

# A&E navigators

Providing support to patients with a violence-related injury after discharge from hospital, referring them to charities and support networks.

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## Key details

<b>Does it work?</b>	Promising
<b>Focus</b>	Diversion
<b>Topic</b>	Crime prevention Offender management Violence against women and girls Violence (other) Vulnerability and safeguarding
<b>Organisation</b>	<a href="#">South Yorkshire Police</a>
<b>Smarter practice</b>	<a href="#">A&amp;E navigators smarter practice example – South Yorkshire Police</a>
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<b>Region</b>	North East

## Key details

<b>Partners</b>	Police Community safety partnership Criminal justice (includes prisons, probation services) Education Government department Health services Local authority Voluntary/not for profit organisation
<b>Stage of practice</b>	The practice is implemented.
<b>Start date</b>	December 2019
<b>Scale of initiative</b>	Regional
<b>Target group</b>	Adults Children and young people General public Offenders Victims

## Aim

The aim of the accident and emergency (A&E) navigators is to:

- access vulnerable individuals who may be otherwise unknown to the police
- intervene at a reachable and teachable moment
- encourage individuals to choose a different pathway in their lives
- prevent the escalation of violence to homicide

## Intended outcome

The intended outcomes of the A&E navigator programme are to:

- provide increased targeted support for those experiencing serious violence
- have an improved multi-agency and partnership approach to serious violence and homicide prevention

A&E navigators achieve these outcomes by offering patients a point of contact that is distinct from the police or medical experts.

## Description

A&E navigators are employed by Sheffield Teaching Hospitals NHS Foundation Trust. They are funded through the South Yorkshire Violence Reduction Unit (VRU) – a unit managed by the police and crime commissioner (PCC) and in receipt of Home Office funding. The South Yorkshire VRU assists with the recruitment of A&E navigators.

There are currently four A&E navigators located in one South Yorkshire hospital.

Patients are identified as eligible for navigator support if they enter hospital with a violence related injury. The patients either:

- are approached directly by a navigator
- are referred by hospital staff
- self-refer themselves after seeing hospital posters (less frequent)

While the navigators can work a full-time role of 35 hours a week, their hours focus on weekends covering from Friday overnight through to Sunday. Clients can leave messages for their navigator outside of their working hours.

The hospital environment enables navigators to reach patients at a 'reachable and teachable' moment – that is, when they are in a safe environment and protected from their usual influences.

Patients can stay in the navigator programme for as long as they wish.

A key part of the navigator role is to find appropriate services for clients alongside the navigator relationship. The navigators have access to a range of charities and support networks that promote a positive lifestyle. These networks include refuges, housing and drug and alcohol services.

Navigators are given access to the community directories of all four districts across South Yorkshire. This enables them to quickly locate a wide range of support services and contact details whenever needed.

The navigator role often goes beyond referral to other services. Navigators may continue to act as a support network for their client once hospital treatment has finished and the client is back in their community.

## Evaluation

A process evaluation is ongoing and is being jointly led by the VRU and Sheffield Hallam University.

Evidence suggests that A&E navigator programmes can prevent further violence. Sheffield Hallam University conducted a process evaluation of the South Yorkshire A&E navigators. This study involved document reviews and interviews with staff. The findings provided insight into how the navigators successfully adapted during the COVID-19 pandemic – a period when they were excluded from hospitals and when key referral services were shut.

The South Yorkshire A&E navigators were also evaluated in 2021. A survey of navigator referral partners suggested partners thought the referrals they received from navigators were appropriate, and that they received the necessary information from navigators. The surveyed partners also believed that navigators were not referring too many individuals to their services, and that the navigator service had a positive impact on clients' lives. The evaluation also found that the A&E navigators were well embedded in the hospital and working well.

Navigators keep output data on the number of text conversations between themselves and patients. In the quarter leading up to July 2022, the navigators engaged in 400 separate text conversations.

Sheffield Teaching Hospitals NHS Foundation Trust is currently working on a new database. This will show if a client is a returnee to A&E within a number of months or years.

## Overall impact

- Increased targeted support for those experiencing serious violence, as victims or offenders.
- Improved multi-agency and partnership approach to serious violence and homicide prevention.

## Learning

The VRU has identified the following learning and recommendations.

- Recruiting navigators with lived experience of similar circumstances to their clients can assist with forming connections between navigators and clients.
- When deciding on resource requirements for navigator programmes, forces should consider that some aspects of the navigator role can be very time consuming – for example, working with housing services to find suitable accommodation for a client.
- South Yorkshire's navigators have fed back that they would like to be measured against performance indicators. This would provide them with more substantial directives. Sheffield Teaching Hospitals NHS Foundation Trust is currently working with the navigators to develop performance indicators.
- Navigators require comprehensive support to understand what to do in specific scenarios such as domestic violence and honour-based violence.
- South Yorkshire's navigators believe that the work they conduct for their patients when back in their communities can be more beneficial than their initial work in A&E. Having capacity for navigators to continue their work in community settings is therefore suggested to be important.
- Partner relationships are believed to be key to the success of A&E navigators. South Yorkshire Police highlights the particular importance of medical staff recognising the value of the navigator programme. Having a nurse champion is suggested to help facilitate the relationship between hospital staff and navigators.
- Building relationships with any other navigator programmes in the region (for example, custody or school navigators) can help identify and utilise the most appropriate referral services for clients.
- Forces should consider how the work of their navigators feeds into other areas of policing (for example, neighbourhood policing teams) and the force's wider homicide prevention strategy. This will help forces ensure a joined-up approach to homicide.
- Forces should consider their funding streams for navigator programmes. Short-term funding may limit the number of good applicants to navigator positions due to the short-term nature of contracts. Having navigators on short-term contracts may also risk damaging relationships with clients.
- Forces should consider the specific needs of their local communities when setting up navigator programmes. For example, South Yorkshire has seen more older people require navigator services for domestic abuse situations than they anticipated.
- South Yorkshire recommend not being too restrictive about the severity of cases qualifying for a navigator. This approach will help ensure navigators do not turn away patients who are at risk of

later coming back into the system in a worse situation. In South Yorkshire, any case that involves an injury from assault (either by hand or by weapon) can be referred to a navigator.

- Having a map (or similar system) of available referral services can help navigators make the best use of regional resources. This may be especially helpful when navigators need to access out-of-hours support.

## Best available evidence

See the [crime reduction toolkit](#) for the best-available evidence on [accident and emergency navigators](#).

Other useful resources include:

- [Knife crime – a problem-solving guide](#)
- [Homicide – a problem-solving guide](#)

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## Tags

Vulnerable people   Safeguarding   Domestic abuse