Impact of a Youth Violence Intervention in the Emergency Department of a London Hospital

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THIS WOMAN IS TALKING TO A MAN WHO HAS JUST BEEN STABBED.
2015-17 Cohort

- 717 risk-assessed referrals between 2015-17, of which 86% were for assault-related trauma
- 7 in 10 ED attendances were a result of stabbings (knife or bladed article)
- 1 in 5 ED attendees had been admitted to the hospital in the last 5 years following violence
- 2 out of every 3 young people referred live in the 30% most deprived neighbourhoods in the country.
- 89% of referrals to SMH YVIP were Male
- Mean age Male: 19.25; Female: 18.25
The Evaluation

• NPC Associates were appointed by Imperial Healthcare Charity in 2014 to undertake a three year evaluation of the impact the project has on improving the outcomes for young people attending St Mary’s Emergency Department and Major Trauma Centre.

• Outcomes for the YVIP were identified and developed through broad internal and external consultation.

• Mixed methods design, including:
  • risk assessments by Redthread Youth Workers,
  • hospital attendance records,
  • case studies,
  • feedback from young people,
  • ED staff surveys,
  • and feedback from relevant agencies working in the field of youth violence in London.
Outcome 1

Redthread provide value for money by reducing the financial and social costs associated with violent crime

Using New Economy Manchester’s Unit Cost Database*, we can create a ‘cost per incident of violent crime’. Using unit costs related to:

- Arrest & Court proceedings
- Hospital costs

A conservative estimate would be a minimum of circa. £18,000 per incident (not including concussive costs i.e. ongoing healthcare support, counselling services)

<table>
<thead>
<tr>
<th>Unit</th>
<th>Cost</th>
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</thead>
<tbody>
<tr>
<td>Police officer costs per incident</td>
<td>£ 8.00</td>
</tr>
<tr>
<td>Youth offender, average cost of a first time entrant (under 18) to the Criminal Justice System</td>
<td>£ 3,152.00</td>
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<tr>
<td>Court event: Violence against a person (over 18) (per person per court event)</td>
<td>£ 12,716.00</td>
</tr>
<tr>
<td>Arrest - detained</td>
<td>£ 593.00</td>
</tr>
<tr>
<td>Ambulance services - average cost of call out, per incident</td>
<td>£ 216.00</td>
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<tr>
<td>A&amp;E attendance - investigation with subsequent treatment</td>
<td>£ 125.00</td>
</tr>
<tr>
<td>Hospital inpatients - average cost per episode (elective and non-elective admissions)</td>
<td>£ 1,807.00</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>£ 18,617.00</strong></td>
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</tbody>
</table>

The cost of the YVIP programme at St Mary’s Hospital is circa. £201,000 per annum

A ‘break even’ analysis suggests that Redthread would only need to reduce recidivism for 9 YP per annum to pay for itself.

(£201,000/£18,671 = 9)

Redthread engaged with 341 YP in 2017

Outcome 2

‘At-risk’ young people are supported by the YVIP to access appropriate supporting services in a planned way

• Action plans agreed with 95% young people who were risk assessed (N=717)

• Of these YP with action plans, 1 in 3 had no contact with agencies that could benefit them

• Follow-up risk assessments showed that take-up of ‘health services’ and ‘other agencies’ improved by 31% and 46% respectively from baseline

• Feedback from agencies highlighted the role that Redthread played in strengthening YPs’ resolve in dealing with support agencies

• This outcome depends upon the availability of effective local services – enhanced by Redthread’s intervention at the teachable moment.
Outcome 3

ED staff increase awareness of, and engagement with young people with violence-related injuries

- In 2017, 85% of referrals made by hospital staff - up from 58% in 2014 - demonstrates a confidence and trust in the service
- Overwhelmingly positive feedback about the approach, contribution and value of the Youth Workers
- Case follow-ups to medical staff provide closure
- Redthread’s intervention facilitates the biopsychosocial approach, fortifying the biomedical model delivered by clinicians

"... [I] feel secure that we are not just discharging straight back into the big bad world that brought them in here. There is only so much we can do regarding their social circumstances, before Redthread we would have discharged to GP or Social Services, [which are] not that secure, now we know someone is keeping an eye on them …"

ED Consultant 2016
Conclusions

• Evidence suggests that the ‘teachable moment’ exists, and enhances the willingness of young people to access support that reduces risk
• This stems from the quality of the relationship between the Youth Worker and the young person, and the development of trust in a relatively short period of time
• There are very strong working relationships between the Redthread team and the hospital’s Safeguarding Team and the Imperial Trust. This ensures vulnerable young people are identified and supported appropriately
• Using conservative estimates of the cost per incident of violent crime, Redthread would only have to reduce readtendance for 9 YP per annum in order to pay for itself – reducing the burden on the NHS.
Limitations

• Reattendance of young people at other hospitals (i.e. outside of their community) was not tracked
• Issues with the conceptualisation of ‘the teachable moment’
• While young people report that the relationship they have with Redthread and the support they receive is positive, obtaining meaningful (longitudinal) feedback continues to be challenging

Future Directions

• Provides Redthread with a road map for future research projects and evaluations
• Ensure we extract learning that improves the Redthread service
• Conceptualising the ‘teachable moment’ – allowing Youth Workers to leverage opportunities for behavioural change
• Helping to build Redthread’s Theory of Change modelling
• Provides Redthread with a grounding from which relationship building and collaboration can be better fostered