

Prevention, prosecution, intervention, education and diversion (PPIED) – Greater Manchester Police

A trauma-responsive and collaborative intervention to identify and offer support services for young people engaged in repeat offending.

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Overview

This is a [smarter practice example](#).

Prevention through prosecution, intervention, education and diversion (PPIED) is a trauma-responsive and collaborative intervention to identify and offer support services for young people engaged in repeat offending.

PPIED was introduced by Greater Manchester Police (GMP) in 2020. The PPIED pilot was introduced with the following aims.

1. Ensure that every child in Greater Manchester who is named as a suspect is treated as a child first, and a suspect second.
2. Promote a trauma-responsive approach to offer enhanced support for children and families.
3. Reduce harm and prevent the likelihood of reoffending.

PPIED identifies young people who:

- have been named as suspects in at least two crimes in 12 months
- are deemed 'invisible' by police and child support services

(Young people are classified as 'invisible' if they are identifiable on police operational systems but not on partner systems. In contrast, young people are deemed 'visible' if the young person is identifiable on police operational and partner systems. If the young person is identified as 'invisible', then a referral to PPIED can be made.)

The young people are made 'visible' to support services via a PPIED panel. This identifies a relevant support package to meet the young persons' needs and promote diversion from further offending behaviour.

Problem

In 2020, Greater Manchester Violence Reduction Unit (VRU) undertook work to understand the prevalence of crime and the force's response where a child is named a suspect.

The findings identified that between August 2019 and June 2020, 15,796 (14.4% of all crime demand in GMP) crimes had been recorded with children as named suspects. When examining these cases, the force recognised that 70% were closed with 'no further action'. Crime closure comments highlighted that in many circumstances investigators were reluctant to criminalise young people.

The force identified these instances as missed opportunities for diverting young people away from further adverse criminal events and towards positive interventions. The force recognised three likely contributing factors. These were:

- organisational – GMP had developed a process that aimed to quickly reduce demand, which meant dealing with the child as a suspect
- workforce – a lack of training and understanding around trauma and trauma-responsive policing by police officers and staff
- key stakeholders – a lack of information and understanding among GMP officers about the available non-statutory and voluntary sector resources to support children involved in crime

The consequences and concerns for GMP were that many young people named as suspects were potentially invisible to key services that could support and steer them away from future offending.

Response

Prevention, prosecution, intervention, education and diversion

PPIED is a consent-based model. It identifies young people who are named as suspects of crime and classified as 'invisible' for referral to a multi-agency (PPIED) panel. The panel consists of

several statutory and non-statutory organisations that offer support services for young people. The panel conducts a needs assessment to determine which agencies are best placed to work with the young person and the most suitable service providers.

There are three key criteria that determine a referral to the intervention.

1. Whether the young person has been named as a suspect in at least two crimes in 12 months.
2. Whether the young person has indicators of trauma or adverse childhood experiences (ACEs).
3. The young persons' visibility to services.

There are three key underpinning assumptions to PPIED.

1. Formally criminalising young people may create future expectations of offending and increase associations with other offenders. This can lead to more serious forms of deviance.
2. As the first point of contact with the criminal justice system, police officers are best placed to intervene early and provide a referral to needed and effective services.
3. Referral to needed and effective services can reduce reoffending.

PPIED logic model

<p>Problem</p>	<ul style="list-style-type: none"> • 70% of crimes involving a child named as a suspect were closed with 'no further action' (NFA). • Missed opportunity to further support young people engaged in deviant behaviour. • Lack of understanding of service provision for young people engaged in deviant activity.
<p>Response – Prevention, prosecution, intervention, education and diversion</p>	<ul style="list-style-type: none"> • Promoting a trauma-responsive approach to offer enhanced support for children and families. • Reducing harm and prevent the likelihood of reoffending.

<p>Response – Resources</p>	<ul style="list-style-type: none"> • Greater Manchester Police (GMP). • Greater Manchester Violence Reduction Unit (VRU). • School engagement officers (SEOs). • Manchester Metropolitan University. • Youth Justice (YJ). • Youth Endowment Fund (YEF). • Home Office GRIP funding.
<p>Response – PPIED response</p>	<ul style="list-style-type: none"> • SEOs review police systems and triage appropriate candidates for PPIED. • Partners review local records management system and triage appropriate candidates.
<p>Response – Evaluation and monitoring</p>	<ul style="list-style-type: none"> • Three-stage thematic evaluation with before and after comparisons.
<p>Outputs</p>	<ul style="list-style-type: none"> • Number of young people referred to PPIED. • Number of young people referred to supporting services. • Number of young people re-engaged with supporting services. • Number of officers and staff trained in trauma-informed practice.
<p>Outcomes</p>	<ul style="list-style-type: none"> • Young people receive appropriate support that divert them from reoffending. • Shifting perceptions of officers through the lens of trauma.

Implementation

How prevention (through) prosecution, intervention, education and diversion works

Police officers review police systems to identify young people relevant for referral to PPIED. Dedicated police school engagement officers (SEOs) perform this once a week.

The child's details and associated information are sent to the relevant first point of contact at the district level. These are typically organisations that manage child services, such as Early Help, the Community Safety Partnership team, Youth Justice or the local authority.

The relevant first point of contact or partner organisation involved in child service provision searches the social care records management system with three primary outcomes.

- If the child is not on the system – that is, not visible to support services – then a referral is made to the PPIED panel.
- If the child is on the system and visible to support services, then a referral may be made on the premise that the support package needs reassessment or that a broader or more enhanced set of services can be offered.
- If the child is on the system and the response is considered adequate, then no referral is made.

PPIED is a consent-based model. When a referral is made to PPIED, consent is sought by the police from the parent or guardian of the child to be discussed at the panel. When consent is gained, information can be shared with the PPIED panel.

- If consent is not given there is no engagement with the young person by the PPIED panel.

The panel comprises various agencies and organisations, including Early Help, Youth Justice, Complex Safeguarding, Education and a range of other commissioned services that offer targeted support.

The panel performs an assessment of the young person's needs to decide the best package of support. This may include restorative justice referrals, mentorship programs, counselling and career development advice, and youth worker engagement.

Referrals, activity and actions are set and revisited at subsequent meetings. These are convened on a weekly basis.

PPIED process overview

1. Police officer reviews police systems.	
2. Was the young person named as a suspect on more than two separate occasions in 12 months?	No – ineligible for referral.
	Yes – Do they have indicators of adverse childhood experiences and trauma? If yes, go to 3.
3. Police forward information to partner organisation.	
4. Partner organisation review local records management system.	
5. Is the young person on the system?	No – go to 6.
	Yes – If the young person requires reassessment of service provision – go to 6.
	If they don't require reassessment of service provision – ineligible for referral.
6. Young person is referred to PPIED panel.	
7. Police seek consent from parents for information sharing.	
8. Do the parents offer consent?	No – ineligible for referral.
	Yes – go to 9.
9. Information is shared with PPIED panel members.	
10. PPIED panel sits and performs needs assessment.	
11. PPIED panel allocates services to young people.	

Enablers for implementation

Trauma-responsive training

GMP is ensuring the force is trauma responsive with SEOs at the forefront of training. (Trauma-responsive training to police officers is ongoing in GMP to promote and raise awareness of the impact of trauma and ACEs on young people.)

Partnership working

Leveraging existing relationships is critical to ensuring there are providers within the partnership that can adequately coordinate key stakeholders, and track and monitor referrals.

Technology

The use of technology and bespoke systems to reduce the 'manual trawling' of information across multiple databases. In the future, PPIED would like to operate from one single dataset across both police services and child services. This would remove the need to separately search police and child services systems.

Support packages

Operating with stakeholders that have the means to network and bring in the right organisations to support young people and their families. The group needs to be a collaboration of agencies – invested in prevention – to enable young people to build coping mechanisms and trusted adult relationships.

Outcomes and impact

An ongoing independent evaluation is being undertaken by Manchester Metropolitan University (MMU). The evaluation has been thematically organised into three key phases.

- Phase 1 – Understanding the need for PPIED.
- Phase 2 – Review of re-entries into PPIED to ensure appropriate targeting of young people.
- Phase 3 – Ensuring the right interventions are provided to young people.

Quantitative data has been drawn from before and after the PPIED intervention within districts.

Over the first 16 months the initiative was in operation, only one young person has been re-referred back to PPIED out of 50 young people PPIED supported.

Anecdotal evidence has demonstrated a positive move towards the prevention of offending, including:

- increase in the quality of care plans submitted to the Multi-Agency Safeguarding Hub (MASH). (The MASH brings together key professionals from across social care, health, the police, education and probation to provide better quality information, analysis and decision making, to safeguard vulnerable young people more effectively.)
- increase in community resolutions, as Youth Justice is better informed of new crimes
- better information sharing with colleges and schools to engage young people before they become involved in potentially criminal activity

Learning and recommendations

The PPIED team highlighted several areas to consider when implementing a similar diversionary initiative.

Engage different streams of funding

Various funding sources have been used to support the PPIED initiative. PPIED was allocated:

- GRIP funding (a Home Office fund made available to 18 areas worst affected by serious violence with one of the key focusses to steer young people away from crime)
- Violence Reduction Unit funding
- funding from the Youth Endowment Fund (YEF)

Future funding sources include the Turnaround fund. This is a government initiative launched in late 2022, supporting youth offending teams to engage children in early intervention.

Simplicity and flexibility

PPIED has been designed as a flexible model that can be adapted to support local districts. In the Greater Manchester area, districts have different or overlapping child services and varied funding models. Rather than mandate a specific form of the PPIED model, implementers should be open to

local variations to support the needs of local districts.

Enhance support

Offering a deep-dive case example of what has been achieved by PPIED has been key to gaining enhanced support from partners. Greater Manchester VRU created a timeline reflecting the typical young person's experiences through the criminal justice process. This included the agencies that had been in contact with the young person, and the consequences of police action – both good and bad.

Consent

The PPIED team indicated that in the majority of circumstances, parents and guardians of young people do consent to the sharing of information for PPIED. To increase engagement with the PPIED process, programme managers recommended placing an emphasis on its non-punitive nature and the aim of offering support to young people and families.

Evaluation

Should be holistic and include an understanding of both the referral process and the efficacy of interventions that are delivered to young people.

Take managed risks

Rather than try to 'upfront develop' a perfect system and not launch the program, refine and enhance the program as it develops.

About smarter practice

This is a smarter practice report. This means the activity has been reviewed by experienced practitioners from the College of Policing and partner agencies, and is considered suitable for further testing by other forces and organisations.

- [About smarter practice](#)

Tags

Homicide