Commissioning victim services: meeting the needs of people with mental health problems

A briefing for Police & Crime Commissioners
August 2014
The opportunity - your role as a Police & Crime Commissioner

As a Police & Crime Commissioner (PCC) you are in the ideal position to make sure that people with mental health problems who are victims of crime get the support they need. As well as becoming responsible for commissioning relevant services, you are also able to bring key agencies together and encourage joint working. We’re here to help you commission and co-ordinate local services that ensure people with mental health problems get the support they need when they are victims of crime, and help to prevent them being victims in the future. We can help you work in partnership with other services to make this happen.

Background - PCCs commissioning services for victims

PCCs are in the process of taking over responsibility for commissioning the majority of local support services for victims of crime. PCCs must ensure that people who’ve been victims of crime get the support they need to cope with the immediate impact and to recover from the harm they’ve experienced. Support will be tailored according to local need but will be targeted at those who’ve suffered the greatest impact, including victims of serious crime, those who are persistently targeted, and the most vulnerable.
Experiences of people with mental health problems as victims

Making sure that services work for people with mental health problems will be critical, as they are significantly overrepresented in each of the priority groups of victims.

They are often vulnerable and intimidated

People with mental health problems are often identified as vulnerable and deliberately targeted again and again in their local community, particularly when they are unwell and less able to protect themselves. They are also often victimised by relatives and acquaintances.

They are often victims of serious crime

People with mental health problems are at an extremely high risk of being a victim of serious crimes such as assault, sexual and domestic violence, rape and sexual assault. See below for prevalence.

They feel the impact of crime more acutely

People with mental health problems are more likely to suffer social, psychological and physical adverse effects and often have less of a support network to help them cope and recover. Being a victim of crime can trigger worsening mental health and potential crisis.

Mind and Victim Support’s recent ground-breaking report, At Risk Yet Dismissed, reveals that people with mental health problems are at an extremely high risk of crime. They are:

- Three times more likely to be a victim of crime than the general population
- Five times more likely to be a victim of assault (10 times more likely for women)
- More likely to be a repeat victim - 43 per cent had experienced multiple crimes
- Far less likely to be satisfied with the service and support they receive

The detailed research was undertaken by four universities over two years. It found that, too often, victims of crime with mental health problems do not get the understanding and support that they need to help them cope with the impacts of the crime and recover. Too many people told us they felt they were dismissed, not believed and in some cases even blamed for the crime. As a result, less than half of victims with mental health problems report crimes and a third do not disclose their experience to any professional. For many people this is because they don’t expect to be taken seriously or supported.

Being a victim of crime can have a significant impact on anyone’s mental health. As well as prioritising the needs and experiences of victims with mental health problems your commissioning also needs to support the mental health of all victims. The Ministry of Justice recognises this and has identified ‘mental and physical health’ as one of eight key categories of need which support services should aim to help victims with.
People with mental health problems often have greater support needs after experiencing a crime. We’re here to help you commission services that will support people who find themselves in this situation. These principles can inform your commissioning to help you ensure that people with mental health problems get the support they need to cope with the immediate impacts of the crime and to recover from the harm experienced:

- **Take on board the views of people with mental health problems** - This will help you commission the right local support services. Generic consultation activities and Victims Needs Assessments may not fully reflect the needs and prevalence of victims with mental health problems. As one of the most disadvantaged and socially excluded groups in society and some of the least well heard voices, their experiences may not be reflected in general engagement. We can help you reach out to people in your area who have lived experience of mental health problems.

- **Train frontline staff** - Staff in health, social care, police and victim support services need to understand the experiences and needs of people with mental health problems, the nature and impact of victimisation and how to communicate and respond appropriately to this key group of victims.

- **Support people to report that they have been a victim of crime** - People with mental health problems can often have a complex relationship with the police and may be reticent to report crimes. Outreach work in the community and working with voluntary organisations, community mental health teams and health services can help you to build trust and raise awareness. Building these relationships can also help other services to improve their processes to identify victimisation, and support people with mental health problems to report incidents to the police.

- **Develop services that address the impact of being a victim** - Being a victim of crime has a substantial impact on people with mental health problems. A wide range of agencies including housing associations, community mental health teams, criminal justice agencies, health and social care, victim services and voluntary organisations need help and support to understand the breadth of the impact of crime on people with mental health problems and how best to support people.

- **Empower and support people to prevent repeat victimisation** - Hate crime and repeat victimisation are commonly experienced by people with mental health problems. A good way to tackle this is by developing proactive initiatives and services that focus on crime prevention and helping people to develop their resilience and confidence, for example safety planning, crime prevention advice and working with individuals to develop safety plans.

- **Work in partnership to provide joined up services** - People with mental health problems often have greater support needs after experiencing a crime and often need support from a range of agencies. These complex needs can be met through inter-agency working, for example by developing known contact points, referral routes and mechanisms for information sharing between agencies.
What are the key priorities for commissioning?

“Victims can have complex needs. Increasingly it is being recognised that to meet the needs of groups of people with complex needs a partnership approach is required. As part of their commissioning role PCCs can have a key advocacy role in ensuring the victim’s pathway through the criminal justice system runs smoothly and partners work effectively to meet the personalised needs of victims with complex needs.”

Ministry of Justice, Victims’ Services Commissioning Framework, May 2013

People with mental health problems who are victims of crime can often face barriers to accessing the support that they need to cope and recover. Furthermore, generic victims’ services often lack expertise and understanding of mental health. Our report, At Risk Yet Dismissed, made a number of recommendations to address these barriers. For example a ‘case management’ approach or assigning a ‘named key worker’ could help to ensure that victims with mental health problems get a supportive, coordinated response and help to navigate a complex system. Priorities might include:

- Relationship and capacity building with local networks and commissioners
- Ensuring mental health is fully integrated into local police planning
- Providing information, awareness-raising and training for frontline staff
- Community outreach and empowerment of people with mental health problems

Relationship and capacity building with local networks and commissioners

The report identifies serious and complex problems which require a multi-agency approach to prevention, provision, planning and commissioning. Agencies that provide services for people with mental health problems including housing associations, community mental health teams, criminal justice agencies, health and social care, and voluntary organisations need to work collaboratively. For example:

- Establish contact points, referral routes and mechanisms for info sharing.
- Establish a community multi-agency risk assessment committee to allow sharing of relevant information on victims/witnesses/perpetrators and coordinate action plans.
- Work with local authorities and housing providers to develop schemes to tackle crime (and hate crime) against people with mental health problems.
There is also a need to build relationships with health commissioners, for example:

- Influence the public health agenda through Joint Needs Assessments, the Joint Health and Wellbeing Strategy and the work of Health and Wellbeing Boards.
- Influence primary care, social care and mental health services through supporting integrated commissioning between Clinical Commissioning Groups (CCGs), local authorities and the NHS Commissioning Board.

Ensure mental health is fully integrated into local policing planning

Victims with mental health problems need to be prioritised in your local policing strategy, policies and guidance, for example:

- Prioritise the needs and experiences of people with mental health problems in the Police and Crime Plan, the Annual Community Safety Plan and related processes for action planning, consultation and carrying out Equality Impact Assessments.
- Support local Community Safety Partnerships to develop a strategic response in the Annual Community Safety Plan.
- Consult with people with mental health problems and organisations in the community who can help you tailor responses and services accordingly.

Providing information, awareness-raising and training for frontline staff

Staff in a range of organisations need information, training and awareness-raising on how to identify victims with mental health problems, their needs and experiences and how to communicate and respond appropriately. This includes:

- Police officers and support staff.
- Primary care, social care and mental health professionals.
- Frontline staff in community, public services and social support organisations.

Community outreach and empowerment of people with mental health problems

People with mental health problems need support to help them report crime and to empower them to stay safe and prevent repeat victimisation. This could include:

- Outreach work to develop a community presence, build trust and raise awareness, for example work with voluntary organisations, community mental health teams and health services to reach out to people with mental health problems.
- Providing information to people with mental health problems about crime and how to report it.
- Providing safety planning and crime prevention advice and support.
- Coordinating and supporting third party schemes, surgeries and drop-ins.
- Developing a programme of work to tackle repeat victimisation and targeted crime, and integrating mental health into hate crime prevention strategies more broadly.
- Linking up community safety support with victims with mental health problems.
What resources would you need?

There are many different ways that you could address these key objectives through your commissioning. For example, much of this work could be coordinated and driven forward by a dedicated role. This might look different in different areas depending on local need.

Some PCCs have already commissioned coordinators to take responsibility for ensuring that relevant local services are appropriate, effective and joined up (within their office, or through local Victim Support and Mind services). For example, Dorset PCC have two new dedicated mental health posts:

- Mental Health Co-ordinator in the PCC’s office, responsible for a strategic needs assessment of victims with mental health problems; liaison with partners, CPS and the CJS; raising awareness; and creating a prevention/communication strategy.
- Mental Health Caseworker in the Victims Bureau, to act as the focus for people with mental health problems, and coordinate specialist help for victims.

We can help

Mind is very keen both to support PCCs to improve local support, and to monitor and evaluate these efforts so that we can disseminate and promote best practice around the country and look to secure more support for this work at a national level.

If you want to improve support locally for people with mental health problems who are victims of crime we would be very keen to hear from you. We can discuss what sort of factors to consider and how we can help you to evaluate the impact of your provision.

Contact:
Nat Miles
Mind Policy and Campaigns team
n.miles@mind.org.uk
020 8215 2244