

Kent and Medway Serious Violence Prevention Partnership

Strategic Needs Assessment Executive Report 2025/26



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We will reduce violence

I am proud to live and work in Kent. I have high ambitions for our county - to be the best place to live, work and travel. The best place to raise a family or to grow a business, and the best place to invest.

Our first duty is to protect our citizens and keep them safe. So I am pleased to see that the harm from violence is falling and that across the county, violent crime is falling. And more action is being taken to deal with the possession of weapons.

My Police and Crime Plan asked everyone to work together to protect people from exploitation and abuse, to tackle harm when it occurs and to create opportunities for young people. It is through a combination of actively tackling those intent on committing crime and supporting people into education, work or healthier relationships, that we can prevent violence from taking place.

The Serious Violence Prevention Partnership Board brings together key agencies who are focused on reducing and eliminating the harm from violence. We have put the voices of children and young people, and all those who are most affected by violence, at the heart of decision making and planning.

This is the third strategic needs assessment that has been undertaken by the partnership and the findings help demonstrate the hard work of us all to reduce harm. There has been a significant amount of work carried out to identify those places most affected by violence and to make them safer, to identify vulnerable individuals and to provide them with the support they need, and to ensure that enforcement action has been taken swiftly and efficiently. The findings from the needs assessment show that Kent is a safer county because of the work undertaken over the last 12 months.

I give my thanks to everyone who have has such a positive difference to our communities.

Serious Violence can affect our communities across Kent and Medway in different ways and the impact for anyone can be life changing. Looking at the impact that early intervention and prevention can have on reducing violence and by helping to solve those root causes, we can create a legacy that will continue to make Kent and Medway a safer place to live.

My priorities are clear. Cut crime, support victims and build trust. This assessment shows we are doing just that.



Matthew Scott, Kent Police and Crime Commissioner



Achievements

Reduction
in knife-enabled
serious violence



-22.9%

for under 18s

-4.5%

for ages 18-25



In 12 months
reduction
in monthly hospital
admissions for
assaults with a knife
or sharp object

All ages dropped

8.83 to **5.60**

Under 25s dropped

2.00 to **1.67**

ASVC decrease in

Aggravated burglary

Homicide

Public Order

Rape (knife/firearm, stranger, drink spike)

Robbery (personal)

Violence with injury (assault with injury)

Violence with injury (assault with intent to cause serious harm)

Over the last two years

clear reductions

in volumes of serious violence made savings
to the criminal justice system and police of



£3,743,933.55

in cases of **violence with injury**

£1,569,680.37

in cases of **robbery (personal)**



Two Kent & Medway

VRU initiatives

the **Safer Knives Replacement Scheme** and **Buddi Tag**, were entered into the College of Policing Practice Bank in 2025.



Key recommendations

- **Partnership working** – Continue discussions with partners to enable up to date data sharing to help develop and inform our analytical products.
- **Continue focus on under 18s** – The average age of the cohort is 15 and most interventions are aimed at secondary school aged children.
- **Increase provision for children aged between 17 and 24** – Understand the needs of the vulnerable members of this cohort by building relationships with partners in PRUs, the Care Leaver's Team, and the justice system. Formulate intervention methods with the hard-to-reach cohort who are likely to be out of training and education systems.
- **Increase education for primary school aged children** – There is increased demand from primary teachers to educate children about racism, misogyny, and violence.
- **Address data gaps** – Improve recording of ethnic appearance and other demographic data to enable more robust analysis and targeted interventions.
- **Increase the voice of minority children and young people** – Decrease the data gaps by understanding the views and needs of black children with participation workers.
- **Monitor and respond to emerging trends** – Pay attention to increases in specific crime types and in districts showing recent rises. Disseminate trends with VRU members, policing colleagues, and partners for shared understanding and problem solving.
- **Sustain reductions** – Build on successful strategies that have led to reductions in ASVC and MSVC, especially those impacting hospital admissions and knife-enabled violence.
- **Maintain cost-effective approaches** – Continue to evaluate and invest in interventions that demonstrate reductions in both crime and associated costs to the criminal justice and police response. Ensure diligent procedures prevent provision duplication.
- **Continue monitoring the processes and impact of the Young Futures pilot** – Ensure that the intended cohort are identified, monitor efficiencies, evaluate effectiveness, and prepare for up-scaling.
- **Improve the frequency of reports shared across the partnership on** – sexual violence and sexual violence within child criminal exploitation.



Aim and purpose of the Needs Assessment



The Strategic Needs Assessment (SNA) is a key document which allows organisations to understand the picture around violence and the causes of violence so that they can undertake an informed response to the harm caused to individuals and communities. This Executive Summary provides a highlight of the analysis that has been developed using data from Kent Police, Kent and Medway Councils, Probation and the NHS. The SNA analysis was carried out by analysts from Kent Police, Kent County Council and Medway Council.

The Executive Summary is a document that can be published and shared across organisations and communities, and the more detailed analysis is available to named individuals within the specified authorities as some of the data shared for the SNA is security marked as 'sensitive' which restricts how the data can be shared. The authorities with a legal duty to share data and use the SNA to develop a shared strategy are the Police, Probation Services, Youth Offending Teams, Fire and Rescue, the Integrated Care Board and local authorities including district councils and county councils. The SNA will also be used by the Kent and Medway Violence Reduction Unit to refresh the VRU's analysis of public place violence which was last published in March 2024.



Serious violence definition

The work to reduce and prevent serious violence is overseen by the Serious Violence Prevention Partnership Board who have agreed a definition of serious violence. The Board has representatives from the named authorities responsible for delivering the Serious Violence Duty and is chaired by the Police and Crime Commissioner.

The definition adopted by the Board is:

'Specific types of crime such as homicide, knife crime, robbery and gun crime, and areas of criminality where serious violence or its threat is inherent such as in domestic abuse, sexual offences, gangs, county lines and drug supply.'

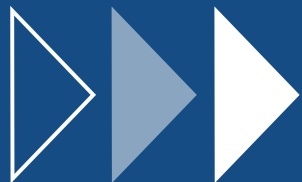


Who are the Board?

The Board was set up to bring agencies together to find ways to prevent serious violence. The Serious Violence Duty requires that the Board shares data to understand what violence occurs and why, and then collaborates to reduce harm and prevent violence from occurring.

The Board are made up of:

- The Police and Crime Commissioner (Board Chair)
- Kent Police – Assistant Chief Constable (LPP); Assistant Chief Constable (Crime)
- Intergrated Care Board – Chief Nursing Officer
- Probation – Head of Service
- Kent County Council – Director of Operational Integrated Children’s Services; Head of Public Health
- Medway – Deputy Director, Public Health Medway
- District and Borough Councils – Chief Executive of Swale Borough Council; Deputy Chief Executive Officer & Chief Officer for People & Places Sevenoaks
- Kent Fire and Rescue – Sector Manager, Kent Fire & Rescue Service
- Community Safety Partnerships – CSP Managers for Swale and Maidstone
- Prisons – Group Safety Lead – Kent, Surrey & Sussex HM Prisons
- Education – Deputy Head for Virtual Schools, North and West Kent
- Young People – Kent County Council, Participation Lead

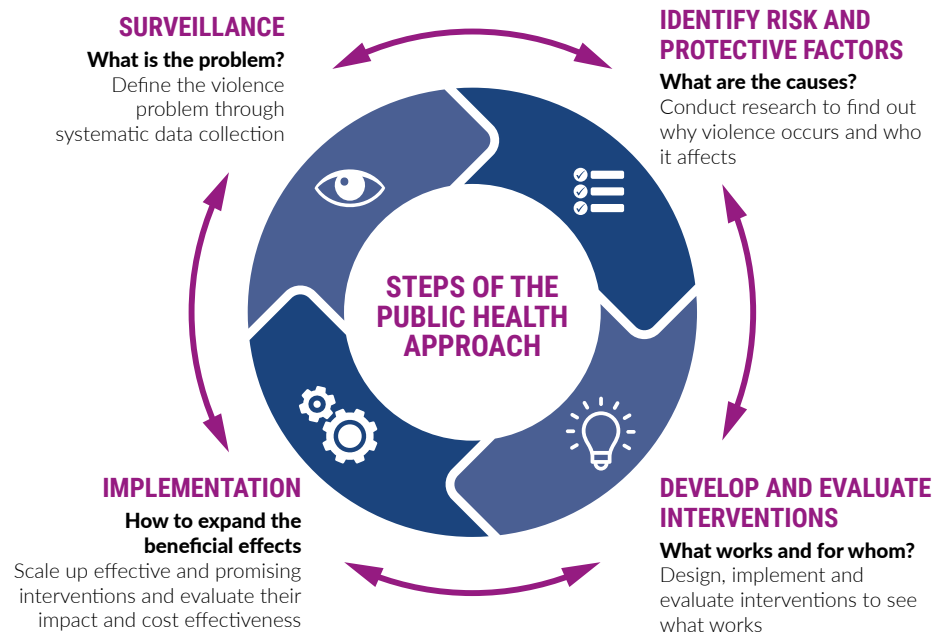


What is a public health approach?

Violence is a public health issue as living without fear of violence is a fundamental requirement for health and wellbeing. Violence is a major cause of ill health and poor wellbeing and is strongly related to inequalities, with the poorest 20% of our society suffering rates of hospital admissions for violence 5 times higher than those of the most affluent 20%.

Violence is preventable and interventions, especially those in early childhood, not only prevent individuals developing a propensity for violence but also improve educational outcomes, employment prospects and long-term health outcomes. Tackling violence and its root causes can improve the health and wellbeing of individuals and communities and have wider positive implication for the economy and society.

The Director General of the World Health Organization (WHO) led a science-based approach to understanding and preventing violence. This allowed the development of the WHO 4-step process for implementing public health approach to violence..



RISK FACTORS

Abuse and neglect
Head injury
Substance use
Neurodevelopmental needs
Previous involvement in crime



Healthy problem solving and emotional regulation
Healthy social relationships
Schools readiness
Good communication skills

Low family income
Poor or inconsistent parenting
Household substance misuse or mental health
Family violence/family breakdown
Household offending
Peers involved in crime



Stable home environment
Nurturing and responsive relationships
Financial security
economic opportunities

Unsafe or violent community
Local deprivation
Lack of available recreation
Low social integration/poor social mobility
Lack of access to good education



Sense of belonging/connectedness
Safe community environments
Opportunity for sports and hobbies
Opportunity for valued social roles
Community cohesion

PROTECTIVE FACTORS

The risk and protective factors for serious violence can be described across three broad areas: individual factors; those linked to close relationships (such as family or friends); and those within people's communities (such as where they live, the school they attend or the places where they spend their time) and the wider society.

Demographics of the county

Kent is a county in the South East of England and consists of twelve district and borough authorities: Ashford Borough Council, Canterbury City Council, Dartford Borough Council, Dover District Council, Folkestone and Hythe District Council, Gravesham Borough Council, Maidstone Borough Council, Sevenoaks District Council, Swale Borough Council, Thanet District Council, Tonbridge and Malling Borough Council and Tunbridge Wells Borough Council, one unitary authority, Medway Council, and one upper tier authority, Kent County Council.

The total population of Kent and Medway is 1,855,800, and the county has a range of ethnicities and practicing faiths. Over 80% of the Kent and Medway population described themselves as White British in the Census 2021. This varies by district, most notably for Dartford and Gravesham, where the 'White British' population is about 68%, and Medway where the 'White British' population is 78%. There has been an over 100% increase in the countywide population of those who describe themselves as 'Black and Black British' recorded in the two most recent census results.

Medway has the greatest population, making up 15.1% of the County population. Of the other districts in 2021, Maidstone is the most populous with 9.5% of population, Canterbury having 8.5% and Swale 8.2%. The Kent and Medway population grew by 128,200 people (7.4%) between the Census 2011 and Census 2021.

Population estimates (ONS, 2021) states that 11.8% of the Kent population are aged between 10-17 and 7.4% are aged 18-24. 71% of the population are aged 25 or over. This provides a useful baseline when considering the representation of age groups as either suspects or victims of violence.



EDUCATION

- 529 primary schools.
- 118 secondary schools.
- 7 Pupil Referral Units (PRUs) and 1 Health Needs PRU.
- 15 college campus sites.
- 4 universities.



HEALTH

- 5 acute hospitals.
- The county has an Integrated Care Board which joins up health and care services and improves the health and wellbeing of the population of the county. It aims to '... work together to make health and wellbeing better than any partner can do alone'.



PRISONS

- 6 prisons including 1 prison for women.
- The county has the first secure school (Oasis Restore) located in Rochester.

Demographics

Victims:



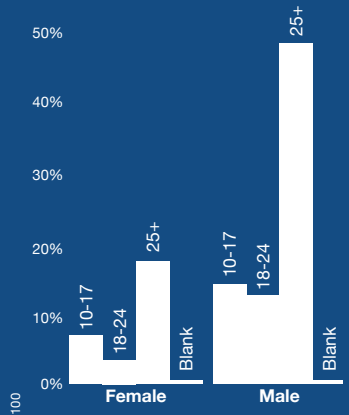
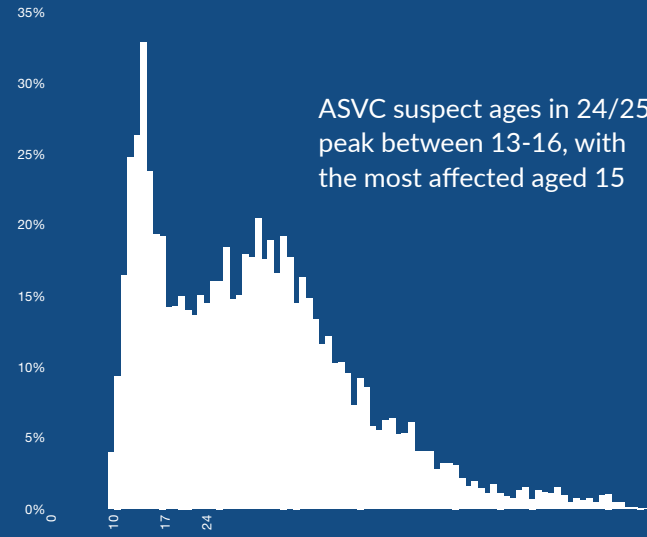
More males than females are victims of ASVC in 24/25 but the volume of females has increased this year.

Age	-10	10-17	18-24	25+
Kent County Council proportion of SVC victims	6.0%	21.1%	13.0%	59.5%
Medway proportion of SVC victims	4.5%	22.1%	12.5%	60.7%

ASVC by age are similar in Kent and Medway. Kent has a slightly lower proportion of victims in the 10-17 and 25+ age categories than Medway, and a higher proportion of victims in the below 10 and 18-24 age categories.

Conclusions can't be drawn regarding victim ethnicity owing to data gaps.

Suspects



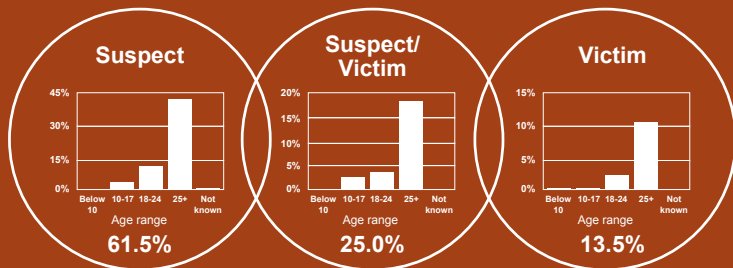
ASVC and MSV proportions are mostly males.

2024/25	Suspect	Kent population
Aged 10-17	20.3%	11.8%
Aged 18-24	15.1%	7.4%

Age	-10	10-17	18-24	25+
Kent County Council proportion of SVC suspects	0.5%	19.7%	15.1%	64.0%
Medway proportion of SVC suspects	0.5%	23.1%	14.9%	60.2%

Medway has a higher proportion of suspects in the 0-17 age categories than Kent, and fewer in the 18-24 and 25+ categories.

Conclusions can't be drawn regarding victim ethnicity owing to data gaps.



ASVC High Harm Suspect and Victim

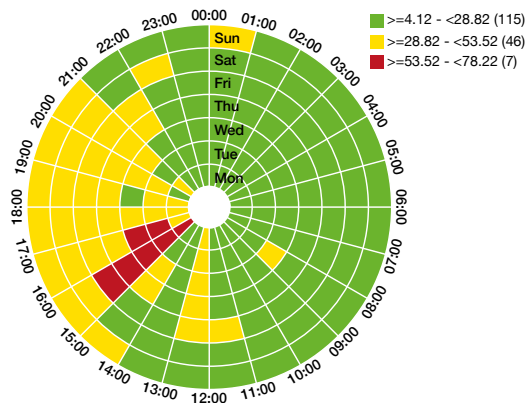
1.6% of people accounted for 20.4% of the harm through either being a victim or suspect of SVC.

ASVC geographical – u25 cohort

- Medway is most affected overall followed by Thanet, Swale, and Canterbury. This is the same top 4 as last year's report; however, Canterbury was 3rd and Swale was 4th.
- The only district that saw an increase of volume score was Tonbridge and Malling (+10.76%) compared to Oct 2023-Sep 2024. Most districts have seen continuous decreases throughout the three-year period.
- 3 districts have seen an increase in harm score: Thanet (+4.62%), Folkestone & Hythe (+38.67%) and Tonbridge and Malling (+50.84%). Most districts have seen continuous decreases in the 3-year period.

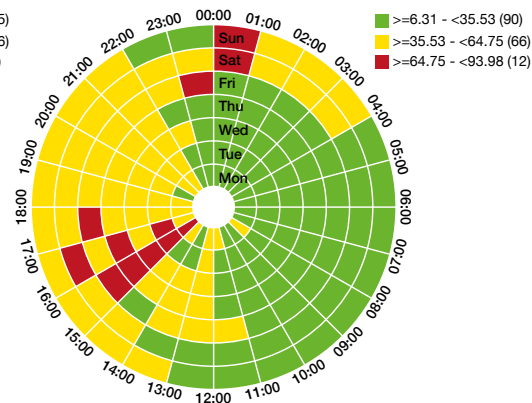
Temporal analysis – u25 cohort

Under 18



The peak times for ASVC for under 18s is weekdays between 3pm and 5pm

Under 25



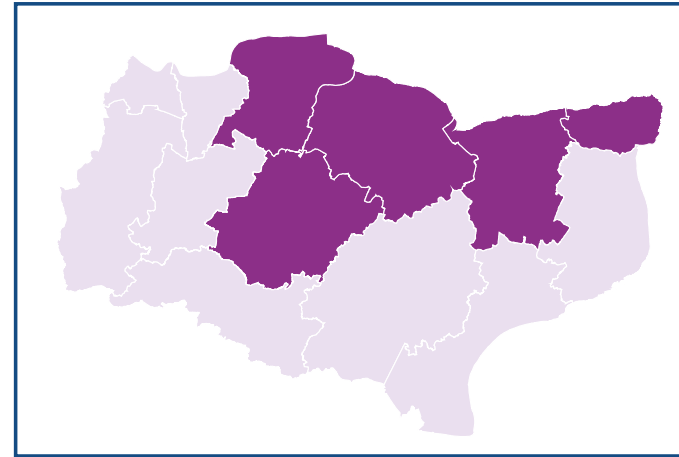
The peak times for ASVC for under 25s is weekdays between 3pm and 5pm, Fridays 5pm until 6pm and 11pm until midnight, Saturday & Sunday midnight until 1am.



Knives and weapons

The harm from knives and weapons remains a concern for the partnership, and is a priority for the Government who have committed to halving knife crime over the next 10 years.

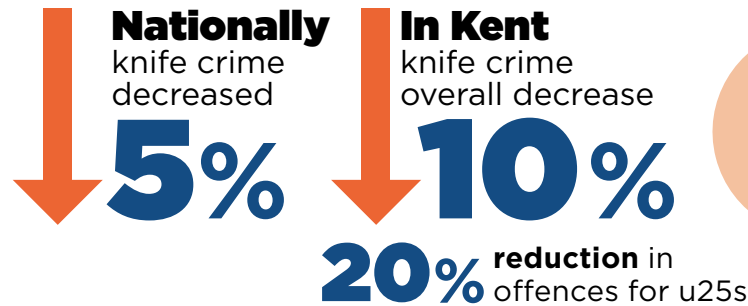
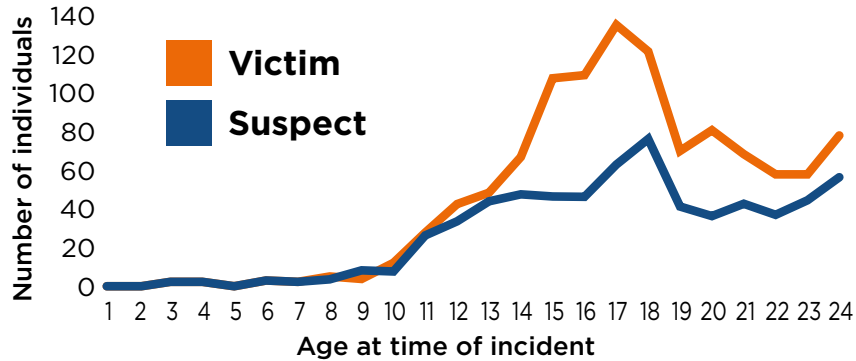
The Partnership Board agreed to commissioning deeper analysis into the impact of knife and weapon harm as part of this SNA. The data and findings come from Kent Police.



The districts that concern us most are:

- Medway
- Thanet
- Canterbury
- Swale
- Maidstone

Age at time of knife incident 24/25



The proportion of under-25s involved in serious knife offences causing injury has decreased over the past year, with an even larger reduction in non-injury knife incidents involving this age group.

Based on cost-of-crime estimates, this represents a minimum financial saving of

£576,050

SUSPECTS of knife crime

82% were **male**

18% were **female**

Most frequently **males** aged **17-18 years**

VICTIMS of knife crime

31% were **female**

Sexual violence

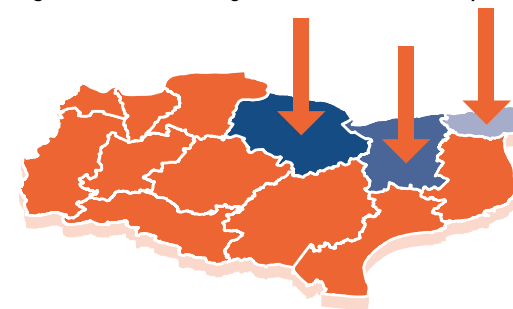
Sexual violence can be split into four categories: noncontact offences, contact (non-penetration), contact (penetration) and rape. The Police have clear definition of the offences that sit within these categories that allow them to be separated.

Any type of sexual offence has the ability to cause a high impact on and long lasting harm to a victim of the offence

In a 3-year period the **top offence types** were:
 Sexual assault on a female **40%**
 Rape of a female aged 16+ **17%**
 Exposure **11%**

Majority of **suspects** are **male** aged 13-17 

In the last year **Medway** saw the highest offence levels for each category. The second highest for rape was **Canterbury** followed by **Thanet** for rape and sexual offences.



There are **peaks** in **sexual violence** in **January, May and June**




Exposure offences generally reach their highest levels during the **warmer months May-Sept**, this appears to be influenced more by the weather than by specific months.

Rape and sexual offences often see an increase during months of the **major holidays and social gatherings**, such as Christmas, spring and summer.

Non-contact offences peak age for **suspects** is **30-40** with a higher percentage of **repeat suspects** in both **sexual and rape offences** **15%**

	2023/24	2024/25	% difference
Rape	652	630	-3.4%
Sexual assault	1,518	1,468	-3.3%
Non-contact	397	390	-1.8%

Sexual violence **reduced** by **16%**

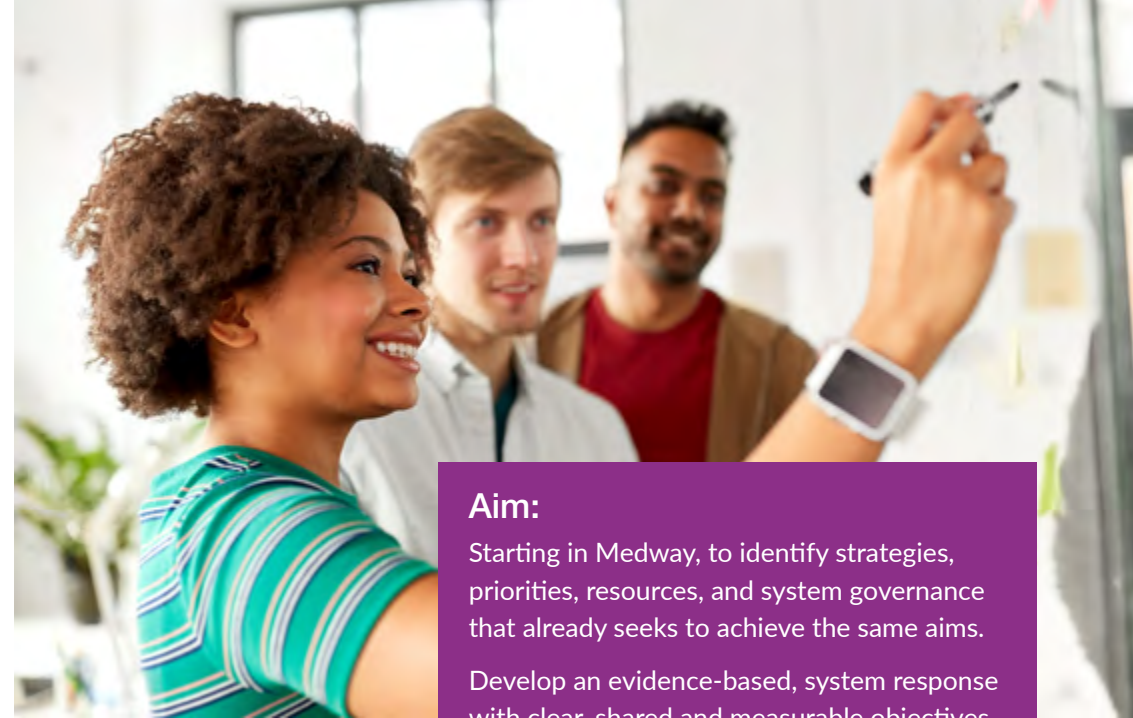


Drugs and alcohol



Serious violence associated with drug use and supply chains is complex, violence associated with alcohol use is all too common. The causes and opportunities to tackle it fall outside the remit of any single agency but an evidence based collaborative approach is likely to achieve the greatest impact to prevent it. This work is being led by Medway's Public Health team and they are supported by all specified authorities in the Serious Violence Duty.

The Project:



Aim:

Starting in Medway, to identify strategies, priorities, resources, and system governance that already seeks to achieve the same aims.

Develop an evidence-based, system response with clear, shared and measurable objectives.

By the end of the project the Serious Violence Prevention Board will be able to:

- Monitor work taking place in the system that contributes to the reduction of serious violence associated with drug use and drug supply among young people under the age of 25.
- Understand the reasons behind the violence so causal factors can be addressed.
- Identify common themes in strategies and action plans from across the system to minimise the risk of duplication of effort or reporting.
- Identify gaps in the system response to drug related violence and new work they should commission or deliver.
- Release resources to meet gaps.
- Enable Medway Public Health to offer an advisory role to other Kent districts who are seeking to build on the project.
- Disseminate learning to other districts.

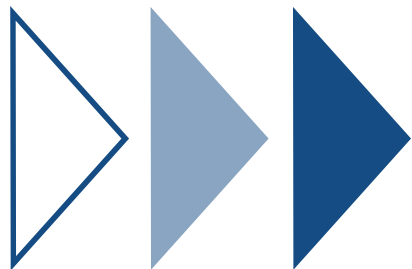
Children's voices

The VRU Participation Workers gathered data from children across Kent and Medway, collected through surveys, focus groups, and project work within 2025.

The aim was to understand what helps young people feel safe, what worries them, and what changes they want to see in their communities.

Key findings:

- Family and trusted adults make children feel safe.
- Many children wanted more visible policing.
- Phones can make children feel safer.
- Good lighting and CCTV can make children feel safer.
- Children in many areas felt unsafe due to adult drunkenness in towns.
- Teen boys being harassing was a common concern.
- Children worry about knives and catapults.
- Children feel unsafe on public transport routes.
- Children wanted safe spaces to go to after school.
- Some children felt there was bias due to their ethnicity.
- Some children are concerned that reporting offences is seen as a weakness.



“Kindness is better than being formidable.”

“We need more places to go after school that aren't just parks.”

“One Asian young person felt their ethnicity is perceived as “always good” and unlikely to cause trouble.”

“Wouldn't feel safe if see a group of teenage boys, or drunk middle aged men. Groups of people intimidate me.”

“I am a black girl, and I often see others face discrimination. I also worry that because of my gender I am more likely to be catcalled/attacked.”

“Being on the good side of dangerous people.”

“To stay safe we pretend to be on our phones. TikTok fake videos looks like you are talking to someone when not.”

What works



There is a growing body of evidence on what works to prevent serious violence, with the work of the World Health Organisation's (WHO) report 'the World report on violence and health (2002)' recommending a Violence Prevention Alliance that is created to tackle the intentional use of physical force or power.... against another person'. The type of violence in scope for the SNA is Interpersonal Violence which can be subdivided into family and intimate partner violence and community violence.

The WHO recommend taking a Public Health approach to understanding the problem or issue that is being faced:

- Define the problem. Use data, community feedback and other tools to understand the issue.
- Find out why it occurs. Identify the risk and protective factors, and those factors which increase or decrease the risk.
- Implement and evaluate interventions.
- Scale up those interventions which work.

There is evidence that no single factor can explain why some people or groups are at higher risk of interpersonal violence, while others are more protected from it. This is referred to as an ecological framework. This framework views interpersonal violence as the outcome of interaction among many factors at four levels – the individual, the relationship, the community, and the societal.

- At the individual level, personal history and biological factors influence how individuals behave and increase their likelihood of becoming a victim or a perpetrator of violence.
- Personal relationships such as family, friends, intimate partners and peers may influence the risks of becoming a victim or perpetrator of violence.
- Community contexts in which social relationships occur, such as schools, neighbourhoods and workplaces, also influence violence.
- Societal factors influence whether violence is encouraged or inhibited.

In 2019, Public Health England produced a report titled A whole system multi-agency approach to serious violence prevention. It highlighted strong emphasis on partnership working and using a Public Health Approach, and offers a model for the prevention of violence which has been used to inform how agencies collaborate across Kent and Medway. The model is a place based approach to violence prevention and, to be effective, the place must be meaningful to, and therefore defined by, local partners including members of the community. The model sets some key challenges for local system leaders at both the county and district or community level.



Youth Endowment Fund



The Youth Endowment Fund (YEF) have a grant from the Home Office to find out what works to prevent violence affecting children and young people. The YEF Toolkit is a free online resource that provides evidence of what works to prevent serious youth violence.

The YEF have identified that there are six interventions that have sufficient academic research evidence to demonstrate that the interventions are effective.

These are:

- **Focused deterrence** – An approach which combines communicating the consequences of violence with support for developing positive routes away from it.
- **Trauma-specific therapies** – Specialist therapies which aim to support individual recovery from trauma.
- **Sports programmes** – Secondary or tertiary prevention programmes which engage children in organised sport or physical activity
- **A & E Navigators** – Programmes that place case workers in A & E departments to support young people with a violence-related injury.
- **Social Skills training** – Aims to develop children's ability to regulate their behaviour and communicate effectively.
- **Cognitive behavioural therapy** – A talking therapy which helps people recognise and manage negative thoughts and behaviours.

There are other interventions which are promising but which currently have limited evidence of their impact. This does not mean that the interventions should not be used but instead that thought should be given as to how evidence of impact is gathered.

It is also recognised that primary interventions can be challenging to link to reductions in violent crime. They may bring benefits which can address one or more of the risk factors associated with serious violence such as fewer suspensions from school or reductions in behavioural difficulties.



The high impact interventions are all available across Kent and Medway. Focused deterrence is funded by the VRU and delivered across Kent and Medway and targeted on gangs and young street groups. Trauma specific therapies are available through services funded by the ICB and others.

Sports programmes are delivered in all districts across Kent and Medway. These are funded by the PCC, VRU, Active Kent & Medway and others. A & E Navigators operate in Medway Maritime and Ashford William Harvey Accident and Emergency departments.

The Navigators are youth workers (Medway) and Adolescent Response workers (Ashford). The funding comes from the VRU. Social skills programs to children have been delivered in 7 Pupil Referral Units across Kent and Medway through funding from the VRU. CBT is available through the Children & Young People's Mental Health Service, and also through voluntary sector organisations.



Glossary

Active Bystander

This focuses on the response to violence, how and when to intervene, reflecting some of the principles of contextual safeguarding. The VRU has funded delivery of this training to professionals and supported a 'train the trainer' model to further spread the learning in the area. The principles have also been presented at conferences and events supported by the VRU. The VRU now have Clock it, Check it, Change it Active Bystander poster resources to print in educational areas of locations where young people visit.

Analytical products

The VRU analytical products help to inform Police and partnership decisions. These include the monthly tactical report, scoping for Young Street Groups, providing data to the Serious Violence Duty and the PPP document which helps to identify those at risk of or involved in exploitation.

Buddi Tag

A VRU-funded intervention which provides GPS tracked ankle tags to young people at risk of or involved in exploitation, crime, or violence. The young people voluntarily wear the tags which helps give them a reason to engage less in criminality or risky situations and demonstrate the will to change behaviour. These can be fitted by local police teams and early help/youth justice workers. There is a referral form which must go through the VRU first.

Catch 22

Intensive mentoring. A VRU-funded intervention providing 1:1 support to children and young people under 25 who are at risk of child criminal exploitation or county lines involvement. The support is bespoke and includes protective and preventative measures, close collaboration with the individual's support network, and a holistic, trauma-informed approach. Only in Ashford, Canterbury, Maidstone, Medway, Swale and Thanet.

CAWNS – Child Abduction Warning Notice

National notice to safeguard vulnerable children and young people from a person that presents a perceived risk, and to disrupt offending behaviour by those that present the risk

Clock It, Check it, Change It

Stepping in could be as simple as asking someone who is being threatened or being aggressive if they're okay. We want young people to know that they have the power to make a difference. This campaign is not about putting yourself in danger, it's about thinking how safe it is to step in. This is a poster campaign with social media advertising. Wording can be adapted for different scenarios and posters can also be used in workplaces.

Complex Adolescent Harm Meetings (CAHM)

Meetings set up as needed, led by Adolescent Service, focussed on supporting a child or young person facing harm or risk thereof. Attending partners are like those at District Contextual Safeguarding Meetings. The criteria can be found by contacting KCC.

Contextual Safeguarding

Contextual safeguarding recognises that the different relationships that young people form in their neighbourhoods, schools and online can feature violence and abuse, and people outside of parents have a role to play in keeping young people safe.

Child Centred Policing Team (CCPT)

A Kent Police team that focuses on identifying and supporting children and young people at risk of, or engaged in, criminal activity, with the aim of reducing offending. Mainly work in schools but has oversight of under 18's in their district.



Glossary

Commando Chef

Colour Sergeant Mike Beaton MBE of the Royal Marines Educational Awareness Team works in partnership with the Kent and Medway VRU. Commando Chef comes to events organised by the VRU a few times a year to “Inspire and Educate”. Commando Chef’s key messages include diversion from crime, the importance of education, food and nutrition, manners, discipline, dangers of weapons on the streets, “a knife is for the kitchen not the streets” and advice on career paths.

Community Safety Partnerships (CSPs)

These partnerships bring together local agencies to develop and implement strategies to tackle crime, disorder, and antisocial behaviour in their communities.

Responsible authorities include the police, fire and rescue services, local authorities, health services, and probation. Normally run from the district council in each area along with county wide separate CSPs.

Commitment Pledges (school or business)

The Commitment Pledge is presented to schools in either a classroom environment or a school assembly and is normally done by the Kent Police Child Centred Policing Team and/or partner agencies.

The business pledge is also rolling out across Kent and Medway including in local and national retail shops, fast-food premises and sports locations.

Eyes Open Campaign

Eyes Open is a dedicated campaign aimed at raising awareness about the growing issue of child criminal exploitation and county lines.

Focused Deterrence

An approach that stems from the idea that ‘most serious violence is associated with a small group of people who are themselves very likely to be victims of violence, trauma, and extremely challenging circumstances.’

It is a multi-agency led process of identifying and mapping such groups as networks, and supporting them to desist or reduce risk, via a combination of support, deterrence, and engagement with the wider community or family.

This is run when a Young Street Group is scored and is owned by Police Community Safety Units. Can also be used on high-risk individuals.

Grip funding

This Home Office funding to Police provides a combination of both regular visible patrols in the streets and neighbourhoods (hotspot areas) experiencing the highest volumes of serious violence to suppress violence and provide community reassurance, as well as delivering problem-oriented policing.

National Referral Mechanism

The National Referral Mechanism (NRM) is a framework for identifying victims of human trafficking or modern slavery and ensuring they receive appropriate support. An NRM referral should always be considered if there are concerns that a child or young adult is being criminally or sexually exploited

Pol-Ed

The Kent and Medway VRU have funded the educational resource ‘Pol-Ed’. This makes it free for Kent and Medway education providers.

The aim of Pol-Ed is to keep our children safe through a range of interventions. We want to stop children becoming victims or indeed perpetrators of crime. These interventions are designed to be delivered to children in phases.

The resources are in line with the current Policing Priorities, DfE Curriculum Frameworks and the Ofsted Lines of Enquiry. Pol Ed offers both Police Forces and schools a range of resources.



Glossary

Reachable Moments A&E Navigator Service

A VRU-funded intervention targeted at young people in A&E because of youth violence, focusing on using the ‘reachable and teachable moment’ to build engagement and link them into support. Ashford Hospital are covered by KCC ART and Medway Hospital by Medway Council.

Roadshows

Various roadshows across Kent and Medway have been delivered or supported by the VRU and Police CCPT to engage with young people, raise awareness, share information, and gather their feedback.

Safer Knife Replacement Scheme (SKRS)

The VRU are offering this evidence-based scheme to replace pointed kitchen knives and replace them with a safer alternative. The Police or partnership agency can offer the SKRS to eligible households or businesses. This will provide them with a pack of four knives or a single 5” rounded-end kitchen knife, alongside safety advice and guidance. This is in exchange for replacing all the pointed knives.

The VRU are leading the national working group for this and will soon be offering to replace the knives in schools and colleges. Eligibility for the SKRS will be based on the circumstances of the family home, young person and their family/guardian engagement.

Safe Space scheme

A collaborative initiative led by the VRU, developed based on feedback from women and girls about the lack of safe, welcoming places in town centres. Participating businesses receive guidance on how to provide a Safe Space and are identified by a visible sticker. District councils also have their own versions under different names.

Safer Streets Funding

Home Office funding used for evidence-based measures to prevent neighbourhood crime, such as additional CCTV, street lighting, alleygating, and improved security for

properties at risk—identified through needs assessments of burglary hotspots and remote locations. The funding also supports Neighbourhood Watch schemes and community-led crime prevention and reporting. Normally led through district councils.

Serious Violence Duty

The Serious Violence Duty places a statutory requirement on specified statutory authorities to work together to plan to prevent and reduce serious violence including delivering a Serious Violence Strategy.

Serious Violence Toolkit (schools and colleges)

This toolkit has been written to offer ideas and resources to school leaders that will help to prevent violence from occurring, and ways to support young people who have been affected by violence. It emphasises the importance of providing a positive approach to building children’s resilience and how to support them with the life skills needed to overcome any adversity they may have experienced or continue to experience.

Social Skills

This VRU-funded initiatives delivers training for PRU staff (co-developed with PRU heads), along with resources and some professional supervision from a clinical psychologist. The training focuses on understanding the drivers of young people’s behaviour and supporting them to respond to situations in more balanced and constructive ways.

Sports Commissions (community related)

A VRU-funded intervention delivering multi-sport sessions in targeted communities and at specific times. These sessions aim to provide positive diversion, engage young people, and strengthen protective factors. Coaching opportunities are also included.

Glossary

Street Aid

Funded by the VRU, this training was delivered to Early Help teams, Police and Youth Workers. It provides information and a toolkit to help teach young people how to respond if someone suffers a knife wound/injury whilst in the community and incorporates generic first aid skills.

Violence Reduction Unit

Units funded by the Home Office in 20 Police Force Areas worst affected by serious violence. They were tasked with using public health principles to tackle the root causes of violence and to lead and co-ordinate a preventative, whole-system approach that reflects the needs of the local area.

This includes four key strands: multi-agency working; data-sharing and analysis; engaging young people and communities; and commissioning (and delivering) evidence-based interventions.

YEF Toolkit

The YEF Toolkit is a free, online resource from the Youth Endowment Fund that provides evidence-based information on different approaches to preventing serious youth violence.

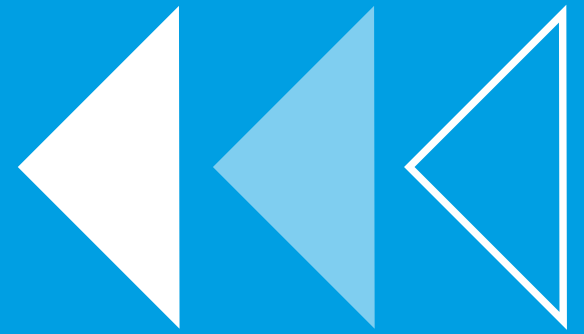
Youth Justice Team (KCC/Medway)

A Kent County Council team that works with children to help rehabilitate them after committing an offence and reduce offending or reoffending.

Youth Justice Team (Police)

The Youth Justice Team (YJT) provide an informed and consistent decision-making process that determines the most appropriate outcome (disposal decision) for young people. These outcomes include Outcome 22, Community Resolution, Youth Caution and Youth Conditional Caution. The team aims to address offending behaviour and satisfy the needs of victims to reduce the number of young offenders unnecessarily entering the Criminal Justice System, in line with Child Centred Policing strategies.





Kent Fire &
Rescue Service



Kent
Police

