court delays; Almeida, 2020).

Overall, it is apparent that the needs of victims are dynamic, especially in such a challenging time as the COVID-19 pandemic. While there has evidently been a shift in focus towards the needs of victims and what works for supporting them, currently, this space is still a developing area. Therefore, establishing a thorough and meaningful understanding of victims' experiences, both at a local and national level is imperative for developing better victim services.

3.5. PROMOTING INCLUSIVITY WHEN SUPPORTING VICTIMS OF CRIME

Many barriers exist for accessing support, including difficulty accessing services or failings in the procedural responses towards supporting victims. The Victims' Commissioner (2021) has indicated that she will be pushing for better support for those who are marginalised or face barriers to accessing support. It is important to note that members of communities with protected characteristics may be exposed to additional experiences of victimisation and barriers, which are briefly explored here.

3.5.1. Minoritised Ethnic Communities

Those from minoritised ethnic backgrounds are typically considered to be among those least likely to access support from the police or commissioned services and many of the barriers to accessing or engaging with victim services are exacerbated for minoritised ethnic communities, particularly issues such as stigma and fear or mistrust of authorities and services. Additionally, individuals from minoritised ethnic backgrounds are more likely to live in the most deprived communities in the UK, and as such tend to have poorer access to services.

When exploring the specific barriers victims from minoritised ethnic communities face in accessing or reaching out for support, an engagement report conducted in 2021 with 107 organisations working with victims of child sexual abuse summarised six common themes, and although sexual offences are out of scope for this VNA, we believe these barriers are still vital to consider here:

1. Victims experience mistrust in, or inadequate access to, organisations such as health and social care, the police and specific services. In addition, victims voiced experiencing racism from statutory services.
2. Language barriers, including poor quality interpreting services which can be a particular barrier to disclosure.
3. Closed communities sometimes act as a barrier to disclosure, but also community leaders sometimes restrict access to external support services. By restricting external support, it was felt this could 'protect the community and culture from influence or harm'.

4. The culture and religious needs of victims were not always felt to be recognised or they felt 'cultural sensitivity' is sometimes used as an excuse to treat those from minoritised ethnic communities differently which acts as a barrier to victims disclosing or reporting their abuse.
5. Shame and honour can act as a barrier to disclosure and reporting
6. Being removed from school at a young age limits learning about morality and in particular consensual sexual activity, and act as a barrier to disclosure and reporting (Kaiser, Choudhury, Knight & Gibson, 2021).

Cultural awareness amongst professionals is paramount to ensure culturally specific needs are met (Dunn, 2007). Many agencies lack awareness, knowledge, and understanding of minoritised ethnic communities and this is at times accompanied by a lack of input, care, and follow up with victims. One of the main dangers with this is an increased risk for under-reporting and a rise in 'hidden victims' from minoritised ethnic communities (SafeLives, 2012). There is also a greater risk of so called 'honour-based violence' within minoritised ethnic communities, an issue which is intensified when victims do not have confidence in agencies' awareness of this (SafeLives, 2012). Subsequently, individuals from these communities commonly lack trust in support services to respond adequately to their needs as a victim. Problems with trust, especially the police, is exacerbated for those victims who have had negative past experiences with public services in their country of origin (i.e., police corruption; SafeLives, 2012).

There also appears to be a disparity in access to support between the second generation of minoritised ethnic victims and 'recently arrived groups', including refugees and asylum seekers. This is predominantly believed to be because of a lack of existing support networks for those who have recently arrived in the UK, or due to them experiencing no recourse to public funds. Individuals' concerns around their potential uncertain immigration status further influences their chances of engagement with services (SafeLives 2012). Often minoritised ethnic victims report a preference for community-led services. While some may prefer workers of the same ethnic background, other minoritised ethnic victims raise concerns around confidentiality if the worker is from the same social network as themselves (Hester et al., 2012). These are all things that must be considered by victim services when supporting or reaching out to individuals from minoritised ethnic backgrounds.

3.5.2. LGBTQ+ Community

Data from the CSEW indicates that LGBTQ+ individuals are more likely to be victims of all crime types when compared to cis-gender people identifying as heterosexual (ONS, 2019b). However, there is extremely limited research exploring this in depth, and there is a particularly noteworthy absence of literature examining victimisation of those identifying as intersex.

Despite a slight recent growth in research into LGBTQ+ people's experience of victimisation, specific considerations for the LGBTQ+ community remain largely invisible in policy and practice. LGBTQ+ individuals are disproportionately underrepresented in voluntary and statutory services, including criminal justice services and there are very few support services specifically targeting this community. Recent studies have illustrated that transgender individuals, when compared to cis-gender individuals identifying as lesbian, gay, or bisexual are more likely to face discrimination and are least likely to access support services (Love et al., 2017). As an example, research has described how transgender

women and non-binary victims report not feeling welcome when accessing women-only services, which can lead to them feeling excluded (Love et al., 2017).

It is essential that practitioners always seek to understand the unique identities and needs of the people they support (SafeLives, 2018). As such, an approach that assumes all victims of crime share a single homogeneous identity is unlikely to be effective, and frontline practitioners need to be mindful of how their client's sexual orientation and/or gender identity may intersect with their experiences of victimisation and understand how these impact on the support they require (SafeLives, 2018). Evidently, insight into victimisation within the LGBTQ+ community is limited, and tailored responses are scarce (Gray et al., 2020), justifying the necessity for further research into this area.

3.5.3. Consideration of other Protected Characteristics

Inequality in service provision has been noted for victims with other protected characteristics too, including age and disability. Services for victims are not always age-appropriate or targeted towards older people, resulting in older people not feeling heard (Safelives, 2016). Older adults who are victimised by someone they trust can face a variety of barriers that prevent them from seeking help. A recent systematic review found that they may be fearful of consequences for themselves (e.g., institutionalisation, retaliation) or the perpetrator, may experience feelings such as shame or self-blame, or may lack knowledge about relevant formal services (Fraga Dominguez et al., 2021).

3.6. RESTORATIVE JUSTICE

3.6.1. Overview and Impact of Restorative Justice on Victims and Perpetrators of Crime

Restorative Justice (RJ) is a voluntary process that brings victims, perpetrators and relevant others together into communication with each other to address and repair the harm caused by crime (Latimer et al., 2005). RJ can help victims to gain closure on what has happened to them, as they are offered the opportunity to explain to the perpetrator how they have been impacted by the crime and to ask questions. Similarly, perpetrators of crime have reported that they are able to 'get on with life' after apologising to victims and taking responsibility for their actions (Shapland et al., 2006). As such, the process aims to meet the needs of both victims and perpetrators in dealing with and recovering from the consequences of the crime. It aims to achieve moral and social repair with positive psychological consequences (Latimer et al., 2005).

RJ sits within a broader spectrum of Restorative Practice, a social scientific approach to preventing conflict, building relationships and repairing harm through positive and effective communication (Restorative Justice Council, 2016). Restorative practice is increasingly used in schools, workplaces, communities and within the criminal justice system. RJ is a formal process within the wider toolkit of restorative practice interventions.

In order for RJ to take place both parties must first and foremost provide consent to participate and demonstrate suitability for the process. This is in itself a challenge if, for example, the victim of crime is seeking closure but the perpetrator is not willing to participate (Dieu et al., 2021). Drawing from relational theory, RJ can be thought of as a peacebuilding process, trying to alter how individuals relate

to one another (Parker & Bickmore, 2020), and even helping victims to humanise perpetrators in some instances (Suzuki & Yuan, 2021). The ultimate aim of RJ is to provide victims of crime with closure that may be essential in helping them begin to recover. Another welcomed outcome of RJ is helping to reintegrate perpetrators within the community by demonstrating the impact they have had (Scheuerman & Keith, 2022); there is evidence to suggest that participating in RJ reduces the likelihood of a perpetrator re-offending by 14% in adults (Shapland et al., 2008) and 34% in youth offenders (Criminal Justice Alliance, 2017). Advocates of RJ describe it as an 'empowering process' as it enables victims and perpetrators of crime to partake in the resolution and recovery process together (Willis & Hoyle, 2022).

Research has widely found that RJ has a positive effect on the process of recovery for victims. For example, although many victims have concerns regarding potential re-victimisation, in a meta-analysis carried out by Sherman et al. (2015), RJ was found to decrease the fear of re-victimisation and post-traumatic stress in victims, which has a significant impact on recovery and healing. Research has also demonstrated that that 85% of victims participating in RJ are satisfied with the process (Shapland et al., 2007).

In the US, Canada, and Bangladesh RJ has been used as a diversionary scheme and has been found to reduce imprisonment through effective rehabilitation by holding perpetrators of crime accountable for their behaviours in a different way, which in turn helps to reintegrate them into society (Zhang & Xia, 2021). As a result of this, RJ is seen by some as offering the potential to ease the burden on the courts and criminal justice system while enabling a method for dealing with potentially more minor offences (Maglione, 2020), although it is also used for more serious crimes as well (D'Souza & L'Hoiry, 2021). Evidence suggests that victims of serious crime are more likely to engage with restorative justice the more time elapses since the offence, whereas the likelihood of engaging with restorative justice for less serious crimes decreases over time since the offence occurs (Zebel et al., 2017). These findings suggests a targeted approach to the timing of restorative justice may increase uptake and result in an equal likelihood of victims of minor and more serious crimes benefitting from a restorative justice process.

3.6.2. What Works when delivering Restorative Justice

In the UK, RJ does not replace the normal criminal justice processes and is not a 'soft' option for perpetrators of crime. It can take place alongside punishments imposed by the police, crown prosecution service, and courts – even if perpetrators go to prison.

There are various types of restorative practice in operation in the UK. These include:

- Direct or indirect Restorative Justice: the victim and perpetrator of crime, guided by a facilitator, communicate with one another. Other people can also be involved in the process, such as supporters of the victims and perpetrator, and members of the wider community. This can take place through a direct face-to-face meeting, or, when several other people are involved, a conference; or indirectly with the facilitator acting as 'go between' in 'shuttle mediation' or parties communicating through letter writing. An agreement is usually reached to decide how best to repair the harm caused and a rehabilitative programme may be agreed.

- Community conferencing: this is a large-scale conference particularly useful at resolving anti-social behaviour. These conferences can deal with a large number of participants including local community members, several victims and perpetrators. In this approach the community as a whole is often the victim. This process is similar to community problem solving meetings. However, it is restorative if the process focuses on the harm caused and its resolution.
- Referral Order panels: young people who receive a court Referral Order attend a panel meeting to discuss their offence and the factors that may have contributed to their offending behaviour. The panel is made up of Youth Offending Team staff and community volunteers. The victim, or their representative, may also attend so that their views may be put forward.
- Mediation: mediation is a process in which an impartial third party - the mediator - helps people in dispute work out an agreement. The people in dispute work out the agreement rather than the mediator, who runs the meeting with ground rules.

3.6.3. Identified Barriers and Challenges to Restorative Justice

In England and Wales there is a strong focus within the practice of RJ on ensuring the victim's perspective is central to the process, rather than focus on the perspective of the perpetrator (Maglione, 2020). However, many professionals are concerned with the dangers that RJ might pose for victims in terms of revictimisation. As a result, there is evidence from the UK and abroad that professionals, including the police, judicial and medical professionals can act as gatekeepers in order to prevent victims from encountering further harm (Avieli et al, 2021; Rasmussen, 2020). This can result in institutional obstruction to RJ and becomes a barrier to individual victims' ability for self-determination in this context.

Other concerns regarding RJ include that it could potentially undermine a perpetrator's rights to a fair trial, proportional sentencing, and protection from discrimination (Ashworth, 1993; 2001; 2002; as cited in Willis & Hoyle, 2022).

Additional challenges that RJ may pose include difficulty facilitating RJ where there may be language barriers among non-native speakers, or where communication can be impacted by individuals with learning disabilities (Willis & Hoyle, 2022). Linked to this, research within the UK has shown that perpetrators of crime who have poor communication skills are less likely to be perceived as being sincere by the victims and are also more likely to go on to reoffend. Furthermore, hate crimes have been posited as unsuitable for RJ due to the irreconcilable power imbalance between victim and perpetrator in this instance; it may be problematic to facilitate understanding between two people where one may inherently perceive themselves as superior to the other (Gavrielides, 2012). This therefore suggests that not all perpetrators are suitable candidates for RJ, which could potentially cause an issue for victims interested in using this service, or that RJ as a service may require some alterations to ensure individuals with poorer communication skills are not negatively impacted by discrimination.

In terms of serious and organised crimes (SOC), research has suggested that RJ is not offered to all perpetrators, despite many being interested in this, and having a comprehensive understanding of how it could benefit both themselves and the victim(s) (D'Souza & L'Hoiry, 2021). This may suggest that RJ should be more widely offered to victims and perpetrators of crime alike. With this being said,

there may be a small percentage of perpetrators who may not understand the direct impact of their crime, nor who their victim(s) may have been, therefore the applicability of RJ for SOC could be questioned (D'Souza & L'Hoiry, 2021). In terms of how victims felt about RJ applying to SOC, victims understandably experience doubts regarding a perpetrator's ability to understand the extent to which the victim has been affected by the crime, and some victims expressed concerns regarding revictimisation when they encounter the perpetrator again (D'Souza & L'Hoiry, 2021). This concern is not altogether different from victims of other crime types (Strang et al., 2006), but would suggest that more work may need to be done in terms of preparing both parties for RJ in instances of SOC to mitigate any negative effects for all involved. This could be done by carrying out a risk assessment to identify victims' needs prior to taking part in RJ, and ensuring appropriate safeguarding processes are in place (D'Souza & L'Hoiry, 2021).

In terms of safeguarding victims of crime, generally research has suggested that where victims have a support network consisting of good relationships with family and friends, this may be adequate to support them through their experience of RJ (Suzuki & Yuan, 2021). Another key recommendation that exists in current literature to ensure a safe RJ experience for all involved, includes that facilitators of RJ should remain neutral towards both the perpetrator and victim of the crime so as not to negatively impact the RJ experience (Suzuki & Yuan, 2021). This is vital because perpetrators do not want to be judged for their crimes, nor do victims wish to be judged for their victimisation.

4. THE NOTTINGHAMSHIRE VICTIM CARE MODEL

Nottinghamshire Victim CARE is a free, independent, and confidential service that aims to provide a wide range of victim-centred and outcomes focused support services to empower victims and survivors to cope and recover from crime[10] and anti-social behaviour, regardless of when the crime occurred and whether the incident has been reported to the police or not.

Nottinghamshire Victim CARE does not currently support those who have experienced domestic or sexual abuse, as these services are delivered by other specialist providers. Support from Nottinghamshire Victim CARE is available to those of all ages and referrals can be made by police, professional agencies, or individuals can self-refer into the service.

The model operates through a Victim CARE hub which delivers expert, tailored, one-to-one victim support as well as offering a Restorative Justice service. Additionally, the model manages a Community Points Programme, which enables individuals to access a diverse range of victim friendly services via community groups and organisations within their communities.

Key responsibilities of Victim CARE include:

- Managing police referrals
- Maintaining an up-to-date website
- Conducting needs assessments to capture the complexity of victims' needs
- Providing a range of victim-centred and outcomes focussed practical, informational, and emotional support for victims
- Providing small items of safety equipment such as window locks and personal safety alarms
- Providing advocacy and casework for victims that require it
- Developing pathways for victims into other support such as specialist domestic and sexual assault and abuse, mental health, early intervention, and social care services
- Providing victim-led specialist RJ support where required by victims, with a particular focus on offering restorative contact post-conviction.
- Recruiting, training, and co-ordinating the community points
- Funding, monitoring, and quality assuring the community points - monitoring performance of the community points in relation to the support they provide to victims
- Developing marketing materials (with branding provided by the PCC) and pro-actively marketing the service

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[10] Nottinghamshire Victim CARE does not support those who have experienced domestic or sexual abuse, as these services are delivered by other specialist providers

Delivery of the service is underpinned by the following principles:

- **Empowerment**: support will be victim-centred and outcome focussed.
- **Inclusivity**: support will proactively reach out to all Nottinghamshire's diverse communities, including those with protected characteristics who may not have reported crime to the police.
- **Choice**: support will offer victims a choice about where, how and from whom they receive help.
- **Integration**: the hub and community points will work with others to ensure a fully integrated approach to service development and delivery.
- **Independence**: the service will be independent of the police and other criminal justice agencies.
- **Value**: the service will provide value for money.

Figure 3: Nottinghamshire Victims' CARE operational model

The current Victim CARE service is provided by Catch22, a national, social, not-for-profit business aiming to design and deliver public services that build resilience and aspiration in people and communities. Catch22's vision is a strong society where everyone has a good place to live, a purpose, and good people around them.

The initial contract to deliver Victim CARE ran from 1st October 2016 to 31st March 2020, with 1 year contract extensions granted from 1st April 2020, 1st April 2021, and 1st April 2022. A new contract will go out for tender in Autumn 2022. The period covering 1st October to 31st December 2016 was a mobilisation phase and Catch22 officially began delivery of the new service from 1st January 2017.

4.1. CORE SERVICE

Nottinghamshire Victim CARE's core service can offer:
- One-to-one support from a trained caseworker
- A detailed assessment and support plan

- Emotional support – to listen and advise on how to cope with difficult emotions
- Advocacy (for example with police, local authority, or housing)
- Information on criminal justice processes
- Advice on how to keep safe
- Help accessing other services
- Access to the Criminal Injuries Compensation Scheme for victims who are unable to complete the forms themselves
- Personal safety items - such as personal alarms and window alarms

Caseworkers are specially trained to deliver support, either over the phone or face-to-face, depending on what feels most comfortable to the individual. Support is tailored to the individual's needs. Most importantly, Nottinghamshire Victim CARE caseworkers are simply there to listen, and offer guidance through the criminal justice process when it is most needed.

4.2. RESTORATIVE JUSTICE

RJ is a voluntary process that gives an individual the chance to communicate with the perpetrator of the crime they have experienced. Communication can be facilitated indirectly through writing letters, or can happen face-to-face, depending on preference. It is an opportunity for the individual to talk about the incident, how it has affected them, as well as offering a chance to ask questions. The main aim of RJ is to provide a means of closure and chance to move forward with life.

Victim CARE delivers the RJ service as part of support for victims of crime. Both victim and offender led referrals are accepted but cases can only progress as long as the victim is happy to do so. Victim CARE also offers RJ directly to the City Youth Justice Service.

Victim CARE employs two trained RJ Practitioners (1.7 FTE) who are supported through Restorative Solutions as and when needed.

4.3. COMMUNITY POINT PROGRAMME

Community Points are local community-based organisations who help local people and who can also provide extra help to victims of crime. Community Points can help an individual identify if they would benefit from support, discuss what kind of support they could access, signpost to other supporting agencies, or refer an individual to a Victim CARE Caseworker.

Community Points are quality assured by Nottinghamshire Victim CARE to help victims. Since 2017, Nottinghamshire Victim CARE have engaged with over 100 local organisations making them aware of the Community Point programme. As March 2022 Nottinghamshire Victim CARE had 49 accepted Community Point organisations across Nottingham City, and all county boroughs and districts. The table below sets out the current Community Point organisations as listed on the website[11].

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[11] https://www.nottsvictimcare.org.uk/about-us/community-point-directory/

Table 2. Community Point Organisations

Location	Community Points
Ashfield	Out Centre Citizens Advice Bureau
Bassetlaw	Centre Place Bassetlaw MIND Working Win Bassetlaw Community Children's Team Bassetlaw Community and Voluntary Service
Broxtowe	Middle Street Resource Centre Citizens Advice Bureau Broxtowe Women's Project Transform Training
Gedling	Core Centre The Ark
Mansfield	Portland College Mansfield Woodhouse Community Development Group West Notts College
Newark and Sherwood	Newark and Sherwood Homes Newark and Sherwood District Community Safety Citizens Advice
Nottingham City	Emmanuel House Community Protection Bulwell Healthy Living Centre Nottingham City Homes Improving Lives University of Nottingham Nottinghamshire Deaf Society The Vine Community Centre Nottingham Women's Centre Bridges Community Trust Open Wings, Switch Up, Base 51, Nottingham Refugee Forum, St Ann's Advice Centre, Fearless Youth Association; Chaya Development Project, Mojatu Foundation, Nottingham LGBTQ+ Network
Rushcliffe	Rushcliffe Community Safety Rushcliffe Council Contact Points
County Wide	Inspire Libraries Nottingham Mencap, ABL Health, Road Peace, BRAKE, Sahara Mental Health, RedThread, Hetty's

4.4 LANDSCAPE OF SPECIALIST SERVICES

To deliver comprehensive victim support in Nottinghamshire, there is also a network of extensive co-commissioned specialist services catering for particular crime types and victims. Specialist services include:

4.4.1. Domestic Abuse and sexual violence

Wide ranging domestic abuse support services are co-commissioned by the PCC and Nottingham City and Nottinghamshire County Councils, with the local authorities acting as the lead commissioners in their areas. Co-commissioning arrangements are also in place for sexual violence support. The PCC commissions sexual assault referral centres (SARCs) for adults and children with NHSE, with NHSE acting as the lead commissioner. Services and providers are presented in Table 3.

The PCC is the lead commissioner for Independent Sexual Violence Adviser services for adults and children, with the adult service also funded by Nottingham City and Nottinghamshire County Council.

A therapy support services for adults is co-commissioned by the PCC, with funding from the local authorities and clinical commissioning groups. Children's therapy is commissioned by the clinical commissioning groups

Table 3. Co-commissioned domestic abuse and sexual violence services and providers

Service	Provider	Area
24 hour domestic abuse helpline	Juno Women's Aid	City/countywide
Domestic abuse support for women	Juno Women's Aid	City and county south
Domestic abuse support for women	Nottinghamshire Women's Aid	County north
Domestic abuse support for men	Equation	City and county (north and south)
Adult SARC	Mountain Healthcare Limited	City/countywide
Children and Young People's SARC	Nottinghamshire University Hospitals NHS Trust	City/countywide
Adult ISVA	Notts SVS Services	City/countywide
Children and Young People's ISVA	Imara	City/countywide

4.4.3. Stalking

A specialist stalking advocacy service is in place in Nottinghamshire, commissioned by the PCC and delivered by Juno Women's Aid, Nottinghamshire Women's Aid and Equation. The service is being piloted and will be reviewed by the PCC during 2022 to inform future commissioning intentions. The helpline number for the stalking advocacy service is the domestic abuse agency helpline, this ensures that survivors who request help and are being stalked as part of domestic abuse are able to immediately access domestic abuse support.

5. QUANTITATIVE DATA ANALYSIS

5.1. NOTTINGHAMSHIRE CRIME DATA

TONIC were provided with police recorded crime data, excluding fraud and computer-misue, for the two calendar years 2019 and 2020, and for the first 6 months of 2021. Analysis of this data has shown that in 2019, Nottinghamshire Police recorded 82,326 crimes, which then decreased (by 19%) to 66,721 in 2020. Between January and June 2021, there were 31,295 crimes - likely suggesting there will again be a decrease in the overall figure compared to the previous year.

The Notts Police and Crime survey also provided data on self-reported victimisation up to March 2022. This revealed that 19% of respondents reported being the victim of a crime (excluding fraud and computer misuse) at the end of 2019, this reduced to 16% at the end 2020. However, the survey does reveal a slight increase in 2021 with 17% of respondents reporting being the victim of a crime in the year to March 2022. As policed recorded crime has decreased in the same period, the gap between recorded and unreported crime has increased from 52% of crimes being recorded for the year ending December 2020 compared to 48% of crimes recorded by the police for the year ending December 2021. This suggests a large level of unmet need for victims in Nottinghamshire, which is broadly line with the national estimate of 45% of crime remaining unreported (ONS, 2021).

As shown in the table below, for the 2021 data, half of all recorded crimes in Nottinghamshire were 'violence against the person', the next most common crime types were 14% 'arson and criminal damage', followed by 12% 'theft'. Of all crimes recorded in this period, 21 % were flagged as 'domestic' and 1.3% 'hate'.

Table 4. Police Recorded Crimes January-June 2021

Crime Type	Percentage of Crimes Recorded January - June 2021
Violence against the person	50%
Arson and criminal damage	14%
Theft	12%
Vehicle offences	8%
Burglary	6%
Sexual offences	5%
Miscellaneous crimes against society	2%
Robbery	1%
Public order offences	1%
Possession of weapons	0.4%
Drug offences	0.1%

Only 5% of all crimes in January – June 2021 had resulted in a charge or caution being brought by the time of data analysis (January-March 2022). In 39% of cases, the investigation was complete but with no suspect identified, in 29% the victim had declined or withdrawn their support despite a named suspect being identified, and 6% were marked as 'unresolved'. Given that most victims' experiences of the CJS are heavily influenced by the outcome of their case, this is important to monitor, with outcomes closely linked to victim satisfaction.

Table 5. Police Recorded Crimes January-June 2021

Outcome	% of Crimes Recorded Jan - Jun 21
Investigation complete no suspect identified	39.0%
Victim declines/withdraws support - named suspect identified	29.2%
Police - named suspect, victim supports but evidential difficulties	8.6%
Unresolved	6.2%
Victim declines/unable to support action to identify offender	4.7%
Charged	4.2%
Other body/agency has investigation primacy	2.0%
Community resolution	1.1%
Police - formal action not in public interest	0.9%
Summonsed/postal requisition	0.7%
Adult caution	0.6%
CPS - named suspect, victim supports but evidential difficulties	0.6%
Police - named suspect, investigation not in the public interest	0.4%
Blank	0.3%
Suspect identified but prosecution time limit expired	0.2%
Named suspect too ill to prosecute	0.2%
Alternate offence summonsed/postal requisition	0.2%
Name suspect below age of criminal responsibility	0.2%
Diversionary, educational or intervention activity, not in public interest to take	0.1%
Alternate offence charged	0.1%
Youth restorative disposal	0.1%
Other outcome	1.3%

In terms of victim profile, there was a fairly even gender split for crimes recorded between January – June 2021, with 50.8% female and 46.4% male (1.6% had no gender recorded, 1.2% were 'unknown').

The graph below shows the age distribution of victims with the majority (60%) falling into the age category '25-59'.

Figure 4. Victim age profiles for police recorded crime (January – June 2021)
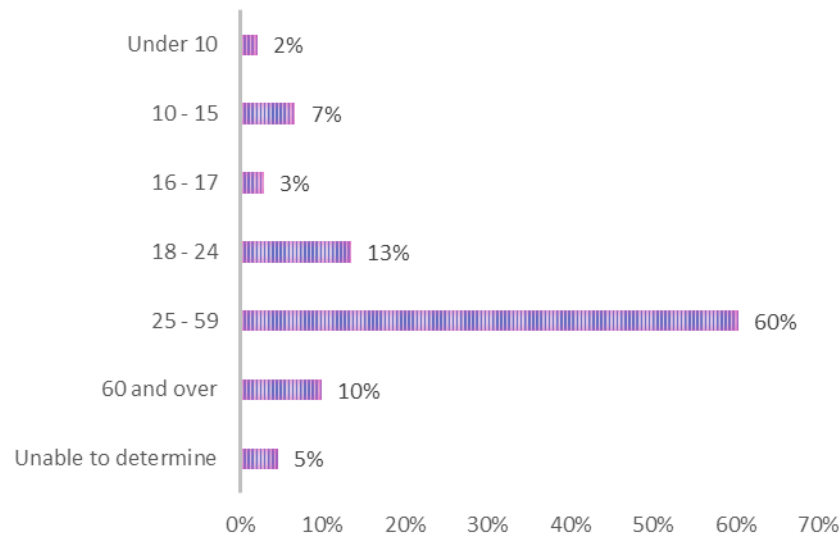
Regarding victims' ethnicity, for data between January - June 2021, over a third (36%) of all victims' ethnicity was recorded as 'not stated'. This is a high proportion of missing data. Of those recorded, over half (56%) were White - British. There were low levels of other ethnic groups recorded – totalling just 9% across all Asian, Black, Mixed, and Other ethnic groups. The graph below shows a breakdown of ethnicity; however, we have chosen to group these as the numbers for individual ethnic categories were so low in most instances.

Figure 5. Victim ethnicity profiles for police recorded crime (January – June 2021)
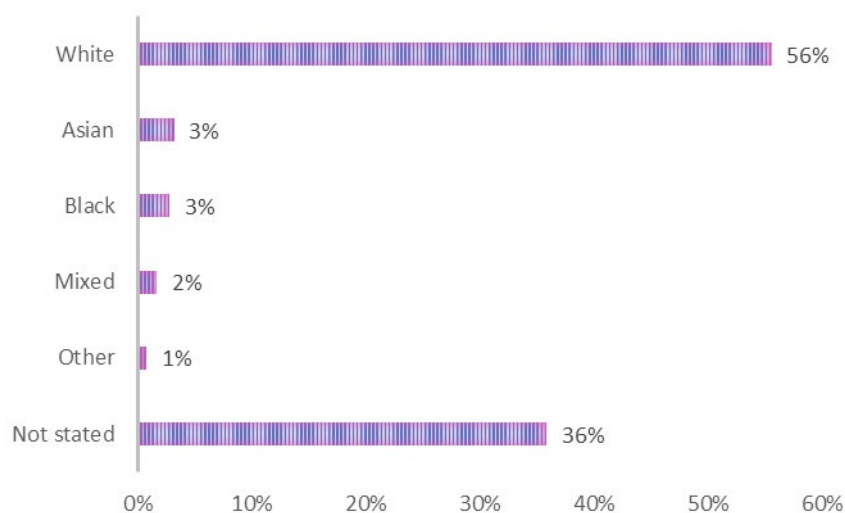
The table below displays a breakdown of location where the crimes were recorded for data provided for 2021, as well as the percentage of overall crimes this represents. Just under 4 in 10 crimes between

January - June 2021 were recorded in Nottingham City (including Central, Centre, North, South, and West).

Table 6 . Police recorded crime type by location (January – June 2021)

Location	Percentage of Crimes Recorded January - June 2021
Ashfield	10.9%
Bassetlaw	10.2%
Broxtowe	7.1%
Gedling	7.0%
Mansfield	11.1%
Newark and Sherwood	8.1%
Nottingham City (including Central, Centre, North, South, and West)	38.0%
Rushcliffe	5.7%
Other	0.3%
Out of Force	0.2%
Blank	1.4%

When compared to 2019 and 2020 datasets, the victim profile and location of crimes recorded is broadly similar to data provided for 2021. However, we have produced the graph below to show trends in police recorded crime over the past three years - we have done this as a proportion of all crimes to account for the fact that 2021 data only covers a 6 month period, whereas 2019 and 2020 datasets covered full years.

From this, based on differences in proportion of all crimes for 2019 versus 2021:

- Stalking and harassment has increased by 5.2%
- Violence without injury has increased by 4.6%
- Criminal damage has increased by 1.6%

- Public order offences have decreased by 5.5%
- Theft from motor vehicle has decreased by 1.7%
- Burglary - residential has decreased by 1.3%
- Theft from the person has decreased by 1.3%
- Violence with injury has decreased by 1.0%

Figure 6. Trends over time in police recorded crime for Nottinghamshire
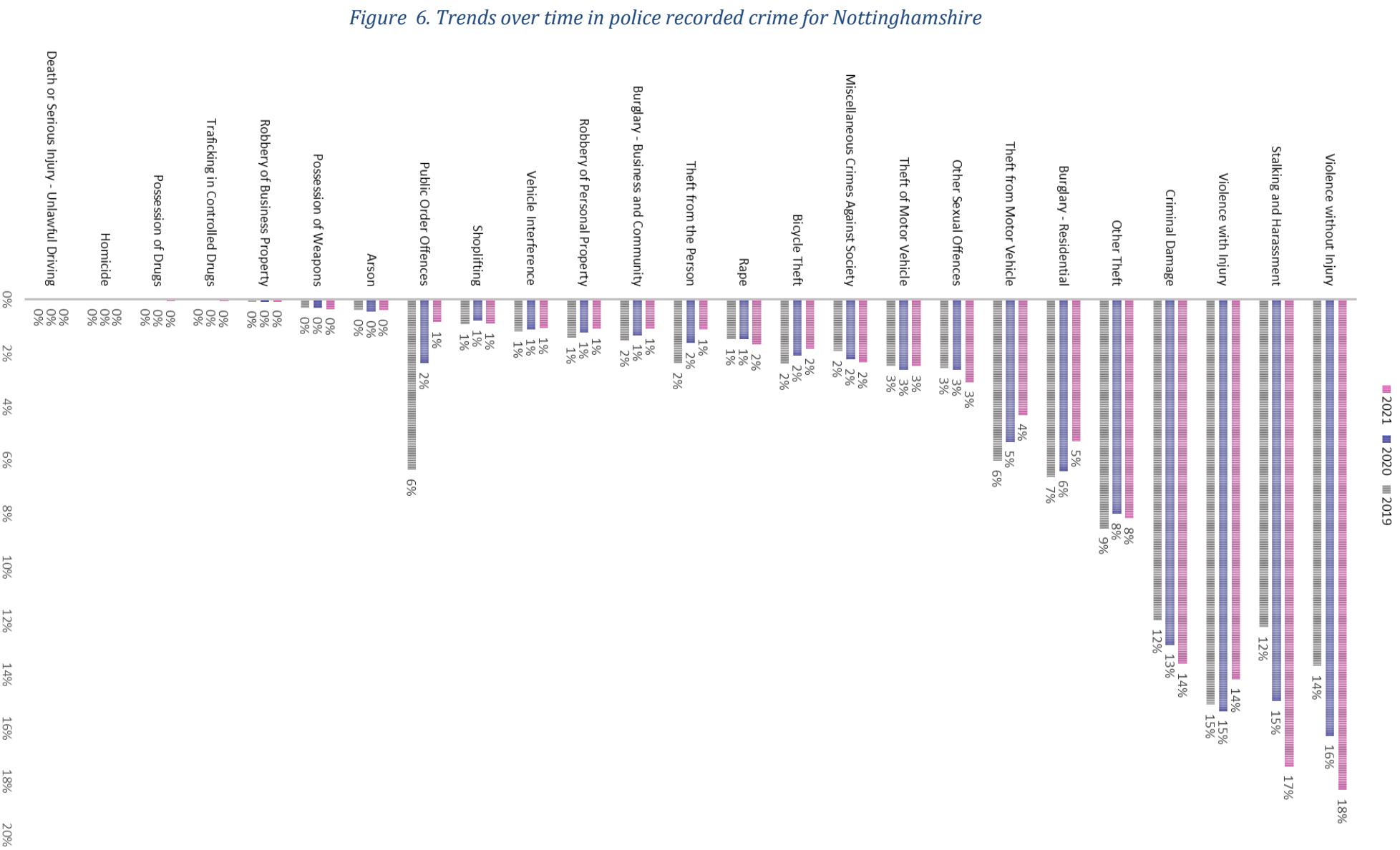
In comparison, data from the Notts Police and Crime survey show that the most common self-reported crime people experience is online fraud, with 1 in 5 reporting they had a victim of online fraud, or attempted online fraud, in the year to March 2022. This represents a slight increase of 2%, on the previous year with early signs that the rate of increase for online fraud may be slowing. Intimidation and harassment and hate crime also showed increases of 1.8% and 1.4%, respectively. All other crime types showed a decrease from the previous year.

Figure 7. Notts Police and Crime Survey: self-reported experience of victimisation
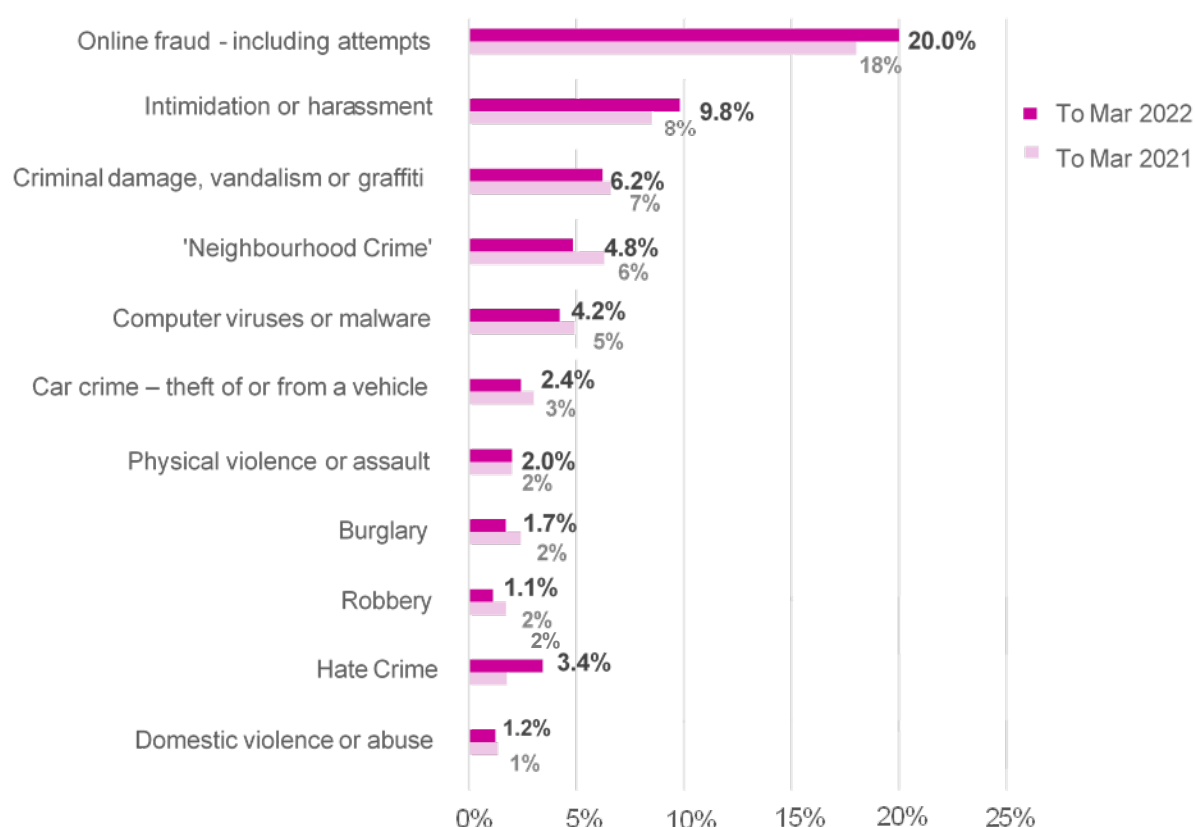
5.2. NOTTINGHAMSHIRE VICTIM CARE DATA

5.2.1. Referral and Case Profiles

Referrals to Victim CARE have been increasing steadily year-on-year from 10,003 referrals in 2018-19 to the highest in 2021-2022 when the service received 15,944 referrals. While overall referrals are rising, the proportion of those being successfully contacted by the service has declined over the same period from 69% successfully contacted in 2018-19 to 53% of referrals successfully contact in 2021-2022. The primary reasons given for unsuccessful contact is 'incorrect/no phone details' accounting for 4% of unsuccessful contacts in 2021-22, or 'no answer' which accounts for the largest proportion of non-contact at 37% of unsuccessful contact in 2021-22.

The increasingly high percentage of referred victims that Victim CARE is unable to make contact with is an area of concern and suggests a high level of unmet need; the drop-off from referral to point of service is on average 39%.

The percentage of victims who accept standard support from Victim CARE once contacted has remained relatively stable over the pass 4 years, with 34% accepting standard support in 2018-19 and 38% accepting standard support in 2021-2022. However, there is a downward trend of victims accepting enhanced support over the same period from 16% in 2018-19 to just 9% accepting enhanced support in 2021-22.

Table 7 . Trends in Victim CARE referral profiles and pathways

Referral profiles	2018-2019	2019-2020	2020-2021	2021-2022
Number of referrals received	10,003	11,500	11,776	15944
Percentage increase in referrals	-	15%	2.4%	26%
Successfully contacted	69%	55%	59%	53%
Accepted Standard Support	34%	38%	42%	38%
Accepted Enhanced Support	16%	11%	13%	9%
Unable to contact	37%	40%	35%	42%
Invalid/inappropriate	2%	2%	2%	4%
Police referrals	83%	80%	73%	79%
Action Fraud referrals	7%	8%	20%	15%
Self-referrals	5%	3%	3%	2%
Community Point referrals	0.5%	1%	0.4%	0.4%

Over the past four years, on average 79% of referrals are made by the police. There has also been a significant increase in referrals from Action Fraud over the last two years, reflecting the national trend in increased prevalence, as well as the high levels of reported prevalence in the Notts Police and Crime Survey. Of note, self-referrals and Community Point referrals to Victim CARE have remained very low over the past four years with little change seen year-on-year.

The table below shows a breakdown of referral and case profiles by crime type for 2020-21 and 2021-22. These are shown alongside police recorded crime data for comparison. These data show that approximately half of all referrals to Victim CARE had either experienced violence against the person or fraud offences, a pattern consistent with police recorded prevalence and self-reported experience. However, there is also a proportional drop of at least 10% between those reporting a crime of 'violence against the person' and those being referred for support.

Tracking referrals through to accepted support, the proportion of those receiving standard and enhanced support for 'violence against the person' is proportionally in line with referrals for this crime

type. Victims of burglary and theft are more likely to accept standard support proportionally to the prevalence of these crime, while burglary, anti-social behaviour and hate crime have a higher representation in enhanced support that expected from their prevalence. Surprisingly, between 2-4% of referrals and new cases have an 'unrecorded' crime type.

Table 8 . Trends in Victim CARE referral and case profiles by crime type

Crime Type by referral and case profiles	Notts Police recorded crime 2021	Percentage of referrals in 2020-21	Percentage of referrals in 2021-22	Victim CARE new cases standard support 2021-2022 (N=4376)	Victim CARE new case enhanced support 2021-2022 (N=1213)
Violence against the person	50%	31%	39%	35%	36%
Public order / public fear	1%	6%	7%	5%	6%
Possession of weapons	0.4%	0.3%	0.3%	0.3%	0.3%
Miscellaneous crimes against society	2%	1%	1%	1%	2%
Sexual offences	5%	0.4%	0.1%	1%	0.5%
Burglary	6%	10%	9%	17%	24%
Robbery	1%	2%	3%	3%	4%
Theft	12%	10%	8%	19%	8%
Vehicle offences	8%	4%	5%	5%	1%
Arson and criminal damage	14%	8%	10%	9%	11%
Anti-social behaviour	-	1%	1%	1%	5%
Unrecorded	-	3%	2. %	4%	3%
Hate crime	-	5%	4%	4%	12%
Fraud	-	19%	15%	10%	2%

Next we examined the demographic profiles of referrals to Victim CARE over 2020-21 and 2021-22. Data show patterns of referral by demographics remained similar for all key characteristics over the reporting period. However, a noticeable trend in the data was the high number of referrals that did not specify ethnic background or sexual orientation. This high percentage makes comparison with other data sources difficult. However, there is some internal consistency with Notts Police data, as shown in the graph below, which also has a high proportion of 'Unknown ethnicity data. Interestingly,

this was also observed in the TONIC survey data in which 35% of participants preferred not to provide their ethnicity. Where we have data, we have provided comparison with victim profiles from police recorded crime, this should broadly consistent patterns with referral profiles.

Table 9 . Demographic profile of referrals to Victim CARE: Ethnicity

Ethnicity	Percentage of referrals 2020-21	Percentage of referrals 2021-22	Notts Police recorded crime 2021
White (English, Welsh, Scottish, Northern Irish, Irish, Irish Traveller, Gypsy, and any other White background)	59%	51%	56%
Asian/Asian British (Indian, Pakistani, Bangladeshi, Chinese or any other Asian background)	5%	4%	3%
Mixed/Multiple ethnic groups (White and Black Caribbean, White and Black African, White and Asian, and any other mixed/multiple ethnic background)	2%	1%	2%
Black/African/Caribbean/Black British	4%	4%	3%
Other ethnic group (Arab, any other ethnic group)	1%	1%	1%
Unknown/Prefer not to say	29%	39%	36%

Table 10 . Demographic profile of referrals to Victim CARE: Gender

Gender	Percentage of referrals 2020-21	Percentage of referrals 2021-22	Notts Police recorded crime 2021
Male	49%	49%	46%
Female	47%	45%	51%
Trans/non-binary	0.1%	0.1%	-
Unknown/Prefer not to say	4%	6%	3%

Table 11 . Demographic profile of referrals to Victim CARE: Sexual Orientation

Sexual Orientation	Percentage of referrals 2020-21	Percentage of referrals 2021-22
Heterosexual	11%	12%
Lesbian / Gay	0.3%	0.4%
Bisexual	0.1%	0.1%
Other	-	0.1%
Unknown/Prefer not to say	88%	84%

Table 12 . Demographic profile of referrals to Victim CARE: Age

Age	Percentage of referrals 2020-21	Percentage of referrals 2021-22	Notts Police recorded crime 2021
Under 12	2%	3%	10%
13-17	5%	6%	
18-24	13%	15%	13%
25-34	21%	21%	60%
35-44	18%	17%	
45-54	15%	14%	
55-64	11%	10%	15%
65-74	5%	5%	
75+	9%	3%	
Unknown/Not specified	0%	6%	5%

Table 13. Demographic profile of referrals to Victim CARE: Disability

Disability	Percentage of referrals 2020-21	Percentage of referrals 2021-22
Disabled	6%	5%
Not-disabled	88%	95%
Unknown/prefer not to say	6%	0%

As shown in the table below, referrals to Victim CARE by region largely reflect the breakdown of police recorded crimes in for each location. Of note, 38% of all crimes are recorded in Nottingham City, also reflected referrals for Victim CARE.

Table 14. Demographic profile of referrals to Victim CARE: Geographical location

Location	Percentage of referrals 2020-21	Percentage of referrals 2021-22	Notts Police recorded crime 2021
Ashfield	11%	10%	11%
Bassetlaw	10%	11%	10%
Broxtowe	7%	7%	7%
Gedling	7%	7%	7%
Mansfield	11%	11%	11%
Newark and Sherwood	8%	7%	8%
Nottingham City	34%	35%	38%
Rushcliffe	6%	5%	0.3%
Unknown	5%	4%	.20%
Out of area	1%	1%	1%

5.2.2. Community Points

In 2020-21, Victim CARE reported 46 approved community points, encouragingly none were closed in this reporting period, but there were no new organisations registered either. Disappointingly, there were only 51 referrals into Victim CARE from community points in 2020-21, which was a decrease from 62 in 2019-20, but a significant increase from 33 in 2018-19. Of referrals from community points to Victim CARE in 2020-21, 49% accepted standard support and 51% accepted enhanced support. This is a much higher proportion accepting enhanced support than from other referrals sources, suggesting a higher level of need.

5.2.3. Restorative Justice

In 2020-21, Victim CARE had a total of 122 referrals for RJ support. Of these, 44.3% were successfully contacted and interested, 25.4% were successfully contacted but declined the service, 22.1% were 'open' with 'contact currently being attempted', Victim CARE had been unable to contact 7.4% of referrals, and 0.8% were invalid/inappropriate referrals. Of the new referrals received 48% came from the Local Authority (in particular City Youth Justice Services) and 33% were referred from a Victim CARE caseworker. A low number of referrals were received from the Police (6%) and only 3% were self-referrals. This data suggests very narrow referrals pathways into the RJ service.

When considering the demographics of referrals in 2020-21, 49.2% were female, 47.5% were male, and 3.3% 'not stated'. The majority had their ethnicity recorded as White - 54.9%, 0.8% Mixed, 5.7% Asian, 4.9% Black, 1.6% Other, but again a high proportion of victims' ethnicity, 32.0%, was unknown/not specified. The highest percentage of referrals (20.5%) fell into the 25-34 age band, followed by 19.7% being under 18, and then 18.0% being 45-54, with only 9% of referrals in the over 55 age band. Around 1 in 10 referrals for the RJ service had a disability (9.8%), while a quarter (24.6%) were not disabled, and the majority (63.9%) were unknown/not specified. In terms of sexual orientation 42.6% were heterosexual, 0.8% lesbian/gay, 0.8% bisexual, and over half (55.7%) unknown/not specified.

As with the core service referrals and police recorded data, referrals to the RJ service most commonly lived in Nottingham City (45.1%). Interestingly, almost a quarter (23.0%) were from Broxtowe - see table below for a complete breakdown by location of referrals.

Table 15. Restorative Justice referral profile: Geographic location

Location	Percentage of referrals 2020-21
Ashfield	8.2%
Bassetlaw	0.8%
Broxtowe	23.0%
Gedling	7.4%
Mansfield	4.9%
Newark and Sherwood	3.2%
Nottingham City	45.1%
Rushcliffe	5.7%
Unknown	1.6%

In addition to the new referrals, in 2020-21, there were 138 ongoing RJ cases open - almost half (48.4%) were recorded as being victims of violence against the person and around a fifth (19.0%) burglary - see table below for more details.

Table 16. Restorative Justice referral profile: crime type

Crime Type	Percentage of referrals in 2020-21
Violence against the person	48.4%
Vehicle offences	2.4%
Theft	9.5%
Sexual offences	0.0%
Robbery	4.0%
Public order / public fear	7.1%
Possession of weapons	0.0%
Miscellaneous crimes against society	0.8%
Burglary	19.0%
Arson and criminal damage	8.7%
Anti-social behaviour	0.8%

Of the total 199 cases open in 2020-21, 64.8% were accessing 'multi-agency liaison', 56.3% 'victim preparation appointments', 13.1% 'offender preparation appointments', and 4.5% either 'letter writing' or 'shuttle mediation' in the interim.

6. FIELDWORK FINDINGS

6.1. SAMPLE OVERVIEW

A total of 401 people responded to the online survey, this included:

- 355 victims of crime in Nottinghamshire
- 46 key stakeholders

TONIC conducted in-depth interviews with 50 individuals, this included:

- 22 victims of crime in Nottinghamshire
- 28 key stakeholders

6.1.1. Victims / Service Users

Our survey targeted those who had experience of victimisation within the last 3 years in order to ensure findings are relevant current services and crime statistics. Of the total 355 survey respondents who identified as being a victim of crime in Nottinghamshire, 34% reported having been a victim of more than one crime, while 61 % said they had been a victim of a single crime (2.5% 'not sure' and 2.1% 'prefer not to say'). Over three quarters (77 %) had reported the crime to the police in Nottinghamshire, with a further 3.1% reporting it to another police force, while 17% had not ever reported the crime to the police (3.4% 'prefer not to say'). Of survey respondents, the highest percentage of victims (16.8%) had experienced some form of antisocial behaviour, followed by the next most common crime type being physical violence or assault (13.8%).

Table 17. Survey respondents by crime type

Crime Type	Percentage of TONIC survey respondents
Antisocial behaviour	16.8%
Physical violence or assault	13.8%
Sexual violence or abuse	8.4%
Domestic abuse	7.8%
Stalking and/or harassment	7.2%
Criminal damage or arson	6.9%
Fraud, online fraud, or cyber crime	6.6%
Robbery or other theft	6.6%
Burglary	5.1%
Road or traffic crime	4.8%
Theft of or from a vehicle	4.8%
Hate crime	4.2%
Prefer not to say	3.3%
Other (which included attempted burglary and spiking)	1.5%
Knife crime	1.2%
Business crime	0.9%

We sought to engage a diverse sample of participants to ensure a range of views were presented. Demographic data for survey respondents were as follows:

● The majority – 70% were female (26% male, 1% non-binary, and 3.0% 'prefer not to say').
● The most common age bracket for respondents was 25-34 (25.8%), followed by 35-44 (21.8%) and 18-24 (19.4%; 2.1% were under 18, 13.3% were aged 45-54, 11.5% 55-64, and 6.7% were 65 or over)

- 84.5% self-identified as heterosexual/straight (7.7% bisexual, 2.1% gay/lesbian, and 5.6% 'prefer not to say')
- The majority of survey respondents were White (58.3%), however a high proportion did not specify their ethnicity (35.2%), and of the remaining 2.5% were of Mixed ethnic origin, 3.1% Asian, and 1.4% Black. It is interesting to note, our survey reflected the same pattern of non-response rate in relation to ethnicity that we observed in both the Police and Notts Victim CARE data. Of the victims that participated in an interview with us 36% were from BAME backgrounds which is more representative of the wider population from which they were drawn.
- Just over two thirds of survey respondents (67%), did not consider themselves to have a disability of any kind, while 27% did report having a disability and 6% preferred not to say.

Regarding location, TONIC heard from participants from all areas in Nottinghamshire and in proportion to areas with the higher levels of crime (e.g., Nottingham City).

Table 18. Survey respondents by geographic location

Location	Percentage of survey respondents
Ashfield	10%
Bassetlaw	9%
Broxtowe	10%
Gedling	9%
Mansfield	9%
Newark and Sherwood	8%
Nottingham City	27%
Rushcliffe	11%
Other	6%

The majority of survey respondents (73%) had never accessed any support following the crime(s) they had experienced with only 17% of respondents having accessed Nottinghamshire Victim CARE, and 10% having accessed another service. Although this represents a low number of victims accessing support, it does broadly reflect national estimates. For those who had accessed Victim CARE, they were most commonly referred by the police or had self-referred.

6.1.2. Stakeholders

When considering the 46 survey respondents from key stakeholders, this sample comprised professionals from Nottinghamshire Victim CARE, the police, probation service, local authorities, and 'other community or voluntary sector organisations'.

Although almost 1 in 5 (19.5%) said that they were 'unfamiliar' or 'very unfamiliar' with the Victim CARE model, just over half (52%) said they had referred a victim to the service, 41% said they had signposted victims to the service, and 26% said they had previously worked in partnership with Victim CARE to support victims.

In addition, we interviewed 26 key stakeholders from a range of organisations including:

- Nottinghamshire OPCC
- Nottinghamshire Police
- The Probation Service
- HMP Nottingham
- Local Authorities
- Nottinghamshire Victim CARE
- Community Point Organisations
- Local Community Listening Groups
- Other third sector providers (e.g., REMEDI)

6.2. FIELDWORK DATA ANALYSIS

6.2.1. Service User Feedback regarding Nottinghamshire Victim CARE core service

The graph below provides an overview of service user respondents' satisfaction with Nottinghamshire Victim CARE. This indicates that the majority of service users were 'satisfied' or 'very satisfied' with the referral process, appropriate treatment, and overall support given (67%, 65%, and 70% respectively[12]).

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[12] Please note that throughout the Quantitative Survey Analysis section percentages have been calculated based on the number of respondents to each individual question.

Figure 8. Service-user feedback on Victim CARE support
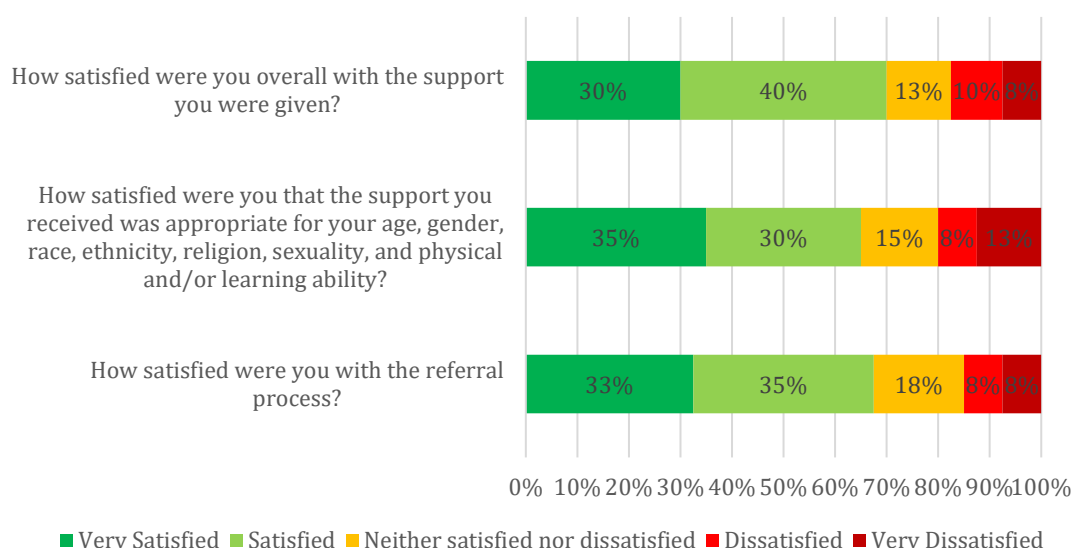
Similarly, the majority of service users felt that Nottinghamshire Victim CARE had helped or 'somewhat' helped them with improved health and wellbeing, everyday coping, feeling safer, and feeling better informed (69%, 71%, 64%, and 77% respectively). Coping with everyday life had the highest 'yes' response rate, improved health and wellbeing had the highest 'somewhat' response rate. Feeling safer had the highest proportion of respondents who said 'no' with over a third reporting the support they received not helping them feel safer. Very few respondents selected 'don't know / can't remember' for these questions.

Figure 9. Service-user feedback on Victim CARE outcomes
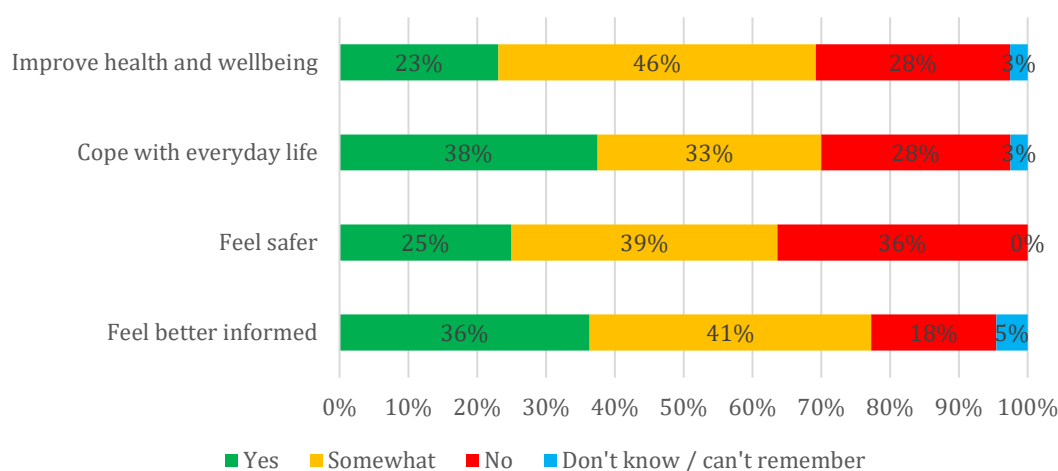
High satisfaction from those who had accessed the Victim CARE service was also strongly reflected in the interviews, where three key themes of what is working well for services users emerged:

- Being listened to and receiving high quality emotional support

- Being given good information, advice and practical support
- Being responded to in a timely manner without long waiting times

For example, service-users commented during interviews:

"I was listened to, and my feelings were acknowledged."

"They helped me with coping mechanisms to manage my anxiety."

"My caseworker phoned me many times to make sure I was OK"

"They were very kind and compassionate, wasn't expecting the follow up call"

"I was contacted very quickly."

For these victims, when asked what type of support they would have wanted to receive, they most commonly selected emotional support, followed by information, then advice on keeping their property safe, advocacy, and finally practical support.

6.2.2. Stakeholder Feedback regarding Nottinghamshire Victim CARE core service

As already mentioned, concerningly, almost 1 in 5 (19.5%) stakeholders said that they were 'unfamiliar' or 'very unfamiliar' with the Victim CARE model. For example, some agencies were not aware that victims could self-refer into the service even if they had not reported the crime to the Police, and others were not aware of the community point programme.

More positively, a third (67%) of stakeholders felt Victim CARE is 'good' or 'very good' at tailoring interventions to the specific individuals - there was still quite a high proportion of 'neutral' stakeholders (28%) for this question too, reflecting those less familiar with the service.

Figure 10. Stakeholder feedback on Victim CARE tailored provision
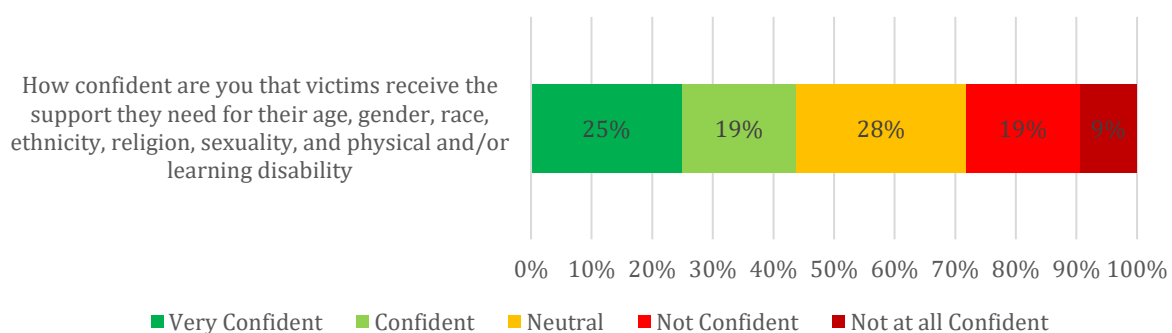
In interviews the bespoke nature of what the service could offer victims was highlighted as a particular strength by stakeholders. The caseworker model was identified as enabling support to be tailored to the unique needs of each individual, and Victim CARE was praised for the expertise of its staff.

As with service users, stakeholders were also asked how well Nottinghamshire Victim CARE helps service users to improve their health and wellbeing, cope with everyday life, feel safer, and feel better informed. Between 23% and 28% of responses to these questions were 'I don't know', but encouragingly the most common answer was 'yes' and when this was combined with 'somewhat', the majority of stakeholders fell into this category. Interestingly, stakeholders appeared most confident that Victim CARE helps service users to feel safe, while this was the lowest for service users themselves. In interviews, some stakeholders reported that less funding for target hardening meant victims were not being offered equipment which may be impacting how they felt they were being helped in relation to feeling safe.

Figure 11. Stakeholder feedback on Victim CARE outcomes
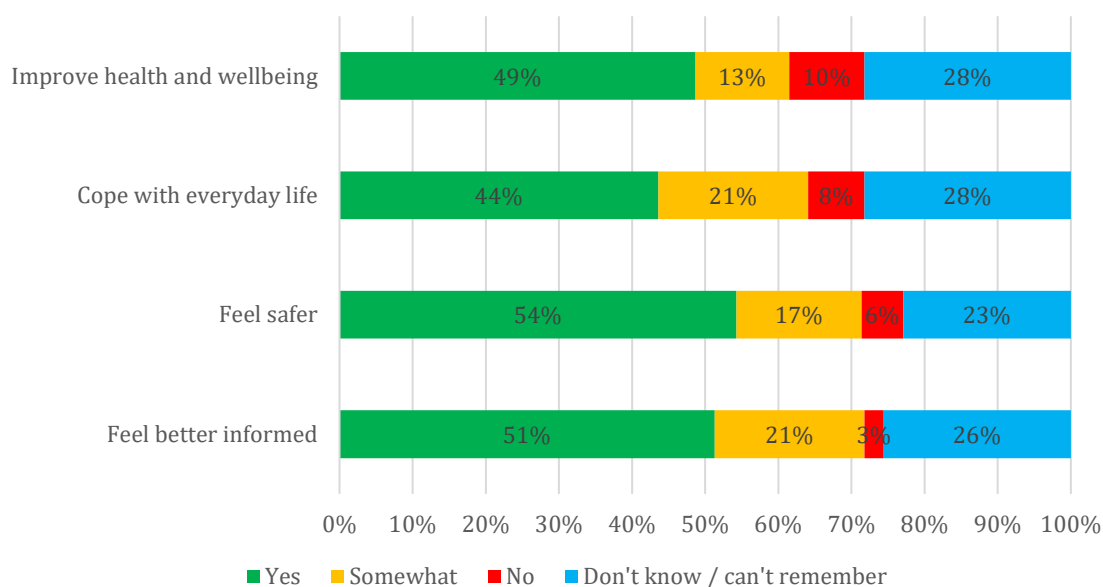
Stakeholders were also asked how confident they are that service users' receive appropriate treatment according to protected characteristics, many remained 'neutral' (28%), but 44% were 'confident' or 'very confident' that this was the case. A further 28% reported being either 'not confident' or 'not at all confident' service user were receiving appropriate support on the basis of protected characteristics.

Figure 12. Stakeholder feedback on Victim CARE support for those with protected characteristics
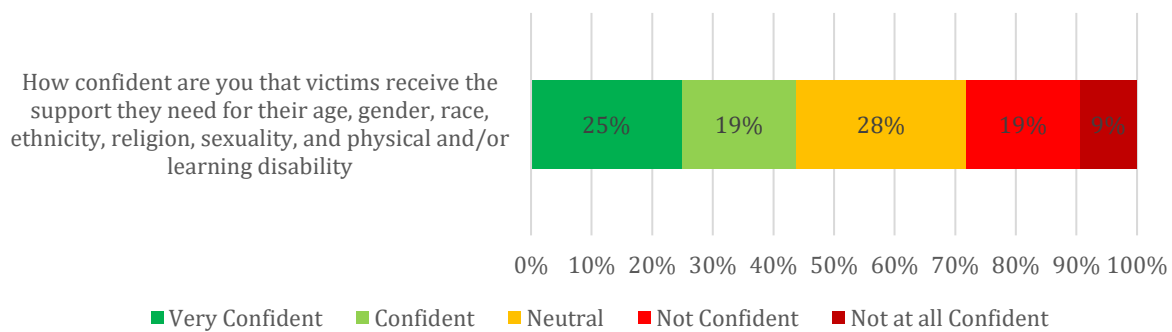
In interviews, a theme that emerged from both victims and stakeholders in relation to protected characteristics was the need for greater cultural responsiveness within services and a need to better support victims from minoristised ethnic communities - this is especially important given the significant overrepresentation of individuals from minoritised ethnic backgrounds within the CJS compared to the general UK population. This theme emerged both in relation to how the police respond to victims (discussed below), but also to difficulties people from minoristised ethnic backgrounds experience in accessing support.

A particular concern that was expressed was the need for greater understanding of the different cultural experiences of victims. Furthermore, victims and stakeholders told us more consultation with victims from different communities was needed in order for services to fully understand their support needs, rather than assumptions made about what those may be. For example stakeholders commented:

"We need to ask the communities that are most impacted by these crimes to tell us what support they need – not just be told what is on offer" (Victim)

"If you are going to get to the root of hate crime, you need to hire people from those communities" (Victim)

"The system is not serving people of colour in our communities." (Stakeholder)

6.2.3. Victim and Stakeholder Feedback regarding Community Points

30% of victims in our survey said they would like to access support via a trusted community organisation. However, referral data showed that very low numbers of referrals are received into Victim CARE via a community point organisation (51 referrals in 2020-2021). We found that stakeholder awareness of community points and the function they serve, beyond those directly involved, was also very poor.

However, of those who worked directly with Victim CARE and/or through Community Point organisations feedback on what the partnership model offered was very positive. For example, stakeholders felt that the training on offer through Victim CARE was a particular strength, allowing staff to keep up-to-date on relevant topics and ensure they maintained expertise and appropriate skills to support victims.

"Training is a positive for the community point organisations." (Stakeholder)

"Trained staff - access to continuous Catch-22 and external training. Formal and informal supervision and support - clear objectives which meet the groups strategic vision and those of the OPCC." (Stakeholder)

In both interviews and the survey, stakeholders described strong partnerships between relevant agencies and felt the Community Point model had helped foster this atmosphere of joint working, enabling enhanced opportunities to network. However, very few of the victims who completed our survey or participated in interviews had knowledge or any direct experience of community points.

"The engagement through the Community Point model has improved greatly over the past year with some excellent partnership work and networking taking place." (Stakeholder)

"Victim CARE has good relationships with the communities they serve." (Stakeholder)

6.2.4. Victim Feedback regarding the Nottinghamshire Police

Within the survey, there was a section for victims who had reported the crime(s) they had experienced to Nottinghamshire Police, to provide feedback specifically regarding their experience with the police. Although experiences were mixed, in general satisfaction with the police was relatively low with 44% reporting the overall service they received from the police was "poor" or "very poor", compared to 38% who reported their overall experience with the police was "good" or "excellent". In addition, 41% of those who had experience of reporting a crime to the police reported the quality of communication was "good" or "excellent", compared to 38% who rated the quality of communication from the police as "poor" or "very poor". These indicate mixed views and a lack of consistency in victim experiences with the police.

It should be noted that levels of satisfaction with the police were lower in our survey than reported in the March 2022 Notts Police and Crime Survey. The Police and Crime survey found that 62% reported feeling satisfied with the service they received from the police, and 57% reported having trust and confidence in the Police. However, the Police and Crime survey also revealed that only 25% of respondents felt well-informed about what the police were doing, which is more in line with our findings.

Figure 13. Victim feedback on experience of the police.
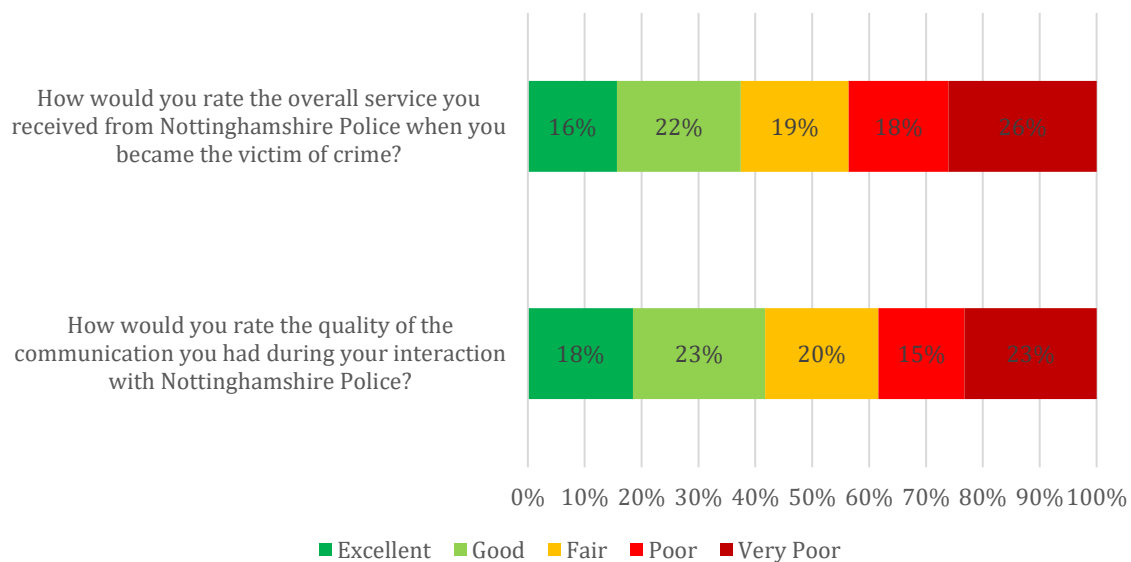
For those who reported negatively on their experiences with the Police three key themes emerged that accounted for low satisfaction. These were:

- Not feeling supported or listened to
- Poor communication from the police and not feeling informed
- Frustration that no action had been taken

"No victim support offered." (Victim)

"Feel we needed a bit more support." (Victim)

"It felt like all of the support was for the offender rather than me as the victim." (Victim)

"No action taken." (Victim)

"They didn't follow up." (Victim)

"Still waiting for a call 6 months on." (Victim)

"Slow responses." (Victim)

"Lack of communication, written or verbal." (Victim)

In some more worrying, but less common examples, victims mentioned victim-blaming, unprofessional attitudes, and commented that the police felt more offender-focused than victim-focused.

"They ridiculed and belittled me, made me feel like the aggressor, made me wait forever for anything to be done, gaslighted me, were unprofessional at every turn, and really mean and rude." (Victim)

"The police were appalling, they played back a recording of the assault to me and told me I was actually the offender" (Victim)

Where victims reported high satisfaction with the police, the single most common reason was good communication and being kept informed and in the loop about how the investigation and case was progressing.

"The police kept me informed and rang me several times to let me know what was happening" (Victim)

Victims felt the police have a crucial role to play in ensuring everybody is aware of Nottinghamshire Victim CARE and many felt the police need more training in trauma-informed approaches so that they demonstrate more understanding, empathy, and care at the point of reporting - victims said this would make them more likely to accept the support on offer.

"Proper and empathetic communication from Notts Police." (Victim)

"Officers having a better understanding of the impact of crime on victims so that they actually make appropriate referrals." (Victim)

"Direct engagement by the police with the victims of crime. Make it clear what support is available and do not ignore requests for support and updates about a crime of which I was the victim." (Victim)

"Having a leaflet or an app provided by police that explains what is the service about." (Victim)

6.2.5 Barriers to accessing the service identified by victims

Disappointingly, victims who participated in this research commonly told us that they had not been offered support by the police, or had never heard of the Victim CARE service. Some of those who did know the service existed, did not know how they could access it for themselves. This meant some victims had referred themselves elsewhere, while others were left unsupported.

"I attempted to access support in many different places, and wasn't provided any anywhere, despite so much time and energy trying to get it." (Victim)

"It was not offered. I didn't know it existed." (Victim)

"I wasn't aware I could get support." (Victim)

"I was not advised to do this. I did not know if I could access the service without being referred." (Victim)

While this is concerning, in many cases victims also reported not feeling they needed support - either because they did not consider themself to be a victim, did not feel the timing was right, felt they were

coping independently, or because they thought others needed the service more than they did. Worryingly, a number of respondents indicated a lack of faith in the service due to their experience with the police and many seemed not to be aware of the independence of the service. As such, Victim CARE could potentially benefit from emphasising its independence from the police in future promotional materials.

"I didn't feel like a victim." (Victim)

"Did not feel it was right for me at the time." (Victim)

"I thought that I was coping." (Victim)

"I feel as if I didn't need support at the time, and there are victims who would appreciate the support more." (Victim)

We asked victims in our survey to tell us how they would want to access the service in the future should they need it. 58% referred to improved digital access, including online referral routes and live webchat. This was reflected in interviews too in which victims referred to a range of digital and web tools that would help access services and support communication. For example, victims commented:

"Having an app provided by police that explains what the service is about" (Victim)

"I would welcome an online 'chat' service for reassurance and advice if necessary. For example, suggestions as to whether it would be appropriate to report to the police" (Victim)

"Text service rather than phone calls." (Victim)

"An online portal via the website would be helpful" (Victim)

Similarly, some victims felt that the current Victim CARE model was not appropriately targeted at young people and that case workers lacked understanding of their support needs.

"Lack of understanding of young people, no understanding of social media or use of it to communicate." (Victim)

Figure 14. How victims want to access support in the future.
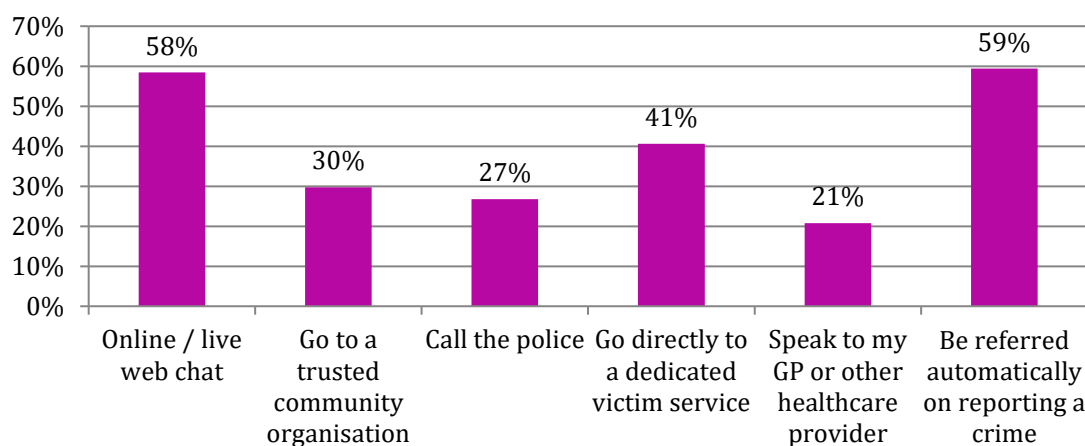
6.2.6 Barriers identified by stakeholders

A key theme to emerge from stakeholders was the need for improved processes for data and information sharing. Staff working for Nottinghamshire Victim CARE felt delays and barriers are sometimes introduced by their lack of access to police systems, preventing them from gathering all the necessary data they require prior to making contact with a victim. They felt having access to these systems would increase their efficiency, streamline procedures, and enable them to offer support more quickly.

Similarly, data and information sharing was considered to be an issue with other external agencies, emphasising the need for sound data and information sharing agreements to be established and put into practice, which in turn will further enhance partnership working.

"A barrier for the current model is not having access to police systems to fill data gaps. Having access to police systems, or timely information to requests for data gaps, would support the team to contact victims quicker, improve efficiency and streamline processes." (Stakeholder)

"Lack of integration with key partners where information sharing is key - for example the police - it would be good to have more access to data to enable smoother processing." (Stakeholder)

The Victim CARE workforce told us about a rising demand for the service and an increasing sense that capacity is being 'stretched'. Stakeholders were able to reflect on the changing patterns in crime and victimisation, noting the shift towards increased fraud and computer misuse offences and felt staffing levels and specialist expertise needed to be boosted in line with current crime trends. Particular note was made of a significant increase in referrals from Action Fraud.

"There are increasing levels of case work, especially with new and emerging crimes related to fraud in all its versions - there is a lack of staff." (Stakeholder)

"Struggling to keep up with demand at the current staffing level. We do reach everyone but caseworkers are under enormous pressure." (Stakeholder)

As described above, a large proportion of stakeholders and victims lacked awareness and knowledge of Nottinghamshire Victim CARE and the support on offer. Accordingly, there is a desperate need for awareness raising and increased publicity of the service in the local community. Stakeholders suggested paid advertisement and victims vocalised the power of social media for advertising services on offer. It will be important to utilise various methods of communication (including displaying adverts in different languages) and modes of promotion to ensure it is reaching all.

"More advertising." (Victim)

"Publicise what it does more vocally, both by ourselves and our paymasters." (Stakeholder)

"Better publicity." (Victim)

"Paid for advertisement of service by OPCC in the local press, TV, billboards, buses etc."
(Stakeholder)

"Websites and promotional material in different languages." (Stakeholder

"Make service more available with better advertising so people know that they don't have to report a crime to get victim support." (Stakeholder)

There was also suggestion of:

"More physical presence in communities - via drop-in sessions, surgeries. Better links with local groups. More diverse ways of referring or accessing information - Webchat function on the website." (Stakeholder)

6.2.7. Consideration of Opt-in / Opt-in procedures for referral to support

As part of our questions to stakeholders, and in relation to victims' knowledge of and take up of support, we asked participants to appraise the advantages and disadvantages of an opt-in versus an opt-out model for referral to Victim CARE. Currently, Nottinghamshire operates an opt-in model, whereby an individual must give consent via the police or other agency to be referred to Victim CARE for support, or they must self-refer into the service. An opt-out model would see victims automatically referred to the service on reporting a crime, unless they explicit opt-out.

There was wide agreement among stakeholders that the current opt-in model results in many victims 'slipping through the net'. This happens for several reasons including: many not being offered support by police when reporting a crime, victims feeling under pressure and having other priorities at the reporting stage, individuals not feeling ready for or wanting support immediately after the crime had occurred. In other words, many stakeholders, and victims, felt the offer of support was not appropriate as a one-off at a time which often means victims do not take up the offer. Many victims reported not wanting support immediately after reporting a crime, but later down the line when their needs became more apparent changing their minds. they may change their mind.

One of the key disadvantages therefore to the current system is that not all need is being catered for as not all victims are being reached and the timing of the offer is often not matched to when victims may need support the most.

Interestingly, there was strong support among stakeholders for the alternative opt-out model which many believed would address the issues of timing and reach.

"Introduce the service right from the offset and re-introduce it once emotions have calmed down, reach out to people, give people more than one chance to access." (Stakeholder)

"A process at the initial point of contact to report a crime that includes the automatic passing of information with regard to the service." (Stakeholder)

"Leaflet left by police at first visit, or contact so that people have the information they need when they need it." (Stakeholder)

"More work done on who can access the service and when support can be given. This cannot happen enough! People need to know what the service is when they are not in crisis. When they can think things through." (Stakeholder)

Despite this level of support, it was also widely acknowledged that opt-out consent procedures carry a significant resourcing burden. Within current capacity, Victim CARE staff follow-up approximately 11,000 referrals annually, this would increase sixfold to approximately 66,000 referrals under an opt-out model and could not be done within the current staffing establishment. It was felt that caseloads would also increase as the service would see a higher rate of take-up of the support offered.

It is also worth noting that 59% of victims reported that in the future they would want to be automatically referred for support on reporting a crime (See Figure 14 above).

The diagram below summarises the key advantages and disadvantages identified by stakeholders for each of the proposed models.

We suggest in examining these findings Nottinghamshire considers developing a hybrid model[13], whereby victims of particular crimes (e.g., high frequency victim-based crime) or those where particular factors are present (e.g., repeat victimization, vulnerable victims or a hate crime has been committed) operate on an opt-out basis, while for other crimes, such as more serious crime, opt-in procedures continue to operate.

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[13] Simmonds, L. (2013). Lost in transition? The changing face of Victim Support. *International Review of Victimology*, *19*(2), 201-217.

Stakeholder views on consent procedures...

Opt-in

Advantages ──────────────────────────────────── **Disadvantages**

Opt-out

Gives victims choice and control	More efficient/cost effective – saves time and resources by only contacting people who want to engage
Prior consent means people are more willing to the access and engage with the service	Mangeable caseloads

Poor take up / victims often decline support when under pressure	Vulnerable people do not always understand how the service can help them and don't opt in.	Relies on police officer making a meaningful offer of support that enables victims to agree to a referral
Timing – victims may not be aware when reporting a crime they may need support later down the line	Not everyone is offered support and victims can 'slip through the net'	

Victims would have more time to consider their support needs and not have to decide on reporting	Take up of the service may be improved (as seen in other services e.g., Witness Service)
Support offered by those who deliver the service would result in a better understanding of the offer	
All victims would be referred / offered the service	Would allow a more pro-active approach to reaching more victims as all would be followed up

Resource intensive / more investment required	Increased uptake of the service would increase pressure on capacity / caseloads
Not gaining explicit consent may pose challenges for data sharing and compliance with GDPR	Additional roles within the workforce would be needed for contacting victims

6.2.8. Promoting Inclusivity within the Nottinghamshire Victim CARE Model

Victims often spoke about wanting more digital access and to see development of Victim CARE's website. Specifically, victims described wanting "more remote access options" that would enable them to utilise support in their own time. Some also felt an online chat function would be beneficial - they saw this as being an opportunity to ask advice about reporting crimes to the police or ask questions about the service prior to engagement. Furthermore, many said they feel more comfortable talking by text, email, or via chat than on the phone or in person. An 'online portal' could be used as an opportunity to provide self-help toolkits and resources.

"Communication via email rather, with appropriate information links also provided to enable reading in your own time." (Victim)

"I would welcome an online 'chat' service for reassurance and advice if necessary. For example suggestions as to whether it would be appropriate to report to the police." (Victim)

"Text service rather than phone calls. I know lots of people who do not feel comfortable talking on the phone." (Victim)

Another key in promoting inclusivity was expressed by stakeholders who felt that improving cultural competence within the service and increasing the support available to those with protected characteristics, and in particular those from key theme to emerge from stakeholder was the need for improved processes for data', would significantly help to overcome the existing barriers to access. Stakeholders felt that one way to achieve this would be with enhanced partnership working with local 'by and for' organisations.

"Services need to be designed to support people of colour more effectively." (Stakeholder)

"More interaction with BAME organisations." (Stakeholder)

The importance of culturally informed messaging in promotional and communication materials was also a key message from stakeholders and victims, alongside greater awareness and visibility of the services within local communities and in police stations. In our survey, a few respondents also suggested support groups and 'coffee mornings' and the police wanted more presence of Victim CARE staff in the police stations.

"More promotional work with these communities to build up trust."

"Have support groups, coffee and cake days, community events etc." (Stakeholder)

"Have things translated in different languages to be more culturally aware." (Stakeholder)

"Physically being where those communities are based, or linking in with events or organisations that work with these communities." (Stakeholder)

"More PR again in other languages and formats." (Stakeholder)

"Commissioning specialist BAMER services [name of local by and for organisation] who support many victims and their families." (Stakeholder)

In addition, stakeholders suggested that Nottinghamshire Victim CARE could look to recruit dedicated support workers, whose role would in part be that of assertive outreach, but primarily be about offering specialist support to victims with protected characteristics.

"Have an individual who specialises in supporting these cases." (Stakeholder)

"Employ specialist workers or use specialist volunteers from other organisations as part of the Victim Care team." (Stakeholder)

This could also be an opportunity to explore more co-design and co-production opportunities for the service in the future:

"Pulling together an advisory group, or regular focus group with representation from minorities to support the direction of the service development." (Stakeholder)

6.2.9 Future Considerations for the Nottinghamshire Victim CARE Model

Overall, stakeholders described an 'ideal service' in the future as 'visible', 'accessible', and 'joined up'.

"An ideal service would be well known throughout every community in Nottinghamshire." (Stakeholder)

"A service that is linked in with all other key services." (Stakeholder)

"One that is more accessible and better promoted. Also works closer with agencies and especially those that refer into the service and is more available to victims." (Stakeholder)

Victims (in addition to the points outlined above), also described future services involving an improved police response, better emotional support, and increased focus on, and access to, mental health interventions like therapy and counselling.

"Better educated officers." (Victim)

"Sympathy from police." (Victim)

"An actual caring response form the force. Not just brushed to the side and the force 'going through the motions'." (Victim)

"Emotional support, how to live life after a crime I am still fearful of being on my own at times." (Victim)

"Talking therapy to help someone cope with their experiences." (Victim)

"Much more mental health/illness focussed, specialist support and guidance as how to stay safe, protected and how to access what little help there is available here." (Victim)

6.2.10. Victim and Stakeholder Feedback regarding Restorative Justice service

Currently, referrals into and take-up of the restorative justice (RJ) service delivered through Nottinghamshire Victim CARE are well below target with just 0.21% of victims pursuing RJ. This is partly driven by a lack of awareness within the wider stakeholder group of the service and a poor understanding of what restorative justice can offer both victims and perpetrators in terms of recovery and rehabilitation.

In 2020-21, there were 122 new referrals into the RJ service, 48% were received from the Local Authority via the City's Youth Justice Service, and 33% were received internally from a Victim CARE caseworker. This demonstrates that wider stakeholder awareness of the service is low, with just 6% of referrals received from the police and just 3% through self-referral.

Many professionals in our survey and interviews reflected this back to us, reporting there has been a lack of buy-in from key agencies and stakeholders, which has limited generally awareness of the service and consequently the low number of referrals.

Stakeholders felt this was partly due to a lack of understanding around RJ generally, and a lack of knowledge of what the Victim CARE service offered specifically - some noted they had not ever heard of this offer prior to participating in this VNA. Linked to this, some survey respondents highlighted that they would like to see more joint working between different providers of RJ.

"From an RJ point of view, there is a lack of buy-in from stakeholders with regard to referring service users for restorative justice. This is primarily the police but there is a lack of referrals from all across the criminal justice spectrum." (Stakeholder)

"Lack of knowledge about service provision. I had no idea that they provided restorative justice or interventions." (Stakeholder)

"We commission a service to work with victims of youth crime (not a victim support service but RJ service); so again joining up of services and creating a pathway/working together to meet victim and young people's needs would be good but this isn't currently happening." (Stakeholder)

The majority of cases that are currently open within the RJ service involve less common but more serious crime types including 'violence against the person'. As seen in the graph below, crimes which are more highly occurring, often referred to as 'volume crime'[14] such as burglary and vehicle crime, currently have a lower take up rate for RJ. However, evidence shows that restorative justice can be effective for recovery at all levels of crime types and therefore there is a current gap in the RJ service in terms of the crime types currently targeted.

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[14] Bradbury, S. A., & Feist, A. (2005). *The use of forensic science in volume crime investigations: a review of the research literature*. London: Research Development and Statistics Directorate, Home Office.

Figure 15. Case profiles for RJ by crime type
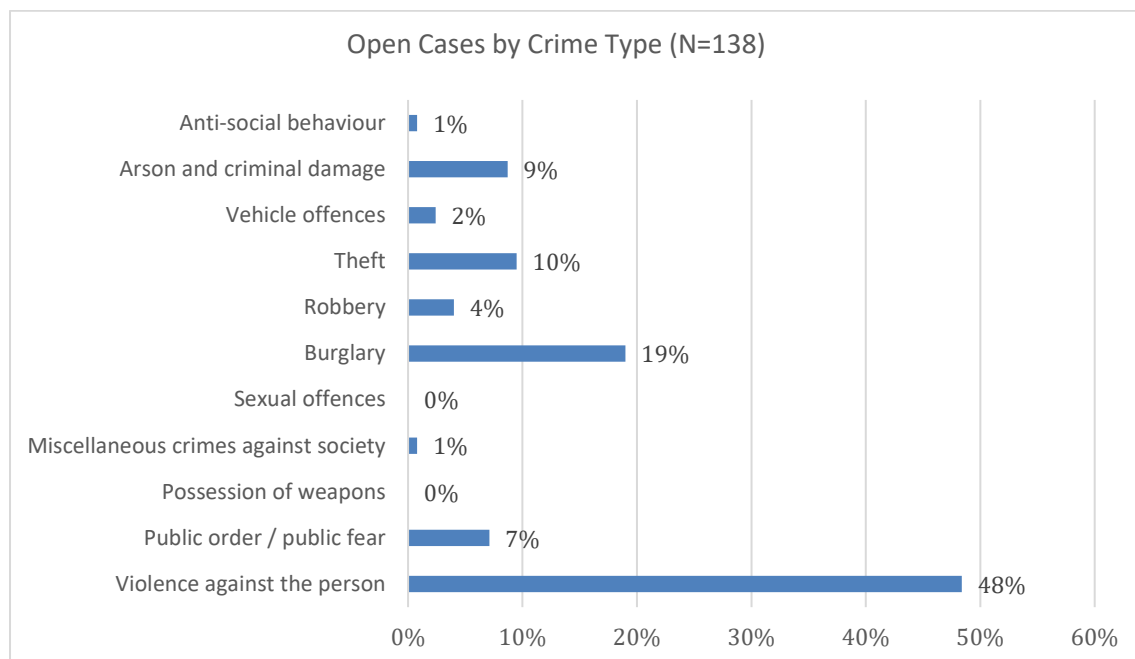
Of the cases open in the RJ service only a very small proportion (currently 5%) successfully see the process through to the contact between victim and perpetrator. The majority of cases are in the victim preparation stage (56%) but only 13% involve perpetrator preparation. This demonstrates a significant drop in cases occurring between victim and offender preparation stages. This was reflected back to us in interviews where it was clear there was less engagement with RJ from the Probation Service, in part due to national reforms where other priorities have taken over.

Although national estimates for take up of RJ are not available, the drop off we have observed between victim and offender services suggests this is an area of unmet need.

Figure 16. Case profiles for RJ by stage
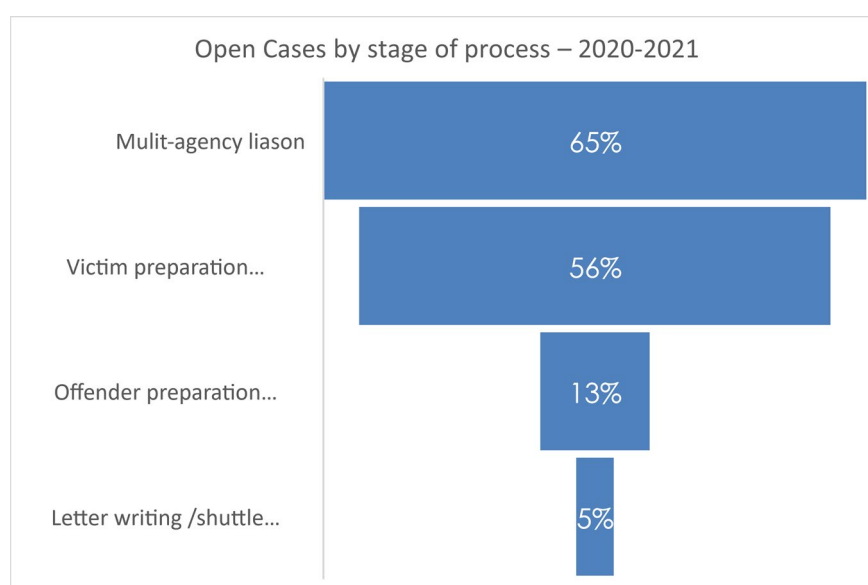
We spoke to a number of victims who had taken up the offer of RJ and where this had been successful (2 of the cases we interviewed had had face to face contact with the perpetrator), the impact on recovery had been significant. Both participants had found the process transformative and had praised the skills and commitment of the RJ practitioners at Victim CARE unreservedly.

"I wanted to meet him and tell him that I had forgiven me. I wanted him to know that I wanted him to move on with his life" (Victim)

"Understanding RJ is the key – I understood it as forgiveness. But it doesn't have to be like that, there are different levels- forgiveness, getting answers, telling them how you feel, I could have had the meeting without giving forgiveness" (Victim)

In order to represent views on the current restorative justice service, we have performed a SWOT analysis below, identifying the key strengths, weaknesses, opportunities and threats as we heard them from stakeholders and victims across Nottinghamshire. We draw out the opportunities in our recommendations below as we reflect on opportunities for developing the offer.

Restorative Justice in Nottinghamshire

Strengths

- Postive impact on cope and recovery for victims
- Postive impact on perpetrator rehabilitation
- Dedicated RJ practitioners within the Victim CARE service
- Dedicated RJ Lead and team within Notts Police – commitment to embed RJ practice within the Force
- The process is victim–led although can be initiatied by victim or prepertrator

Weaknesses

- Take up of RJ service is low
- No clear referral pathways
- General understanding of RJ can be poor and confused with other processes (e.g., community resolution)
- Awareness of RJ service provided by VictimCare can be poor among wider stakeholders (e.g., HMP Nottingham staff only know about REMEDI)
- Disjointed offer: split between county/city for Youth Justice service / Police – ASB; Victim CARE 'serious' crime.
- Underlying resistance / mistrust of RJ process and fear of re-victimisation
- Organisational barriers to information sharing

Opportunities

- Co–commissioning RJ with Probation, Youth Offending and the OPCC would support a more joined up approach
- Increase awareness / education of RJ among perpetrators within the prison system
- 'Make Notts Safe' Police and Crime Plan 2022 commits to a new Restorative Nottinghamshire service
- Golden Thread – timing of offer is crucial, often given too early and only once, multiple points of offer throughout the process / engage multiple agencies
- Widen the scope of crime types / victim profiles accessing RJ beyond the current focus on lower–end (Police) and serious crime (Victim CARE)
- The new Notts Criminal Justice Assurance Board, will provide a robust governance structure to oversee development and delivery of a new RJ service

Threats

- Multiple 'RJ' offers complicate the landscape without clear joint working agreements
- Georgraphical dependencies and logistical challenges – location of victim and perpetrators / multiple agency involvement
- Lack of joint working between Victim CARE / Police / Probation / other providers
- Professional standing of RJ within the wider CJS

7. RECOMMENDATIONS

In this section, we suggest some overarching recommendations for supporting victims in Nottinghamshire, as well as some specific recommendations for Nottinghamshire Police. It is important to acknowledge that we received large amounts of positive feedback from victims, service users, and professionals about the current commissioned service. However, there is room for a number of improvements to be made in future service development to better meet the needs of victims.

7.1. RECOMMENDATIONS FOR SUPPORTING VICTIMS IN NOTTINGHAMSHIRE

7.1.1 Ensure sufficient resources are provided to meet the needs of service users and to accommodate fluctuations in demand and crime trends

- A future Victim CARE service should provide a flexible model for commissioners such that resources can be scaled up or down depending on changing need and demand. The current picture suggest a high level of unmet need as only a small proportion of victims are referred to, and take up, support from Victim CARE. Currently, just 14% of victims who report a crime to the police are referred to Victim CARE. In addition, only 48% of crimes are reported to the police, and there remain many 'unknown' victims in the community. The challenge for future service is to identify and engage with victims who are either not known or not being referred at point of reporting. We recommend allocating additional resource to a) broadening the reach of the service and engaging a larger proportion of victims (e.g. through embedding caseworkers in the community); b) addressing current gaps in provision (e.g. mental health specialist; dedicated outreach workers to engage particular communities; and c) ensuring caseloads continue to enable tailored intervention by identifying appropriate practitioner/caseload ratios to ensure sufficient capacity is maintained.
- The service, and resource, should also be responsive to changes in crime patterns and trends. For example, Victim CARE staff reported needing more specialist training in relation to fraud in order to understand more about how to support victims, including better technical and specialist expertise. Likewise, victims reported needing more practical support in relation to being the victim of fraud. The recent significant increase in cases of fraud has stretched current capacity and more focus and resource on this particular crime type is needed. In order to keep fraud within the general Victim CARE model staff need upskilling and resources put in place to support the significant increase in demand of this particular crime type – an increase seen nationally.
- The one-to-one caseworker model of Victim CARE was highlighted as good practice and works well in meeting victims' needs. In particular, it is able to tailor support to individuals and victims reported the value of having one person who knew their case. Any changes to the model in future contracting should ensure this element is retained and continues to be adequately resourced, such that victims can continue to be allocated a named caseworker.

7.1.2 Consider a hybrid approach to opt-in/opt-out consent where identified crime types and/or victim profiles are automatically referred for support (opt-out) while others identified continue on an 'opt-in' basis

- There are opportunities to improve and increase access to support for victims through a revised approach to referral and consent procedures. While opt-out procedures would ensure reaching a greater number of victims, it would require increasing resources in relation to a) an estimated fourfold increase in referrals for follow-up contact and b) an increase in caseloads as more victims are contacted and take up the offer of support.
- An alternative to a blanket opt-out policy, would be to develop a more nuanced hybrid approach in which both procedures can be used depending on specific criteria determined collaboratively by the police, NOPCC and Victim CARE. Nottinghamshire Police are in the process of setting up a system to enable an opt-out protocol for victims of knife crime, who often do not take up the offer of support. This initiative should be used an a pilot in order to assess the feasibility of widening a hybrid approach to the other crime types. For example for victims of particular crimes (e.g., volume crime) or those where particular factors are present (e.g., repeat victimization, vulnerable victims or victims of hate crime) could work on an opt-basis with automatic referrals to Victim CARE, while for other crimes, including more serious crime, explicit consent would be more appropriate in which opt-in procedures could be used. In order for this model to work well, it will rely on accurate identification of vulnerability factors by Nottinghamshire Police. This will require improvements to how and what data about victims is captured by the force (See 7.2).
- Improving self-service mechanisms should also be integrated into any revised approach. For example, many victims may benefit from self-help options as a first level of support (i.e., signposting to resources online), including access to specialist helplines, and/or peer support networks (locally or nationally). Improved access to this information at the point of reporting the crime is needed. For example, an information leaflet, access to an app or text message could be provided to all victims when reporting a crime that can guide them through the levels of help available, in a victim-friendly manner, and would provide a point of reference should support be needed later down the line.

7.1.3 Develop clearer, robust referral pathways, and disseminate these to all potential referrers.

- Participants highlighted a need to improve referral pathways into Notts Victim CARE and stakeholders were sometimes unclear on how to refer individuals into the service. Clarifying the message for victims, potential service users, and all relevant professionals of what support is available and who the service has been designed for is essential in order to support strong referral pathways. For example, some agencies were not aware that support through Victim CARE is available even if the crime has not been reported to the police.
- The onus should not always be on victims or vulnerable individuals to present or refer themselves later if they have not initially taken up the offer at the point of reporting the crime. Consideration should be given to other touchpoints in the criminal justice journey where further formal offers of support could be made. Many victims do not take up the offer initially, but find they do need support later in the process but are not formally offered again.

● Due to crime and victimisation often negatively impacting an individual's mental health, there is a need for Notts Victim CARE to develop sound joint working policies and procedures with both statutory and voluntary mental health support services, including having effective referral pathways in place. If funding allowed, a specialist mental health worker embedded in the service would support a mental health pathway managing more complex cases, advising caseworkers on mental health provision, and/or be responsible for co-ordinating and signposting on appropriately. This would strengthen referral pathways into mental health services, and support caseworkers managing complex cases. We suggest piloting the impact of this approach by seconding a mental health nurse into the service for a maximum of 0.4 WTE equivalent. This model is used by Leicestershire Victim First and could be used as a point of comparison for evaluation purposes.

● Referral pathways should be promoted effectively with all professionals who may come into contact with victims and potential service users. Notts Victim CARE could consider delivering awareness training sessions specifically around referral pathways and procedures to key partner agencies (including but not limited to Local Authority partners, Community Points, the police, healthcare professionals, and key teams in the Probation Service such as the Victim Contact Scheme).

● There is also a need to improve referral pathways for victims who do not report to the police. Victims and potential service users need to be able to access clear information that explains the support on offer (preferably through websites, social media channels, and leaflets). Many victims reported wanting better access to information online, and a mechanism for asking anonymous questions. This could be achieved by providing a 'frequently asked questions' page on the website, a process map for victims to understand where they are in the journey and a 'webchat' function to ask questions directly to a caseworker.

7.1.4 Improve website functionality and ensure all information provided is up-to-date and accurate

● It is noted that the original specification for Victim CARE emphasised the function of the website as a self-service facility. However, this has not been fully realised in the term of the current contract, and improving the website, including developing a more comprehensive self-service portal, should be prioritised in the future contract in order to see improved rates of self-referral via this route. An online portal can include mechanisms for accessing further information, providing case details, providing automated updates and a messaging service.

● Information on the website appears relatively static and needs to be updated regularly with more accurate information and changes. One example of this, is the community point directory which needs more up-to-date information including all current community point organisations and contact details for each organisation. At present, there are postal addresses for the community points listed but not all have telephone numbers, email addresses or websites listed.

● In developing the website a more victim-focused approach is needed which speaks directly to individuals seeking support and provides comprehensive information and resources. Some areas of the current website, such as the Community Point pages, appear more directed at professionals and less at victims. One approach would be to clearly demarcate which sections of the website are 'for professionals' and which are 'for victims' in order to direct people to

the right information for them. We would advocate seeking a communications partner to work with the service in designing a more comprehensive web presence and online facility.

● Link to improved website functionality, should be greater social media presence and smart promotion and marketing of the service that proactively targets underrepresented victims.

7.1.5 Improve data recording and information sharing agreements between Victim CARE and key partners

● Data and information sharing was frequently raised by stakeholders as a key barrier to providing a seamless and robust service, with significant delays in access to information. This was the case in particular for the RJ service, where clear information pathways between key partners (e.g., Probation and Victim CARE) were not readily available. However, Victim CARE staff also reported difficulty in accessing data from the police where this was needed to follow up for particular support cases; Victim CARE staff reported information pathways between the force and the service being slow. In addition, without full data on who is not taking up the service, which is held only by the police, it is difficult for the service to monitor and analyse demand, need and gaps.

● We would advocate reconsideration of previous data sharing agreements with Nottinghamshire Police to support better information sharing and monitoring. In particular, we recommend the force provides profile data to Victim CARE on all victims, including those who do not take up the offer of support. This will allow the service to monitor take-up, assess demand, and identify trends in where there may be gaps in take up. This will allow the service to proactively engage victims in the service through targeted outreach work.

● Data collecting and recording of key demographic data on victims needs a consistent approach between Victim CARE and Nottinghamshire Police. In particular, data should be captured, using consistent categories, including age, gender, ethnicity, sexual orientation, disability etc., and broken down by location. We found across all data sources very poor recording of ethnicity data with a high level of missing information.

● Similarly, the provider should be capturing crime types for all victims accessing the service and ensure these are captured using comparable categories to those used by the police and the Nottinghamshire Police and Crime Survey. This will allow better analysis of demand, needs and gaps and the ability to make comparison with other data sources. As identified above this will allow the provider to take a pro-active approach to identifying and addressing gaps.

7.1.6 Notts Victim CARE should proactively seek to engage with individuals who have protected characteristics using a range of approaches

● Based on the literature review findings and quantitative data analysis, it is apparent that those with protected characteristics, and in particular those from minoritised ethnic backgrounds are less likely to access support. Whilst the reasons for this are not fully understood and require further research, it is vital that this is not overlooked and that Notts Victim CARE attempts to overcome such barriers as effectively as possible. As several studies demonstrate individuals from minoritised ethnic groups are often unlikely to seek help themselves due to fear of stigma or mistrust of services, there is a particular need for awareness raising initiatives amongst these groups. This could be done using non-traditional methods of communication,

including utilising bilingual radio stations or TV channels and by contacting local businesses and places of worship to take advantage of these spaces to put up posters or place leaflets.

● Consideration should be given to provision of support for individuals with specific protected characteristics facilitated by someone of their background, accepting that there may also be preference for help from outside of the community, and this should be guided by the individual and their circumstances. As such we recommend Notts Victim CARE consider recruiting full-time outreach workers from particular communities of interest. This would require a dedicated and skilled individual who could take on an assertive outreach role.

● Appropriate cultural safety and awareness training should be delivered to all practitioners working for Notts Victim CARE, and this could be delivered by the outreach worker and/or 'by and for' organisations.

● There should be availability of appropriate interpreters/translators as needed for anybody whose first language is not English to allow service users to express themselves freely.

● Notts Victim CARE needs to be as flexible in approach and timing as possible to overcome any avoidable barriers to accessing support. Where possible and appropriate, this should include virtual options, and opening hours outside of 9am-5pm.

● Where possible, the service should provide drop-in sessions (in person and virtually) to promote accessibility (see also 7.1.7 outreach model below).

7.1.7 Reconsider the function and purpose of community points in the wider victim CARE model and consider moving to a 'narrow and deep' versus 'wide and shallow' approach

● Currently, there are a high number of community point organisations which are inactive or engage very little with the Victim CARE hub, despite resource being dedicated to outreach and development work. In addition, referrals into the service through community points are very low. We would advocate reconsidering the referral and support function of the community point model and refocusing resource on a narrower but deeper engagement with identified organisations. A more targeted approach could yield better results more efficiently. For example, the model used by Victim Support in Kent provides an illustration of an outreach-based approach in which caseworkers are embedded in a number of local community organisations on a walk-in/surgery basis for limited times each week (e.g., 2 hours each week for walk-in consultations). These, known as Compass Points, include supermarkets and shopping areas as well as known charities and partner agencies. This allows Victim Support to target information and support directly to specific communities, and those identified as not typically accessing the service. It also provides a strong referral pathway into the core service when needed. For further information on the Kent model see: https://www.victimsupport.org.uk/compass-points/

● An alternative would be to consider a new funding model for community points to deliver victim support in order to incentivise engagement and promote victim referrals. The NOPCC could consider providing grants, in particular, to 'by and for' organisations across Nottinghamshire to establish partnerships that assist with the promotion of commissioned service, to ensure individuals with protected characteristics are reached and aware of the support available to them.

● Feedback from stakeholders identified that a strength in the current model was the high quality training and education delivered by Victim CARE to participating Community Point

organisations. We would advocate retaining this core element of the Community Point programme and exploring ways in which it could be enhanced and expanded.

7.1.8 Engage the victim voice in the future design and implementation of Notts Victim CARE

- Wherever possible, Notts Victim CARE should consult with victims on what support is needed and how victims want support to be delivered. This activity should be over and above service evaluation and feedback surveys, which should also be regularly collected, be responsive to victims' needs and be used pro-actively to drive improvements.
- We would advocate a wide programme of victim voice engagement activity, including providing opportunities for consultation and co-design of any future Notts Victim CARE service.
- In particular, it is vital that Notts Victim CARE engage potential service users who have protected characteristics in facilitated co-design and co-production activity in order to ensure the service is meeting the needs of those individuals and communities. We would advocate using an external, independent partner to facilitate this activity.
- Any reconsideration of the community point model should engage community point organisations in co-design and co-production activity to promote and support better partnership working and collaboration.
- There should be options for service-users to provide feedback via a range of modes, including in person as well as online and through surveys with the option to remain anonymous.
- The NOPCC should also consider ways in which they can evidence that victims' voices matter and are being listened to within Nottinghamshire, for example through publicly publishing the executive summary of this VNA report and in the longer term developing a 'You said, We did' campaign.

7.1.9 Broaden the Restorative Justice offer through co-missioning and improved partnership working and education

- Pursue opportunities for co-commissioning of restorative justice between the NOPCC, the Probation Service and Youth Offending team, in order to increase the reach of the offer, raise awareness amongst victims, perpetrators and professionals, and support stronger partnership working between key agencies. There is currently a gap in joint working between Victim CARE and the Probation and Prison service which should be addressed in any joint commissioning agreement. For example, the significant drop in uptake of RJ between the victim and perpetrator preparation stages could be addressed by wider promotion and education of restorative justice amongst perpetrators.
- There is a need to promote a system change in partnership working and collaboration across the spectrum of victim and offender services in order to lead the restorative justice agenda across Nottinghamshire and promote buy-in from key stakeholders. Initial investment should be on addressing these system barriers and improving education and understanding among key stakeholders.
- We would advocate forming a Restorative Justice Programme Board, including Senior Leadership/RJ champion representatives from Notts Police, Probation and Prison Service, Victim CARE and other key agencies as required, to steer the development of RJ, enhance its

professionals standing and to promote partnership working. The Restorative Justice Programme Board should feed into the local Criminal Justice Assurance Board.

- There is scope to increase the offer of Restorative Justice to victims of a broader range of crime types. Currently, uptake of the service is driven by victims of more serious crime. However, broader reach would be for the service to focus on promoting within the 'volume crime' bracket.
- In the immediate term we recommend the Notts Victim CARE Restorative Justice service makes contact with HMP Nottingham's Offender Manager Unit in order to raise awareness of the service (the unit currently work with REMEDI in Derbyshire but have no link to the Nottinghamshire service). In addition, there is a training and engagement need within the regional Victim Contact Scheme that could play a vital part in promoting the RJ service to victims.

7.1.10 Incorporate the need to raise awareness of the service into the future contract

- The service provider should have a requirement within their contract to focus on pro-active promotion of the support offer. Although there is currently outreach and promotion work being undertaken, for many key stakeholders, partner agencies and victim themselves, these messages have not been landing sufficiently and general awareness of the service was poor.
- The service provider should advertise pro-actively on various social media platforms (keeping up-to-date with latest trends based on their target audience), in healthcare settings such as GP surgeries, supermarket notice boards, places of worship, and other commonly visited places in the community, and ensure information is available in different languages and accessible to those with other communication needs. Clear visibility of the service, including information and contact details, must be in place at all police stations.

7.2. RECOMMENDATIONS FOR NOTTINGHAMSHIRE POLICE FORCE

7.2.1 Improve data recording and information sharing agreements with Notts Victim CARE.

- As above, we recommend revisiting data and information sharing agreements so that quicker, accurate information can be accessed directly by Notts Victim CARE. This will ensure a more timely service for supporting victims, and allow pro-active data monitoring in relation to demand, need and gaps.
- We would advocate for the importance of Nottinghamshire Police aiming to enhance accurate data capture of victim demographics (in particular, for ethnicity), ensuring that all demographic questions are asked and recorded when a victim reports a crime directly to the police or via the online form.
- Police recorded age categories are very broad and make comparisons to other data sources difficult. We would advise breaking down the 25-60 age bracket, using 10 year age categories in order to get more detailed and accurate measurement of victims' age.

7.2.2 Create More Victim-Focused Processes

- It is essential that a meaningful offer of support is made to victims by the police when a crime is recorded. We recommend a trauma-informed approach is adopted by all police officers when making an offer of support. In order to achieve this, and improve consistency in how offers are made, we advocate a programme of trauma-informed training for Nottinghamshire Police.

- Similarly, Nottinghamshire Police would benefit from undertaking appropriate cultural safety and awareness training, this could be delivered by the outreach worker and/or 'by and for' organisations as above.

- Victims require faster access to support. Nottinghamshire Police have a critical role to play and wherever possible, should ensure they are offering all victims the opportunity to be referred to Notts Victim CARE, and clearly explain the role of the service and what to expect. If consent has not been given, police should be providing victims with signposting information via appropriate leaflets or information packs. Currently, in light of recommendations made to improve the website, consideration should be given to an electronic leaflet or simple information pack that could be given to victims.

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GLOSSARY

ASB = "Anti-social behaviour (ASB)"
As defined by the Home Office as: "Acting in a manner that caused or was likely to cause harassment, alarm or distress to one or more persons not of the same household as (the defendant)."

CCGs = clinical commissioning groups: NHS organisations that arrange the delivery of NHS services in England. CCGs typically commission most of the hospital and community NHS services in the local areas in which they are responsible

CJS = criminal justice system: the system that aims to deliver justice to those who have been accused of committing crimes. This includes police forces and court processes

CPS = The Crown Prosecution Service (CPS) prosecutes criminal cases that have been investigated by the police and other investigative organisations in England and Wales.

CYP = Children and Young People

CSEW = The Crime Survey for England and Wales is widely considered to be the most important source of information about trends in crime

GDPR = General Data Protection Regulation (2018), is a European Union (EU) law that came into effect on 25th May 2018. GDPR governs the way in which we can use, process, and store personal data (information about an identifiable, living person).

Minoritised ethnic communities = used to refer to any individual or community which is marginalised or minoritised. The term has been recommended more recently as it recognises that individuals have been minoritised through social processes of power and domination rather than just existing in distinct statistical minorities. It also better reflects the fact that ethnic groups that are minorities in the UK are majorities in the global population.

MoJ = Ministry of Justice: a major government department that is central to the justice system, and aims to protect and advance the principles of justice

NOPCC = Nottinghamshire Office of Police and Crime Commissioner: the department in which the police and crime commissioner sits.

ONS = Office for National Statistics

PCC = Police and Crime Commissioner: an individual who is elected into office to hold their designated police force(s) to account and advocate the voice of the people they serve.

RJ = Restorative Justice
SARC = Sexual Assault Referral Centre: a place where victims and survivors can be referred to or refer themselves to, in order to receive support following a recent or non-recent sexual assault

SOC = Serious or organised crimes

TCSEW = Telephone -OperatedCrime Survey for England and Wale replaced the face-to-face survey (CSEW) in May 2020.

Trauma-informed: a specific approach to care which means understanding, anticipating, and responding to the issues, expectations, and special needs that a person who has been victimized may have. At a minimum, trauma-informed services seek to do no harm—to avoid retraumatizing or blaming clients for trying to manage their traumatic reactions.

VCOP = The Code of Practice for Victims of Crime in England and Wales. The Victims' Code focuses on victims' rights and sets out the minimum standard that organisations must provide to victims of crime.