Sharing and Collaborating –

Improving outcomes for victims of crime

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Abstract:
Significant progress has been made to improve victims’ experiences of the criminal justice system and more recent attempts have been made to improve victim access to appropriate support services. Collaborative partnerships between statutory and non-statutory agencies are essential in order to ensure that victims of crime can access their entitlements to information and support. However, a consequence of the increasing competitiveness for limited funding has resulted in support services having to adopt protectionist strategies in order to survive, resulting in a reluctance to share good practices and develop collaborative partnerships. This paper draws together the findings of a rapid evidence assessment on what works in supporting victims of crime and the preliminary findings of an evaluation study of a model of victim care which promotes the sharing of best practice, and further explores the benefits of developing communities of practice.

Keywords:
Best practice; community of practice; funding; multi-agency working; Victims’ Commissioner; victims of crime; victim support services

Background Context
In 2012, the Ministry of Justice (2012) published a consultation document ‘Getting it Right for Victims and Witnesses’ as part of its wider plan to improve the delivery of services to victims of crime and to comply with the European Union Directive (2012/29/EU). The Directive established minimum standards on the rights, support and protection of crime
victims in all Member States (however it is not yet clear what the impact of Brexit in 2016 will be). Following the consultation in 2012, the Ministry of Justice announced that from 2013 the majority of support services for victims of crime would be commissioned at a local level by Police and Crime Commissioners (PCCs). This signalled a significant departure from the previous centralised model of funding and has introduced a new mixed-model of commissioning, with PCCs taking responsibility for the commissioning of local support services.

Whilst 20% of national services remain funded by central government, the shift towards a mixed-model has challenged the dominance of Victim Support as the main provider of support services for crime victims in the UK. For the year ending March 2013, Victim Support had an income of £48m and £39m of that had come from the Ministry of Justice (Civil Society, 2014). The decline in dominance was evidenced by the Ministry of Justice’s decision in April 2015 to competitively commission the national Witness Service and to award it to Citizen’s Advice, thereby replacing Victim Support, who had originally established the first Crown Court Witness Service in 1990. In 1991, Victim Support had been awarded Home Office funding and subsequently expanded the Witness Service to all Crown Courts by 1996, and with additional Home Office funding extended the service to all Magistrates Courts, by 1999. Given the significance of this decision, it was surprising that it received so little media attention and the response of Victim Support was quite stoic.

The Politicisation of Crime Victims from 1990

Victim Support was founded in 1974 and since 1979 has benefited from Home Office funding, initially from the Voluntary Services Unit and then as core funding from 1987. The increase in funding for victims of crime reflected the wider political context and shift in the criminal justice agenda introduced by a Conservative government in 1979. The demise of the rehabilitative ideal towards a more neo-classical, punitive response created an environment more sympathetic towards victims (Rock, 1990). This assisted in the gradual politicisation of crime victims, starting with the publication of the first Victim’s Charter (Home Office, 1990). Williams (1999) argued that the politically neutral position adopted by Victim Support in its early years played a key contributory factor to its success
in attracting government funding, but its expansion was at the expense of other support services. Williams (1999) described these other services as the ‘hidden wing’ of the victim’s movement, namely the more political activist groups led by the campaigns of second wave feminist organisations from the 1970s, such as Rape Crisis, Refuge and Women’s Aid.

In 2009, the government launched a consultation aimed at tackling violence against women and girls. In the Foreword to Together We Can End Violence Against Women and Girls: A Strategy,’ (Home Office, 2009: 3), the ‘invaluable and pioneering role played in developing support services by specialists in the voluntary sector’ was recognized, acknowledging how the dedication of the women’s voluntary sector had helped to place the issue of violence against women firmly on the public policy agenda. However, this failed to explain why it had taken successive governments over fifty years to tackle a culture that condoned and tolerated violence against women. It was Jack Straw, as Home Secretary, who provided the catalyst by pledging to put ‘Victims at the heart of the criminal justice system’ (Straw, 2001). Essentially, the shift towards a victim-centred criminal justice system had made it increasingly untenable for governments to continue to ignore the extent of violence against women, resulting in domestic abuse and sexual violence achieving unprecedented prominence on the political agenda (Tapley, 2010: 141).

From National to Local Funding – a Shift in Power and Influence

This new approach to commissioning from 2012 has marked a significant change in the commissioning of support services for victims and, to assist with this transition, a number of PCCs commissioned research to map existing services, in order to identify what support services already existed and to highlight any gaps in provision (Avon and Somerset PCC, 2014; Sarkis, 2013; Tapley et al., 2014). These audits of support services revealed a landscape consisting of a complex network of statutory and non-statutory agencies, all competing for funding with other providers in order to sustain and develop the services they provide. This reflects the essentially organic way in which support services have evolved in England and Wales since the late 1960s, historically consisting of a range of voluntary and third sector agencies, responding to specific needs and
providing services where none previously existed. As detailed above, whilst some voluntary services have benefited from government funding, the more politically driven agencies, campaigning for changes to legislation and often critical of the poor treatment of victims by criminal justice professionals, have had to operate in an environment of short-term funding from a range of disparate sources, thereby creating an environment of victim services that ‘lack clarity and coherence, often with conflicting aims and overlapping priorities’ (Crawford and Enterkin, 1999, cited by Tapley et al., 2014: 23). This illustrates how the distribution of funding has been utilized by the government to exert political power and influence; effectively marginalising the politically critical groups by denying them funding, whilst supporting agencies adopting a non-political stance and whose underpinning philosophy was in tandem with the ideologies of successive governments during the 1980s and 1990s. The focus was on individualisation and responsibilisation (Rose, 2000), and Victim Support represented active citizenship through its reliance upon volunteers, self-help and a focus on helping innocent and blameless victims.

Following the financial crisis of 2008, austerity measures have placed even greater pressures on limited funding. It could be argued that the devolution of funding from the national to the local removes governments from the complexities of funding decisions, allowing them to aspire to pursue policies that put ‘victims at the heart of the system’, whilst remaining unaware of the complex realities for those agencies commissioned to deliver victims’ services at the local level.

In the real world of the third sector, the unintended consequences of increasing competition for limited funding has created tensions and distrust between agencies, actively discouraging information sharing and building barriers to partnership working. This has resulted in the duplication of services in some areas, whilst services remain patchy and inconsistent in others, leaving victims of crime exposed to a postcode lottery of service provision across England and Wales (Tapley et al., 2014: 88). It is now the responsibility of PCCs to actively promote a mixed model approach where quality services demonstrating successful outcomes can be delivered through partnerships and collaboration, while ensuring value for money.
The New Commissioning Framework

The PCC commissioning framework, guided by the Ministry of Justice (2013), has provided a valuable opportunity for all PCCs to improve the co-ordination of local victims’ services and to develop a consistent, coherent and sustainable approach to the provision of high quality support, accessible to all victims of crime who need and require it. This has undoubtedly presented some challenges and a number of different models have subsequently evolved across England and Wales. Some PCCs were early adopters and started in October 2014, whereas the remaining PCCs started in April 2015. Whilst some PCCs have chosen to remain with their existing service providers and referral processes, others have embraced the challenge and sought to adopt more innovative approaches. Some PCCs have adopted a significant focus upon improving communication with victims and keeping them updated (Dorset and Avon and Somerset), as despite being well documented throughout the last 30 years, failures to provide sufficient information about the criminal justice process and keep victims updated about the progress of their case, still remains a major cause of dissatisfaction for victims of crime (Wedlock and Tapley, 2016: 13).

Early adopters and progress to date

Avon and Somerset PCC was an early adopter and set up Lighthouse Victim Care, which is a multi-agency team of police staff and independent support organisations co-located and working together to provide victim care. The officer in charge of the case is initially responsible for updating victims, but if a victim is required to attend court as a witness, they are allocated a Victim and Witness Care Officer to be their main point of contact as the case progresses to court. Dorset PCC set up the Victim’s Bureau, which is a team of police staff who contact victims to update them on the progress of their case and inform them of the support services available. It is understood that plans are also in place to re-locate the Victim’s Bureau with other support services in order to create a multi-agency model. Kent PCC has set up Compass House, which is a co-located multi-agency hub, including Victim Support, the Witness Care Unit, the Witness Service and links to independent support providers. Compass House also has meeting rooms available and a
live video link facility so that victims can give their evidence to the court remotely in a safe and secure environment. Cambridge PCC introduced the Victim and Witness Hub, which involves an initial needs assessment undertaken by the responding police officer and then referral on to a relevant support service if required.

The local strategies introduced to improve the co-ordination and delivery of support services to victims have been in operation for at least 18 months at the time of writing and provide PCCs with an opportunity to evaluate the impact of the model adopted in their local area. The author of this paper was commissioned in April 2016 to evaluate the model of victim care introduced in Devon and Cornwall in April 2015.

**An Evaluation of the Devon and Cornwall Victim Care Model**

The model chosen consists of two major components: a Victim Care Unit (VCU) and the Victim Care Network (VCN). The VCU is located within Devon and Cornwall Constabulary, thereby alleviating issues regarding the transfer of data between agencies, and is based in Exeter. The VCU is staffed by an FTE Manager, 10 FTE VCU officers, 2.6 FTE Victim Care Advocates who provide outreach for victims with complex needs, and a 0.6 FTE senior mental health practitioner. The VCU process starts with the responding police officer completing a Victim’s Needs Assessment (VNA) with the victim, asking how the crime has initially impacted on them and asking what needs they may have. The VNA is returned to the VCU, whereby VCU officers contact all victims who are identified as having a need within two days, and for those victims where no needs have been identified, a letter is sent outlining what support is available and where more information can be found, including the contact number of the VCU and details of the MyVCU website (victimcaredevonandcornwall.org.uk). A number of issues have been identified regarding the accuracy and efficiency of the completion of VNA’s and these are explored further in the forthcoming evaluation report.

A fundamental principle of the VCU is the targeting of services to those individuals who require support at a time appropriate for them. Everyone’s experience of victimisation is very personal and depending upon their circumstances, people may require support at different times. A pro-active approach initially ensures that people receive information about the support services available and they are then able to make an informed choice.
as to when and how they access these. This helps to ensure that victims are referred to the relevant support services available to assist them when they choose to. Previous referral processes have adopted a blanket approach whereby all victims are contacted, often by letter, whether support is required or not, and specific needs have often remained unidentified and consequently unmet (Tapley et al., 2014). VCU officers contact victims by their preferred method of contact where the VNA indicates a need. Many needs are often met at this initial contact stage, with the VCU officer able to provide information, practical support, or provide details of other relevant organisations that are more suited to addressing the needs of the victim.

Victims who would like additional support to help them to cope with the impact of crime give their consent to the VCU to be referred on to an accredited support agency that is a member of the Victim Care Network (VCN). Referrals are made through MyVCU, a secure cloud-based management system that allows secure referral, case and performance management. The VCN consists of a diverse range of agencies that provide support to victims of crime. Some are single-issue services, for example, focusing on victims of specific crimes (domestic abuse, sexual violence, child abuse, fraud), some work with specific groups (children and young people, the LGBTQ community, elderly people, people with disabilities, and people with mental health problems). Other agencies provide more generic support services within the community, working with families and young people, and provide a more holistic service addressing a range of needs, including housing, addictions, debt, education and employment.

Support agencies apply to become an accredited member of the VCN and if successful receive funding in the form of a grant from the PCC. A key purpose of setting up the VCN is to increase the visibility of support services across the county, raise awareness of the types of support available and to encourage the development of partnership working to reduce duplication of services and identify gaps in service delivery. A further aim is to ensure sufficient capacity and choice for victims across the region and the VCN now consists of over 70 agencies.

**Evaluation Methodology**
The research design adopted a mixed methods approach, including both quantitative and qualitative methods and involved a range of key stakeholders. A total of six days were spent at the VCU, observing management meetings, examining the case management system, shadowing VC officers, and semi-structured interviews with four VC officers and the manager. Semi-structured interviews were also undertaken with two senior police officers, the commissioning lead for the OPCC and two support services. An online questionnaire was distributed to members of the VCN. To gain a victims’ perspective, three focus groups were held across the region, two semi-structured interviews and six telephone interviews. Responses to the PCC Victim Outcome Survey were also analysed.

**Findings**

A preliminary analysis of the results of an online questionnaire (34% response rate), demonstrates an overwhelming support for belonging to the VCN, with responses highlighting the following benefits:

- The VCU provides a valuable service for victims across the region, a seamless referral pathway to ensure clients’ needs are met.
- Belonging to the Network enables greater up-to-date knowledge of existing services and increases awareness of the services available.
- Membership has opened up new opportunities to network with other agencies and to share knowledge, understanding, experience and best practice. There is much less repetition as a result.

The impact membership has had on referral numbers to the support agencies is not yet clear. Some organisations have indicated an increase, whilst others state there has been little impact or that referrals have actually decreased, indicating that further analysis of the referral process is required. However, of significant importance, is that some agencies are seeing a change in the profiles of victims they are supporting, indicating that referrals from the VCU has enabled harder to reach groups to access support services. This has included male victims, victims of domestic and sexual abuse, and has also revealed higher rates of victimisation amongst young people and people with disabilities who are now able to access support, and has also helped to identify where gaps in services exist.
Networking Days organised by the OPCC are held three times a year, providing agencies with an opportunity to meet up, share news and information of initiatives and services, and undertake joint training. Eighty-six per cent of members highlighted the benefits of attending these days, with one respondent commenting on how ‘uplifting’ the Networking Days were: ‘it’s good to see how much good work is being done and to share our values and commitment’. This demonstrates the valuable role of peer support and partnership working, particularly at a time when increasing competition for funding has had a negative effect upon partnership working, due to agencies having to compete against each other for funding. The exchange of information, the relevant topics covered by speakers and the updates on the VCU were all found to be useful by participating agencies.

As part of the evaluation study, semi-structured interviews were undertaken with two support agencies. Participants described the often multiple and complex needs of many victims, but stated that belonging to the VCN enabled them to make referrals on to other services with confidence, as they were more aware of what support could be offered. For example, through their membership of the VCN, one agency working with a victim of hate crime was able to refer the client on to an agency that they were confident would be able to help them to improve and secure their business premises, thereby increasing the victim’s access to appropriate services and helping them to gain the support needed. Whilst the findings from the online questionnaire indicated that 100% of members worked in collaboration with two or more other agencies, involving a mixture of formal and informal partnerships, evidence from the two semi-structured interviews suggested that in their experience, the majority of service providers remained protectionist and reluctant to engage with others, turning down potential opportunities to collaborate. Three participants suggested that it should be the role of the PCC to facilitate and encourage closer partnership working through the allocation of joint funding, thereby actively promoting a more efficient use of resources and the development of new services where gaps currently exist.

From April 2016, the OPCC introduced key performance measures in an attempt to capture the level of support being provided and to identify measurable outcomes for victims. The purpose is to measure volume, intensity and complexity in order to assist in a more effective and efficient targeting of resources. Whilst ensuring money is well spent
is a key objective of a commissioning framework, it can be argued that to link funding with a requirement to join an accredited network, and to demonstrate competence through providing evidence of positive outcomes for victims, introduces a very different balance of power. Instead of funding decisions being made centrally by the Home Office or the Ministry of Justice, they are now administered locally by PCCS, but are still no less influenced by politics. In fact, PCCs are required to demonstrate tangible outcomes in regular reports requested by the Ministry of Justice, thereby demonstrating governance at arms length, as suggested above.

The findings indicate that the role of PCCs is pivotal in encouraging collaborative partnerships and innovative practices, through the development of networks and the allocation of funding. A recent evaluation of the Safer Stronger Consortium in Cornwall (Westpoint, 2016: 2), a member of the VCN, emphasises ‘the need for the provision of specialist and multi-faceted support interventions for victims and their families’ and highlights the breadth of expertise and multi-agency collaboration found within the Consortium. Other agencies are in support of the PCC offering funding incentives to develop further consortiums, indicating an appetite for the development of wider communities of practice.

Discussion

The approaches adopted in some of these localised funding practices by PCCs has demonstrated that a joined-up multi-agency approach is key to successful delivery of services that provide effective and meaningful support for victims at the local level. There are still, however, benefits to the learning and sharing of good practice at the national level. Although many victims’ services are no longer commissioned centrally, there is still a place for learning and sharing at the national level in order to benefit from the knowledge and experience held across England and Wales, and in order to reduce the potential for victims to receive a different quality of service dependent upon their location.

At the National Level
The Victim’s Commissioner (VC) has signalled her intentions to cultivate a community of practice, which will facilitate learning and collaboration across statutory and non-statutory practitioners. This community of practice will aim to develop and disseminate good practice in supporting victims of crime. This is to ensure that victims are guided through the criminal justice process if they have reported the crime, and to assist them in their recovery through the provision of timely and appropriate services.

The VC’s role is defined in the Domestic Violence, Crime and Victims Act 2004 and can be summarised as:

- Promoting the interests of victims and witnesses;
- Encouraging good practice in the treatment of victims and witnesses; and,
- Keeping the operation of the Victims’ Code under review.

Sharing and collaborating within and between criminal justice agencies and third sector practitioners can contribute greatly to each of these three key aims. The aim of the VC Community of Practice will be to act as a hub for this sharing and collaboration, bringing practitioners together physically and virtually to share their experiences and learn together how to best support victims.

**Communities of Practice**

The concept of a community of practice is age-long. People have always come together to learn and share their experiences about a subject that they are interested in. But the term ‘community of practice’ and the theory behind why they can be so helpful in supporting learning and practice was developed by Lave and Wenger (1991) who examined the role of where and how learning takes place. Their theory of situated learning focused on the relationship between the social situation in which learning occurs and the actual learning achieved.

Wenger (1998) went on to formalise the key attributes of a community of practice and develop them in relation to theories around social learning. He describes communities of practice as groups of people with a shared concern and a passion for learning how to do it better. They learn together how to improve their practice as they interact on a regular
basis. He claimed that the very act of knowing is fundamentally a social act, therefore, communities of practice are a form of social learning.

The Victims’ Commissioner will aim to facilitate the emergence of a community of practice, contributing to its development by providing infrastructure, facilitating the physical and virtual space for practitioners to come together to learn about what works in supporting victims of crime.

In a social learning situation, practitioners act purposefully, learning their way from finding out about the problems inherent to a situation to taking action to solve them. It is not just about finding one single solution to a single problem, but about learning about the situation, learning about the process and making continual improvements to practice along the way. As learning develops and changes in practice are implemented, the situation in turn will change, there isn’t necessarily one permanent solution. Problems in real life are not static; they alter as changes are made in the practice addressing them. There are also multiple perceptions of what the problem is in the first place. For example, the victims’ perspective of the criminal justice system will be very different to that of the police, judges, and support practitioner perspectives, and yet all may agree that changes could be made to improve the situation for all, however complex the problems appear.

Learning can be social in that, not only can practitioners come together as a group, rather than just individually, but also there is often a potential unintended emergent outcome. Participants may also learn something about each other and their relative views on the subject, creating a greater understanding of differences in professional agendas and cultures. A social learning system, and particularly a community of practice, can then become more than the sum of its parts.

Wenger (1998) defined a community of practice as a form of social learning consisting of three key components: domain, community and practice. The domain of a community of practice is the particular focus that the members are passionate about. The focus defines what they do (at least partially). The domain of the community of practice that the Victims’ Commissioner intends to cultivate will focus on working with victims, ensuring they are guided and kept informed throughout the criminal justice process and beyond, and provided with appropriate and targeted services to assist with their recovery. The domain is also about delivering justice for victims and achieving this whilst according
victims the dignity and respect that they are entitled to as citizens. All members of this community of practice will have this as a core focus of their work.

Wenger (1998) defines the community aspect of a community of practice in terms of both its members and the high quality relationships that bind them. An ideal community of practice will encompass a wide range of perspectives. Membership of this community of practice will aim to include all of those agencies with responsibilities to provide the services stipulated in the Victims’ Code of Practice (Ministry of Justice, 2015). However, it is acknowledged that a victim’s true experience is not limited only to those agencies covered by the Code and so this community of practice will aim to broaden its membership to all statutory bodies that interact with victims. For example, judges; magistrates; defence lawyers and registered intermediaries, etc. The offer of membership will also be extended to third sector organisations that are commissioned to support victims along with victims themselves.

The theory and application of communities of practice in social learning is not without critique (Hughes et al., 2007). It has attracted criticism that membership of a particular community of practice may signify an implicit power and advantage compared to organisations that are not included in the community of practice. Critics of the approach say there is a risk that organisations who choose not to participate or who are not aware of the community of practice may be marginalised and those who do participate are implicitly branded as having a level of competence to justify their membership. The Victims’ Commissioner does not endorse any one victim charity over another and so care must be taken to set out in the rhetoric and terms of reference that membership of this community of practice is not an endorsement of their expertise or willingness to learn about supporting victims to the detriment of organisations that do not take part in the community.

As a working group, the community of practice will aim to make a real difference to the practical ways in which victims are supported. This means building a membership of participants from an organisational level that have practical experiences to share. The Victims’ Commissioner will seek commitment from senior stakeholders within the criminal justice system, but the core social learning will be carried out by participants who are on the ‘coal face’ of working to support victims. By sharing practical learning and good practice, participants of the community of practice will be able to share their
learning with colleagues from their own organisations who work directly with victims. The commitment and leadership provided at senior level will mean that community of practice members can also cascade their learning up to senior stakeholders in their organisations, with a view to informing and improving national policies and guidance to support victims.

Wenger (1998) states that in order to function successfully, a community of practice should have an effective co-ordinator and a core group to facilitate practical organisation. The Victims’ Commissioner’s Office will cultivate the community of practice, seeking the support of a core group of practitioners to facilitate practical elements, such as organising meetings and providing venues with an appropriate geographical spread across England and Wales. It is envisaged that much of the work of the community can be carried out virtually through emails, newsletters and online, but occasional face to face meetings can help to cement relationships and provide opportunities to network and share experiences informally.

Membership should reflect the diversity of the organisations that they represent and the diversity of the victims that they aim to support. It is important, therefore, to ensure that membership of the community of practice is inclusive, encouraging practitioners from all backgrounds, regardless of gender, ethnicity, culture, disability, social class and geographical region.

The sense of belonging to the community is essential in a community of practice. It provides a foundation for learning and collaboration. There may be instances of collaboration between criminal justice agencies and there is increasing evidence of successful multi-agency working at the local level (Wedlock and Tapley, 2016). However, the VC facilitated community of practice will be in a unique position to provide a sense of community for practitioners with a focus on supporting victims across England and Wales by sharing examples of local practices nationally.

Wenger (1998) identifies that there should be space at the periphery of a community of practice to develop ideas and raise issues that are not central to the group. Smaller subgroups can develop over time, which can then report back to the core group. Specialist areas of victim support can be discussed within smaller subgroups that have a particular interest in an aspect of supporting victims, for example, supporting young and vulnerable
victims, or supporting victims of domestic abuse. Learning from these subgroups can then be fed back to the core group for wider dissemination. Concentrating on specialist areas that tie into the wider area of victim support provides a 'Landscape of Practice' (Wenger-Trayner et al., 2014).

It is envisaged that the VC facilitated community of practice will start by outlining some initial terms of reference, but the theory states that at their most effective, communities of practice are flexible, evolving through time as they interact with the landscape of the situation that they are seeking to learn more about. Developments in the victim landscape will lead to subsequent changes for the community of practice. For example, the introduction of a Victims' Law would bring about a new set of complexities for those who work to support victims of crime (Strickland, 2016).

The final key aspect of a community of practice as defined by Wenger (1998) is the practice of the community. The practice element will be evident in the sharing of good practice, learning together how to better support victims through the practitioner's own experience of what worked well. The mechanisms for engagement are diverse and may cover activities such as workshops, sharing case studies, developing theoretical frameworks and practical guidelines. Through this practice the community of practice will aim to become a centre of excellence, collating and disseminating good practice in supporting victims of crime.

The practice of sharing what works in supporting victims through the criminal justice system can be broad and so the Community may focus on particular work streams, for example:

- providing timely and accurate information;
- victim personal statements;
- restorative justice;
- handling complaints;
- working with children and vulnerable victims;
- a victims' law;
- compensation.
Conclusion

In summary, recent changes in the commissioning of support services to PCC areas provides a valuable opportunity to improve the co-ordination and coherence of support services for victims of crime. Commissioning at a local level provides a more targeted approach in the allocation of resources to ensure that people are informed of the services available and are able to gain access to them when required. To ensure a wide range of services exist to address the often complex and multiple needs of victims, it is essential that policies and reforms are implemented as intended. To achieve this, the barriers preventing the development of effective partnership working and collaboration need to be addressed, including information sharing, communication, IT systems, professional cultures, joint training, funding and the sharing of resources. Lack of information sharing and poor communication between agencies, results in the duplication of some tasks, the failure to undertake others and wasted resources, leaving victims to face a postcode lottery in the responses they receive from both statutory and non-statutory agencies (Tapley et al., 2014; Wedlock and Tapley, 2016).

An evaluation of the victim care model developed in Devon and Cornwall provides evidence that the creation of the VCU and VCN is making an important contribution to improving the experiences of crime victims. High levels of victim satisfaction were found for those who had reported a crime and received additional support from appropriate services. Although difficulties were still identified with keeping victims updated and a need for the police to work in closer partnerships with the VCU and service providers, the model remains work in progress and valuable lessons are being learned.

At a national level, the Victims’ Commissioner aims to cultivate a community of practice to build upon local successes and facilitate the social learning of practitioners across all criminal justice agencies and commissioned services nationally. The VCN being developed in Devon and Cornwall is an example of success at a local level and has a contribution to make to the wider aim of a community of practice; to become a centre of excellence to gather and disseminate good practice in supporting victims, working together to improve victims’ experiences. Whilst this may create challenges at both a local and national level, it also presents significant opportunities that have the potential to
improve substantially the experiences of victims and their ability to regain a sense of autonomy and greater well-being.

As Henry Ford once said 'Coming together is a beginning; keeping together is progress; working together is success.'


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