

## St Giles Report

December 2019 – November 2020

### 1. EXECUTIVE SUMMARY

Thanks to the generosity of the Worshipful Company of Gunmakers, the St Giles SOS team have been implementing our Youth Violence Support service working in:

- 1) Major Trauma Centre, London
- 2) Accident & Emergencies across Coventry and Wolverhampton.

This report will summarise the difference the funding has made. Key highlights

- 335 young people supported across the Midlands (27% female, 24% from a BAME background)
- 127 young people supported at the Major Trauma Centre in Whitechapel

### 2. MAJOR TRAUMA CENTRE

The Major Trauma Centre at the Royal London Hospital is a leading specialist centre which treats some of the most seriously injured patients across London, including victims of violent crimes such as assault and gun or knife crime. The number of young people admitted is high; the unit is one of only three major trauma centres serving the capital and the home of London's Air Ambulance, so patients come from anywhere within the M25.

Sadly, many young people who need our support end up in hospital. St Giles caseworkers have been embedded in the Major Trauma Centre of Royal London Hospital since 2015 to offer help to all young people aged 11-25 who are admitted as a result of serious youth violence. By offering them help at a time when they are most in need, we can help prevent them being discharged back to the same situation which put them in hospital in the first place.

We support young people to establish lifestyles that move them away from gang activity, violence, crime and victimisation. Our service isn't restrictive and extends to the family members of the young person and their peers where necessary.

Funding from the Gunmakers enabled us to increase staffing of St Giles caseworkers on the ward. We appointed Charlene Gayle, SOS Caseworker to provide care and support to those admitted to The Royal London. Charlene joined:

- Roisin Keville, SOS Manager and Practice Development Lead
- Laveen Smith, Senior Caseworker
- Rheanna Augier, SOS Caseworker
- Alison Balm, Data Coordinator

Charlene's role is to make contact with anyone affected by serious youth violence. Charlene will check new admissions to establish whether they might be gang-related and offer guidance and practical support. This extends beyond hospital discharge and into the community, covering issues such as help with accessing housing, welfare, education and training and helping young people re-establish ties with family. Charlene also refers young people to other sources of support in the community, to their local community safety team or to the SOS team if there is one in their borough.

### 3. RESPONDING TO COVID19

With the government lockdown measures, St Giles staff were unable to work on the Major Trauma Centre wards from March – July 2020 but our team returned in August 2020. During this time, we adapted well and put measures in place to continue a service for our young people in the community.

The team have continued to offer a high-quality support service to young people and clinicians and their absence is certainly felt by the After Trauma Team (ATT). Engagement with young people has generally been positive and the team have been working with the ATT to find new and innovative ways of engaging with young people who are admitted to the trauma ward.

We developed a new referral route to ensure as many young people had the opportunity of support from our service. Our caseworkers developed and maintained great engagement with clients and partners throughout. All clients in the community received phone calls, text messages, WhatsApp face time each week from our caseworkers.

This is reflected in our work and outcomes in the service outlined below.

#### **During the period 1<sup>st</sup> April 2020 – December 2020**

- We received 127 referrals, 1 Young Person sadly passed away, 4 were discharged into police custody and 16 were uncontactable upon discharge, leaving 106 who were contactable
- 100% of these young people were successfully contacted within 10 days of referral
- 98% of new referrals were male. Stabbings accounted for 82% of presentations and over 10 referrals were from gunshot wounds
- Referrals from those residing in Hackney, Tower Hamlets, Newham and Enfield increased
- There has been a significant increase in risk of harm from others for Q2 (July – Sept 2020) compared to Q1 (April-June 2020). 36% of young people were assessed as either medium (18%) or high (18%) risk in the period April-June 2020 compared to 91% of young people being assessed as medium (44%) or high (47%) risk in the period July-September 2020
- Whilst lockdown offered the opportunity for closer bonds to be formed between some families, there are others who are at breaking point. Our caseworkers reported an increase in the need to

provide emotional support to parents and carers around managing stress and relationships with their children.

- This year the team have made over 700 indirect contacts with young people and have delivered over 300 hours of advocacy work for clients.

### **Success Stories**

- We successfully appealed against a PIP decision resulting in a young person being awarded £3,000 in backdated benefit. Not only did this drastically improve his financial situation but it meant that the Local Authority accepted a duty to offer him suitable and safe accommodation and end his homelessness.
- One young person has enrolled on to an online customer service course thus increasing her employability
- Five young people are receiving Employment Training and Education support through our job club delivered by our London Skills Employment and Training team.
- We provided advice and guidance to a mum who initially had refused temporary accommodation. We worked with her to understand the risk her son was at and supported her with a homelessness application to Bromley Local Authority in collaboration with Newham council.
- The team promoted and facilitated a young person's access to adequate primary healthcare whilst on remand and in the community. SGT Caseworker worked with HMP Pentonville to ensure that the young person was able to attend his physiotherapy appointment at the hospital and engaged well with the caseworker which reassured Mum, who hadn't seen him due to COVID.
- A young person was experiencing difficulties obtaining a GP appointment to redress his wound. We advocated for the young person, contacted the GP and explained the difficulties he was experiencing and the importance of maintain good wound care following hospital discharge. The GP was very receptive and praised our St Giles caseworker for making contact and the young person got an appointment the following day.
- Our caseworker advocated for a young person and successfully saved his tenancy at his supported accommodation, preventing his homelessness upon his release from prison on bail.
- Following a lengthy missing episode, a young person was taken into care and placed in residential accommodation. Engagement with our caseworker continued which helped facilitate a positive transition and helped the young person to understand what and why the relocation was happening. The continuity of support by someone he knew was invaluable in helping this young person to thinking differently about what was happening to him and allowed him to maintain some control. He experienced increased resilience and skills around communicating with professionals.

## **4. OUR WORK IN THE MIDLANDS**

We supported a substantial amount of young people between **December 2019 – November 2020**. Of the 335 under 25's we supported, 246 were male and 89 were female, of this 81 were of black and minority ethnic background. Our outcomes for the year are as follows.

<b>SUPPORT</b>	<b>NUMBER</b>
Information, Advice and Guidance Interviews/Support sessions	512
Support with threat to life situation	31
Safeguarding interventions	38
Assistance in accessing Drug Services	4
Assist client with Police	10
Assist client in engaging with Probation, YOS or Probation Service	34
Assist client or family member around school attendance	22
Help to apply for external training or College course	21
Help to access Apprenticeships	3
Assist client to access specialist family support	17
Reduced risk for YP (short-term/long-term)	27
Improved confidence – self-esteem and ability to say 'no'	37
Supported family/carers	35
Increase awareness of risks and consequences	42
Improved lifestyle	27
More positive leisure and sport activities	11
Increase resilience and capacity to stay safe	54
Improved wellbeing (Physical and Mental Health)	51
<b>Total</b>	<b>976</b>

Of all those we supported **only 7%** of the young people that received our SOS support re-presented back in hospital through violent related injuries.

## 5. MEDIA COVERAGE

This year we received some BBC news coverage, Joseph Squire, our youth worker based at the University Hospital, Coventry, who was discussing the fears that the easing of lockdown would lead to an increase in criminal activity by gangs.

*There are fears that the easing of lockdown will lead to an increase in criminal activity by gangs.*

*The West Midlands Police and Crime Commissioner David Jamieson has warned that teenagers who have not been in school, and young adults who have lost their jobs are especially vulnerable.*

*Between September 2018 and the beginning of April 2020, Coventry saw a surge in stabbings and shootings. Seven people lost their lives.*

*Joseph Squire, a youth worker for the St Giles Trust based at the University Hospital, Coventry, who has spent time in prison, is now working on an intervention project to steer young people away from gangs.*



### Tackling gangs as fears of post-lockdown 'madness'

The interview can be viewed in full here: [Tackling gangs as fears of post-lockdown 'madness' - BBC News](#)

## 6. CASE STUDY

**16 year old Robbie\* had presented at hospital due to a suspected knife wound to his side and facial injuries.**

Our caseworker spoke to Robbie and his mother and grandmother who were present with him in the A&E department. Robbie admitted that he was angry and had gone to buy a knife following an argument with another person who made disrespectful comments about a friend of his who died months previously due to being stabbed.

Robbie described how he went to buy the knife from an unknown person and after he paid for it, he was set upon by his attackers who beat him up and stole the knife. Robbie admitted that his sole intention was to go and stab the person who disrespected his dead friend. Robbie admitted he was angry at the time and did not think about the consequences of his actions.

**In this reachable and teachable moment, we were able to talk to Robbie and explain how either he could have been more seriously injured or even worse killed. We also explained that he could have used the knife on his attackers and potentially killed them.**

Whilst Robbie initially made out that he did not care about the outcome because of the disrespect that had been shown to him and if it meant he was sent to prison then he “would be alright with that”.

Our caseworker explained to Robbie that he had been to prison and described his difficult experiences inside. He went onto talk about how it was not a safe place to be and if Robbie thought he would be protected by other people, he was mistaken.

This was a lightbulb moment for Robbie. Over the next few months, we worked with Robbie to support him with anger issues and safely away from his gang affiliations. We also did not treat the issue in isolation – we worked with his mother who herself had personal issues with her own mental health and tense relationship with her son.

Anger was something we worked extensively on with Robbie. He was constantly getting into trouble at school which eventually resulted in him being permanently excluded for damaging a classroom and threatening a teacher. The timing of this was all the more unfortunate because this was his final year at school and we spent a lot of time mentoring him and getting him into fitness by taking him to the gym.

We worked hard to keep Robbie focused (he was beginning to give up and start to disengage from our support) by regularly going to see him and encouraging him to text/call if ever he was feeling angry or needed to talk. This approach was successful because he could see St Giles was not about to give up on him and we knew being out of education was going to lead him into the gang life even more.

We provided intensive support to the family by connecting with the school and other partner organisations such as health and drug support. We advocated on behalf of the family by attending school meetings to try and show that it would be in everyone’s interests to give Robbie the opportunity to see his education through and take his exams as it would give him a focus away from gangs.

We encouraged and facilitated Robbie to attend a school governors meeting where he surprised everyone and asked to speak to the panel and apologized for his behaviour. This was another turning point for him and eventually Robbie was placed into a specialist education provision.

Robbie has realised that a lot of effort from St Giles was being put into supporting him and wanted to prove that he could make positive lifestyle choices. He has since expressed a keen interest in performing arts and with the help of St Giles had developed a CV.

**Robbie has gone on to be an advocate for St Giles and has shared his story in front of consultants and other health professionals at the hospital. He has also been interviewed for an item on young people and gangs for the BBC news.**

His mother is now receiving support with her mental health and is planning to start a support group for women with mental ill health. Robbie does have ongoing anger issues and support is being offered to address this, but we are all confident that he has turned a corner in his life and the attraction of gangs has gone and he wants to be a success.

He has even said he would like to work for St Giles one day.

## 7. THANKYOU FOR YOUR SUPPORT

I hope that you have found this report insightful and interesting. We would simply not be able to offer these life-changing, and often, life-changing services without the generosity of your support.

Katy Vaughan

Head of Fundraising, St Giles Trust

[Katy.vaughan@stgilestrust.org.uk](mailto:Katy.vaughan@stgilestrust.org.uk)

07467915296