



#ISTV in practice: West Midlands We need to grasp 'teachable moments'

Dr Katie Wright is an emergency physician, based at Birmingham's Children's Hospital. Katie is also clinical lead at West Midlands Violence Reduction Partnership and spends any free time she has advocating for Information Sharing to Tackle Violence (ISTV).

It's fair to say that Katie is frustrated with gaps and inconsistencies in information gathering. She sees the bigger picture, the positive impact ISTV can have and is championing her colleagues to get on board.

"We need good connectivity and have to pull together. Some areas are doing information well but that doesn't mean it is getting shared."

Despondency is not an option. The Emergency Department at Birmingham Children's Hospital has 60,000 annual attendances and serves as the UK's diverse second city where 51% of children and young people live in the 10% most deprived areas in England.

Concerted effort is needed to help get children and young people out of that vortex. And we need to get in early.

Children in the most deprived areas are twice as likely to die than those in the least deprived, be that from infant death, accident, interpersonal violence or suicide.*

Early help is a crucial in violence prevention. But sadly, a lack of resourcing continues to blight efforts to turn this around.

We need more health visitors, in-school support. A lot was lost during COVID, particularly face-face connections and we are a long way off from clawing that back.

The Early Help programme in Birmingham aims to prevent children and families needing more specialist services, helping with housing, finance, food poverty, digital exclusion, mental health, child development, special educational needs and disabilities (SEND) and more.

Introduced as a pilot service in November 2021 with coordinators working alongside clinicians in the ED, its purpose is to raise awareness of Early Help among ED staff and to increase support to attending families with barriers to health and social care.

Katie reflects on the tragic case of Awaab Ishak who was two years old when he died from black mould exposure, saying: "Anything we can do to get children out of these areas for physical, mental, social health has to be worthwhile."

Awaab's death initiated an Amnesty International UK campaign, and hard hitting video with Olivia Coleman and Adrian Lester calling for access to safe housing, healthcare and an adequate standard of living.

It also led to the creation of a standard letter for ED consultants to issue to landlords to comply with the law, quoting the Landlord and Tenants Act 1985 and the Home Act 2018.

ED interactions are critical and Katie talks of 'teachable moments' that need to be grasped fully. When separate from their community, people are much more likely to engage. And at Birmingham Children's Hospital they can talk with youth workers who are on site. Initiating contact by offering a soft drink or a phone charger can start the conversation but funding is a real concern.



Violence against women and girls is a huge area of concern. Those attending with non-fatal strangulation, a serious form of physical violence and difficult to evidence, are seven times more likely to be killed. Through early intervention, safety plans can be out in place.

Education is critical – to get early help, people need to know where to go and what is available. 'Helping Hands' is a nursery intervention with Women's Aid around positive relationships and feeling safe. 'The Feast' educates secondary school children on safe dialogue around belief systems. 'Men at Work' sets out to change the script by improving ambition and surpassing external expectations.

Whilst lifelines like these are available, those at risk need to be identified in the first place. Which brings us back to information and the consistent logging of patient interactions.

There are difference systems everywhere you go – often three or four in one hospital alone – and they don't talk to one another!



West Midlands Ambulance data mapping is different from East Midlands data mapping. Police data mapping is different too.

Data can be so powerful but the myriad of systems and processes can put people off from embracing ISTV. Plus, it is not a mandatory function to complete before discharging a patient.

Our hope is that ED teams see the true value of ISTV. What they turn around every day in the face of very real challenges is phenomenal – like their counterparts in the ambulance service, in policing etc.

A combined effort across sectors with ISTV at the core can result in safer communities for all.

Your hospital. Your community. The part you play.

[*https://data-and-insight-hub-wmvru.hub.arcgis.com/](https://data-and-insight-hub-wmvru.hub.arcgis.com/)

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