

Youth violence intervention programme for vulnerable young people attending emergency departments in London: a rapid evaluation

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Plain language summary

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Plain language summary

Youth violence intervention programmes in the NHS embed specialist youth workers into a hospital's paediatric emergency departments. These staff can engage young people and encourage positive change in their lives. Youth violence intervention programmes are part of a broader national strategy to prevent violence among young people. To improve our knowledge of the impact on young people and the cost-effectiveness of youth violence intervention programmes, we carried out an evaluation of a youth violence intervention programme introduced in 2020 at University College London Hospital and run by the charity Redthread.

We reviewed the international evidence on youth violence intervention programmes, and other studies of Redthread services but found few studies measuring impact within the NHS.

We reviewed documents and conducted 22 interviews with University College London Hospital and Redthread staff among others. We found that the service is viewed positively by NHS staff. We also found that youth workers can help a young person to better engage in their medical care and treatment. Youth violence intervention programmes also provide a link with non-health-care services within the community. Overall, they help NHS staff to better support vulnerable young people following discharge from hospital.

We also established the cost of delivering Redthread services per user was £1865. This compares with a cost per inpatient of £5789 for a group of patients similar to those helped by Redthread. The average cost of a Redthread-type patient attending the emergency department was £203.

We looked at whether it was possible to measure whether Redthread reduced young people's re-admissions to the hospital's emergency departments. However, we concluded that fully answering this question was not possible over the timescale of the project. This was because of the impact of COVID-19 on Redthread and other paediatric services, the low numbers of young people engaged in a longer-term programme with Redthread (59) and difficulties with linking information from the hospital and Redthread.

We have therefore made various recommendations in this report to improve the way that data are collected and linked to aid future evaluations.

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