Cheshire

Serious Violence Strategy

2024-2029









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Foreword

Cheshire is undoubtably a safe county to live, work and raise a family in. I know that it can be even safer and I know that serious violence is preventable.

This strategy will set out how we are going to do that in Cheshire. The Serious Violence Duty was introduced in the Police Crime, Sentencing and Courts Act 2022 and puts a duty on specified authorities to build a public health approach to understanding the drivers and impacts of serious violence, with a focus on prevention and early intervention. In Cheshire, the specified authorities for the purpose of the Serious Violence Duty are:

Cheshire Constabulary, Cheshire Fire and Rescue Service, Cheshire and Merseyside ICB, Probation Service, Youth Justice Service, Halton Borough Council, Warrington Borough Council, Cheshire West and Chester Council, Cheshire East Council. Preventing serious violence is not something that any single agency can tackle in isolation.

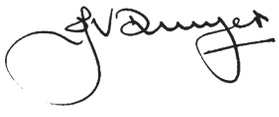
To achieve a measurable impact on serious violence in Cheshire, we need a whole system response. We need active buy in. Both from senior leaders and from practitioners. We also need strategic alignment across multiple partners and workstreams.

I make no understatement when I say that these are not easy tasks. With traditionally lower levels of serious violence than we see in larger, urban areas, Cheshire was understandably not one of the areas that had a government funded Violence Reduction Unit already in place. This meant that we started from a significantly lower base when looking to establish the appropriate governance and relationships to get the work against the Serious Violence Duty underway.

I am immensely proud of the work undertaken by my team to get us from that low base to where we are today. A huge credit too, must go to our partner agencies for their consistent and active buy in that has made this progress possible.

Again, because Cheshire is a safe county, we have had to think differently about our approach to preventing Serious Violence. Lifting and shifting an approach from a large metropolitan city would be unlikely to deliver the same successes here. Our Strategic Needs Assessment highlighted two clear priority areas for reducing serious violence in Cheshire- Domestic Abuse and Youth Intervention. This strategy will set out our specific approach to each of these strategic priorities in turn.

Working together, we can prevent serious violence. To do that, this strategy must form the foundation of a whole system response in Cheshire to preventing serious violence. Anything less than that will not deliver the lasting change that I know we all want to see.



John Dwyer
Police and Crime Commissioner for Cheshire



Introduction

Background

The Serious Violence Duty was introduced as part of the Police Crime Sentencing and Courts Act 2022. It requires specified authorities to work together to prevent and reduce serious violence in their local area. This means taking a multi-agency, public health approach to understand the causes and effects of serious violence, developing a strategic response focusing on prevention and early intervention, and monitoring the impact of this preventative work.

The duty requires the following 'specified authorities' within a local government area to collaborate and plan to prevent and reduce serious violence: Police, Probation, Youth Offending Teams, Fire and Rescue, Health and Local Authorities.

In response to the duty Cheshire has established both strategic and operation boards for serious violence that report into the Local Criminal Justice Board. These boards will bring together partners from across policing, local government, fire and rescue, probation, youth offending and health, as well as the custodial estate and education, to deliver the Serious Violence Duty in Cheshire, and ensure that responses across the county are consistent.

The Police and Crime Commissioner for Cheshire has convening responsibility for the duty and associated grant spend.

The Serious Violence Strategy for Cheshire will cover a five-year period, with annual reviews to reflect on progress against planned outcomes and to update delivery plans against emerging trends.

Our definition of serious violence

The duty enables the partnership to determine what constitutes serious violence in Cheshire based on the impact upon the victim and community, prevalence, and maximum penalties imposed. In taking a public health approach our definition is informed by the World Health Organisation definition of violence.

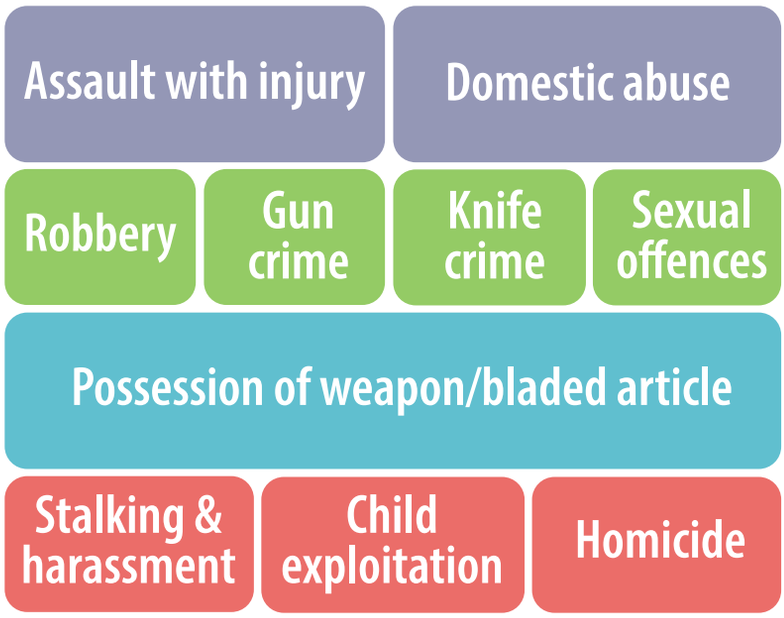
World Health Organisation - World Report on violence and health (2020)

"Violence is the intentional use of physical force or power, threatened or actual, against oneself, another person, or against a group or community, that either results in or has a high likelihood of resulting in injury, death psychological harm, maldevelopment, or deprivation.



Serious violence is a broad term that typically incorporates those crime types that result in significant physical or psychological harm to the victim. However, we recognise that we must also consider offending that drives violence within our communities and the impact of exposure to this violence on individuals.

By describing some crime as serious and others not, does not diminish the impact felt by victims, but a broader definition of serious violence allows the partnership to focus on the risk factors affecting our community. As a result of wider partnership consultation and data analysis, the following crime types and descriptors were identified as defining serious violence in Cheshire.



[1] Assault with Injury includes – any offence which results in the victim suffering bodily injury, including serious injury. This cateogry includes physical abuse of children.

Under the Domestic Abuse Act 2021, domestic abuse is defined as any incident or pattern of incidents between those aged 16 or over who are personally connect to each other. This includes people who are, or have previously been married, in civil partnerships or in relationships; or have a child together; or are relatives. Abuse can be a single incident, but it is more often a pattern of behaviours, and it takes many forms including: physical or sexual abuse, violent or threatening behaviour, controlling or coercive behaviour, economic abuse, psychological, emotional, or orther abuse.

The Domestic Abuse Act 2021 recognises children under the age of 18 years who see, or hear, or experience the effects of abuse, as a victims of domestic abuse if they are related or have a parental relationship to the adult victim or perpetrator of the abuse.
Sexual offences include rape and sexual assaults.

Child exploitation includes sexual and criminal exploitation of young people

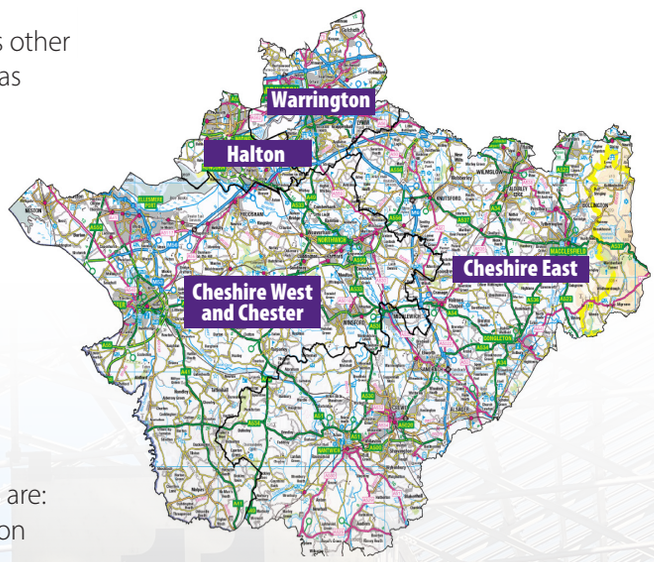
Stalking is defined as "A pattern of unwanted, fixated and obsessive behaviour which is intrusive and causes fear of violence or serious alarm or distress". Harassment is defined as a form of unwanted and unwelcome repeated conduct that causes the victim to feel alarmed, distressed or harassed.

Homicide includes both terms murder and manslaughter which involves causing the death of another human being as is either an intentional act or a reckless or negligent act.

The Cheshire landscape

Cheshire offers a combination of diverse landscapes including beautiful countryside, vibrant towns and cities with excellent transport links. The county's economy is also diverse, with a strong presence in manufacturing, logistics, and technology. With just over one million residents and 500,000 households, Cheshire has seen a significant population increase over the last decade with the average age increasing in rural areas, whilst urban areas, especially in the West of the county, became more youthful.

Although Cheshire is diverse in terms of the age and population it is not as ethnically diverse as other areas in England with 92% of residents identifying as 'White British' with the next common group ' All Other White' and 'Asian / Asian British'.



Cheshire is divided into four unitary authorities, which are responsible for delivering local government services to residents and businesses within their respective areas. These four authorities are: Cheshire East, Cheshire West, Warrington, and Halton as illustrated.

Despite being a largely affluent area Cheshire does experience pockets of deprivation which is most notable in the north of the county.

The assessment of deprivation combines several measures which include Income, Employment, Education, Skills & Training, Health and Disability, Crime, Barriers to Housing and Services, and Living Environment.

Like many other regions across the country COVID-19 and the cost-of-living crisis has had a significant impact on our Cheshire population, affecting various aspects of life including health, education, the economy and mental well-being. The full extent and repercussions are still unfolding as levels of crime and need for support services rise across the county.



What do we know about serious violence in Cheshire?

The most prevalent form of serious violence in Cheshire is stalking and harassment, 14.36 offences per 1,000 of the population, followed by violence with injury, sexual offences, rape, possession of weapons, robbery, and homicide. The rates of stalking and harassment, rape, and sexual offences in Cheshire are above the national average.

A key finding of the Cheshire 2023 Serious Violence Strategic Needs Assessment is the prevalence of domestic abuse as a form and driver of serious violence. While stalking and harassment is the most prevalent form of serious violence in Cheshire, just over a third of incidents (34%) have domestic abuse flags recorded. The extent of domestic abuse flags in other serious violence incidents is also high: 32% of violence with injury incidents, almost 30% of rapes, and 26% of knife crimes had a domestic abuse qualifier recorded.

34% **of incidents have domestic abuse flags recorded**

> The prevalence of crime in Cheshire is often below the national levels and this is currently the case with offences of robbery, assault with injury, possession of offensive weapon and homicide.

The strategic needs assessment further revealed the extent to which serious violence affects children and young people. Amongst all forms of serious violence explored in the strategic needs assessment, children, and young people under eighteen appear as prominent amongst the victim and offender cohorts for possession of weapon offences and knife crime incidents. Low proportions of sexual offences, robbery, knife crime and perpetrators had age data recorded, however tentative findings show that a large proportion of these offenders are as young as 10-15 years old.

The prevalence of crime in Cheshire is often below the national levels and this is currently the case with offences of robbery, assault with injury, possession of offensive weapon and homicide.

We have however witnessed increases in recorded crime across some of the serious violence crime types in the last twelve months. Some of this can be attributed to increases returning to pre Covid levels but we must also take account of the increasing policing activity to target those that harm, with a particular focus on domestic abuse and possession of a knife. The partnership has also worked collectively to improve the trust and confidence of people who have been affected by crime and serious violence to encourage reporting of crime.



Stategic Needs Assessment

Who?

25-29 year olds committed the highest number of violent/knife and sexual offences

78% of perpetrators of knife crime were aged under 24

The largest proportion of stalking/harassment and sexual offences were committed by ex-partners, acquaintances or family members

41% of sexual assault victims were aged between 10-15

What?

Homicide
Homicide rates in Cheshire remain one of the lowest in the country

Rape
Domestic abuse features in **30%** of rape, stalking and harassment offences

Offensive weapons
Majority of offenders identified as male between **16-19** and **25-49** years old

Domestic abuse
One in three Violence with Injury offences had a domestic abuse flag

Youth related violent crime
10% of sexual offences, robbery, possession of weapons and violence with injury were flagged as **youth related.**
73% of the youth justice cohort have committed violent offences

Assault with injury
11% rise in assault with injury
27% of ambulance emergency call outs were flagged as 'Assaults and Violence'

Domestic abuse
One in three Violence with Injury offences had a domestic abuse flag

Why?

Education
50% under youth justice supervision had experienced some form of school exclusion

Deprivation
Parts of the county amongst the **10%** most deprived areas in the country

Trauma
Up to **73%** of the young offenders had been victims of violence prior to own offending

Deprivation
Deprivation has worsened with higher levels of children living in **income deprived families**

Education
Persistent absences, exclusions and pupil enrolments with one or more suspensions have all increased over the last academic year

Substance misuse
Alcohol flags were recorded in **9-15%** of violence with injury, rape, sexual offences & knife crime

Substance misuse
Substance misuse needs have been identified amongst both **serious violence offenders and looked after children**

Our vision, our mission, our principles

Our vision → Cheshire is a place where communities feel safe from crime, violence and the fear of violent crime.

Our mission → To work in partnership to prevent and reduce serious violence across Cheshire.

Our principles → Our priorities and activity of work will be underpinned by the following principles so that a multi-agency whole system approach is embedded within the partnership.



Principles

Principle 1: Taking a public health approach

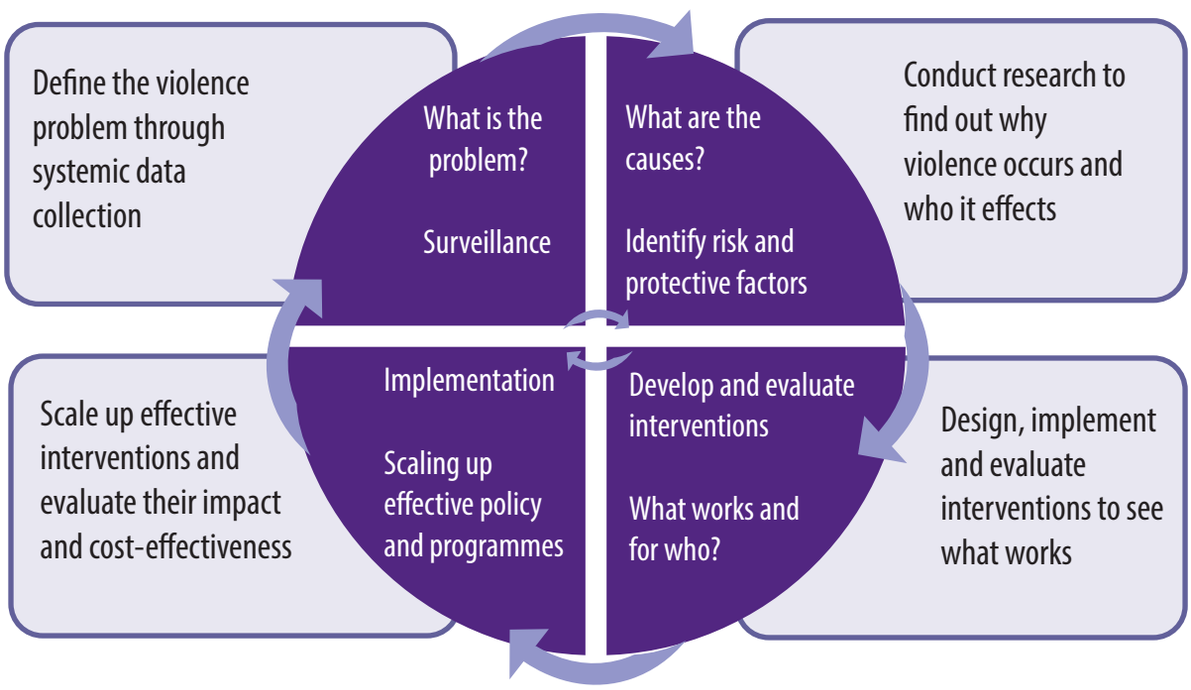
Partners in Cheshire are committed to adopting a public health approach to respond to serious violence. This means taking a whole-system multi-agency approach to preventing serious violence that is place-based, evidence-led and incorporates public health principles.

A public health approach is underpinned by five key partnership ways of working:

Collaboration | **Co-production** | **Co-operation on data and intelligence sharing**

Gathering community consensus | **Developing a counter-narrative response**

The public health process involves a cyclical process comprising four stages of work.
The steps of a public health approach.[2]



[2] World Health Organisation (W.H.O) *The steps of a public health approach. www.who.int/groups/violence-prevention-alliance/approach*

When identifying risk, it is essential that we understand both the risk and protective factors that can impact on the prevalence of violence within our Cheshire communities. In doing so we are in a far better position to prevent violence by increasing those protective factors and ensuring our strategies and interventions support the implementation of both universal and targeted interventions.

The preventable nature of violence makes it well-suited for a public health approach, with a strong emphasis on addressing the "causes of causes." Furthermore, violence shares many characteristics with other significant public health issues. There are wide disparities in the prevalence of violence, with the most deprived communities suffering the greatest effects.

Additionally, violence has a cyclical nature, meaning that "much like many infections, violence is contagious."[3] For instance, there is a strong understanding that exposure to violence in childhood (along with other adverse childhood experiences) increases the risk of an individual becoming involved in violence later in life as either a victim or perpetrator.

Risk factors	Protective factors
• Access to and misuse of alcohol • Access to and misuse of firearms • Poor access to services • Gangs and local drug supply • Insufficient infastructure to meet young people's needs • Cultural and social norms supportive of violence • Discrimination • Deprivation • Bullying	• Accessible, positive community spaces • Economic security • Safe and stable housing • Access to services/sports/hobbies/ social support • Regular maintenance of schools, parks, business and residential areas • Healthy community culture that rejects violence
• Parental depression • Violence in the family • Parental substance misuse/mental health issues • Low parental involvement in children's activities • Poor parenting/discipline • Adverse childhood experiences • Poverty • Unemployment	• Positive parent/youth relationship • Appropriate parent discipline • Relationships with prosocial non-violent peers • Stable home environment • Positive relationships with teachers and caring adults • Children feeling connected to their school • Parental interest in child's education and social relationships
• Persistent school absences/exclusion • Pro offending attitude • Unemployment • Impulsivity • Early involvement in substance misuse • Neuro development disorder • Brain injury • Social isolation • Low intelligence/education attainment	• Emotional regulation • Healthy problem solving • School readiness • Educational attainment • Good communication

[3] Gary Slutkin - Violence Is a Contagious Disease: Theory and Practice in the USA and Abroad, 2020.

In adopting a public health approach, the partnership will focus on early intervention as well as targeted diversionary activity and address the root causes of serious violence. A public health approach promotes commissioning based on evidence of what works, ensuring that the local response to serious violence is sustainable in the longer term.

Principle 2: Trauma informed practice

People who experience significant trauma, particularly in their early years, are at a higher risk of suffering with poor mental health and emotional wellbeing. They are also more likely to adopt anti-social and self-harming behaviours, including, poor school attendance, exclusion, and involvement in serious violence.

Partnership work to prevent and reduce serious violence in Cheshire will be underpinned by a trauma-informed approach. A trauma-informed approach to serious violence work is one which realises that trauma can affect individuals, groups, and communities, recognises the signs, symptoms and widespread impact of trauma, and prevents re-traumatisation.

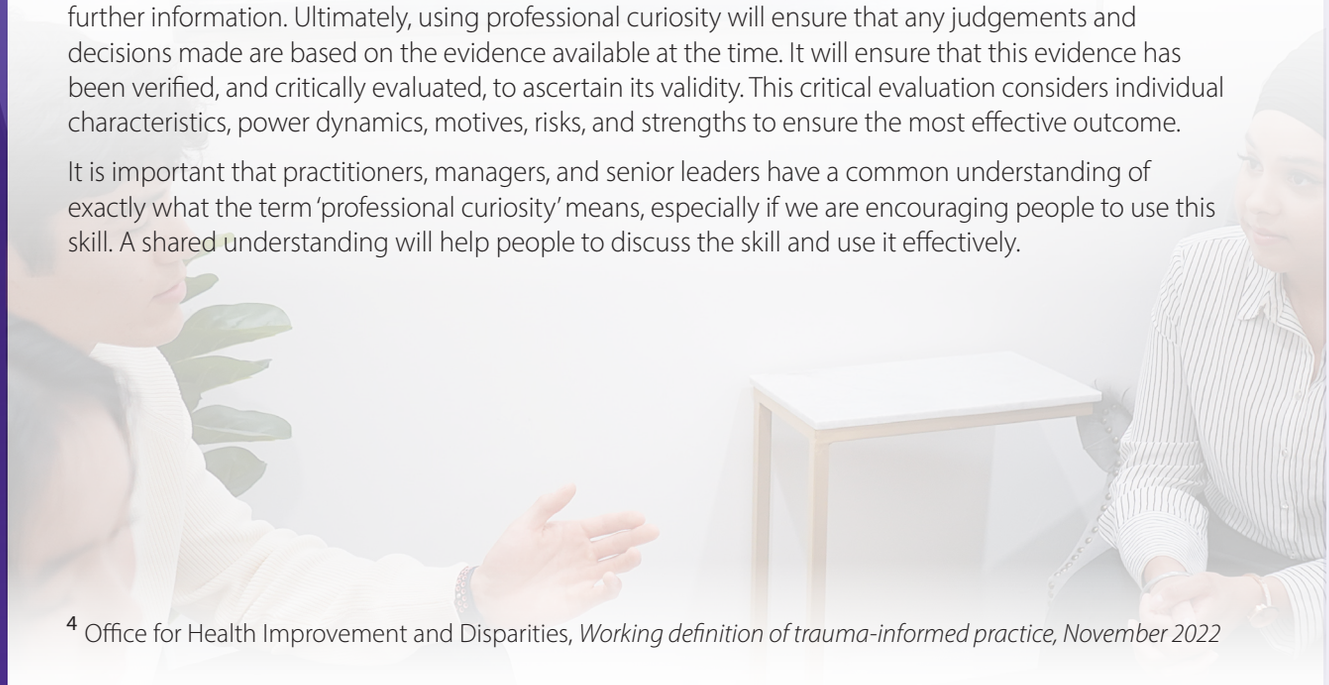
The key principles of trauma-informed practice are:[4]

- Safety
- Trust
- Choice
- Collaboration
- Empowerment
- Cultural consideration

Principle 3: Professional curiosity

Professional curiosity is commonly associated with not accepting information at face value and seeking further information. Ultimately, using professional curiosity will ensure that any judgements and decisions made are based on the evidence available at the time. It will ensure that this evidence has been verified, and critically evaluated, to ascertain its validity. This critical evaluation considers individual characteristics, power dynamics, motives, risks, and strengths to ensure the most effective outcome.

It is important that practitioners, managers, and senior leaders have a common understanding of exactly what the term 'professional curiosity' means, especially if we are encouraging people to use this skill. A shared understanding will help people to discuss the skill and use it effectively.



[4] Office for Health Improvement and Disparities, *Working definition of trauma-informed practice, November 2022*

Principle 4: Evidence and data-led

The partnership is committed to adopting an evidence led approach that is underpinned by effective data sharing and robust analysis. By sharing data and information in a timely and effective way we will strengthen our analytical capability to enable robust analysis and ensure a holistic understanding of local need and demand. This understanding will be used to review the current strategy and inform future priorities for the partnership.

With this focus, the partnership will look to achieve the following outcomes:

- Information sharing is timely, proactive and supported by information sharing agreements where required, enabling a responsive and evidence-based approach.
- Data capability and functionality are enhanced and improved, including in the monitoring and evaluation of ongoing work.
- The available evidence base on 'what works' to reduce serious violence is used to influence commissioning decisions under priority areas identified. Where no or limited evidence exists, the Partnership will evaluate interventions in order to contribute to the evidence base, incorporating learning of evaluations into future commissioning.
- Learning from reviews undertaken locally, including Domestic Homicide Reviews, Safeguarding Adult Reviews and Local Safeguarding Practice Reviews are used to inform the continuous development of the local response. Examples of effective working and good practice are shared throughout the partnership.
- Data gaps and disparities identified in the strategic needs assessment are remedied, to allow a more sophisticated picture of emerging trends to be built. These gaps centre particularly around geographic and demographic data.
- Data is used to support the early identification of target cohorts - especially of young people at risk of involvement in serious violence.
- Disproportionality at both the individual, community and societal levels are measured effectively and understood.
- Data and evidence are gathered relating to additional cohorts over-represented amongst those affected by serious violence. This includes Adults at Risk and older people. Understanding of the characteristics of these groups and their vulnerabilities will allow expansion of targeted cohorts in future iterations of the strategy, if necessary.



Principle 5: Strategic Alignment and Sustainability

There are a number of partnerships, groups and forums in Cheshire that have strategic overlap with the priorities and target outcomes set out in this strategy to prevent and reduce serious violence. To deliver a cohesive and effective response to serious violence locally, the partnership will seek opportunities to collaborate with these aligned groups and workstreams - identifying areas of overlap, opportunities for joint commissioning and delivery, and minimising the risk of duplication.

All local authority Community Safety Partnerships (CSPs) include serious violence as a priority area, with focuses on the '4 Ps' approach (Prevent, Pursue, Protect, Prepare) to tackling serious violence. This strategy will be used to support the CSPs in working to prevent people from causing serious violence, detect and prosecute those causing serious violence, recognise the causes of serious violence and reduce risk, stop serious violence and mitigate its impact.

Local partnerships in Cheshire are also working to combat substance misuse and Violence Against Women and Girls (VAWG). These areas have relevance to work to prevent and reduce serious violence offending. For example, work around VAWG focuses on pursuing those who initiate VAWG, making the night-time economy and public places safer for women and girls, preventing VAWG through educational initiatives, supporting victims of stalking and harassment, and reducing the fear of VAWG locally. Objectives to combat substance misuse include preventing people from being harmed by drugs or alcohol, improving information sharing between partners on at-risk individuals, working to make the night-time economy safer, disrupting drug markets, and improving rehabilitation and treatment service provision.

This strategy has also sought to align its performance framework with relevant national and local performance measures and expectations. Notably we have cross referenced and incorporated much of the criteria set out by Government inspectors when evaluating the multi-agency response to serious youth violence.



All local authority Community Safety Partnerships (CPSs) include serious violence as a priority area, with focuses on the '4 P's' approach: **Prevent, Pursue, Protect, Prepare.**

Principle 6: Community Coproduction and Lived Experience

Coproduction is about a collaborative approach to service delivery and involves communities, service users, professionals, and other stakeholders working together as equal partners to design, deliver, and evaluate services. It is based on the principle that service users are not passive recipients of services but rather active participants with valuable insights that can contribute to the improvement of services leading to better outcomes.

Together as a partnership we will build on existing engagement opportunities to ensure that co-production is representative of our communities, is accessible to everyone and creates a culture of openness and honesty that shapes our understanding of serious violence across Cheshire.

Our Strategic Priorities

Our strategic priorities are intended to set out long-term and immediate plans to prevent and reduce serious violence in Cheshire. The immediate actions being targeted to address the areas of need and vulnerability highlighted in the 2023 strategic needs assessment. These action plans will be reviewed on an annual basis and flex with any changing needs or emerging trends within our evidence base.

Long term priorities

1) Prevention

2) Workforce Development

3) Intelligence-led Practice and Commissioning

Immediate actions

1) Early intervention and targeted preventative work to support children at risk of involvement in serious violence

2) Targeted work with perpetrators and victims to prevent and reduce domestic abuse-related serious violence



Long term priorities

Priority 1: Prevention

A public health approach requires a whole system approach that looks to prevention to build and increase the resilience of our communities which reduces the risk of individuals becoming a victim or perpetrator of serious violence. This also includes taking effective enforcement action through the criminal justice system against those that harm others and seize opportunities to protect and prevent violence.

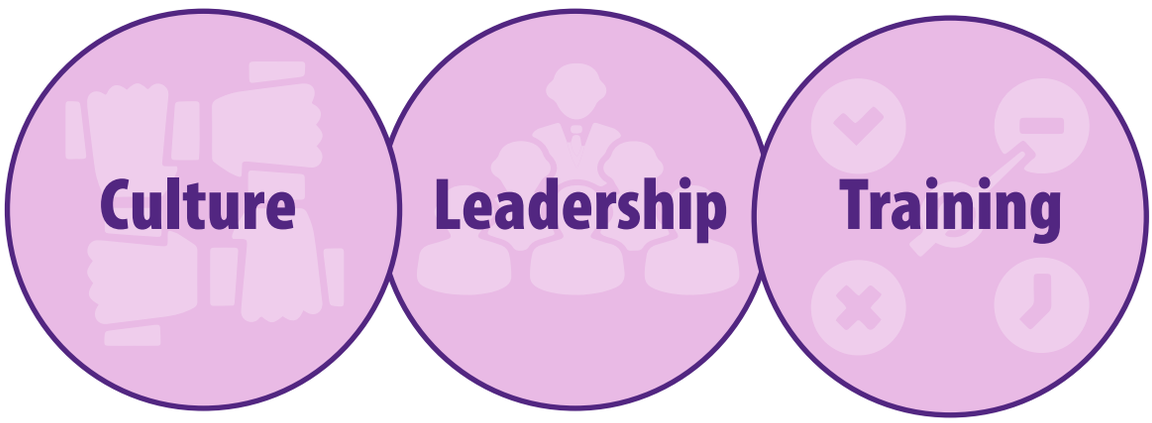
There are three distinct areas of prevention which are listed below.

Primary, secondary and tertiary interventions		
Primary prevention	**Primary prevention** focuses on a 'low risk' cohort of individuals with no or few risk factors. Prevention (universal) services aim to stop risk factors emerging or promote protective factors to mitigate against them.	**For example,** healthy relationships sessions in schools.
Secondary prevention	**Secondary prevention** focuses on an 'at risk' cohort of individuals who have started to become involved in violence or with a number of risk factors that might lead to violence. Early intervention (targeted) services address risk factors and prevent an emerging problem from becoming established.	**For example,** one-to-one support for at risk groups.
Tertiary prevention	**Tertiary prevention** focuses on a 'high risk' cohort of individuals currently in the criminal justice system or at risk of offending in the short to medium term. Reduction (targeted) services manage an ongoing problem to reduce harm, focusing on reducing offending and reoffending within a known cohort.	**For example,** recovery support for victims, and perpetrator programmes.

The partnership is committed to taking a whole-family approach. An important part of this is listening to, and engaging with, children, young people and their families to understand their experiences and the impact that actions and interventions coordinated by the partnership have made. The partnership will use this insight to continuously improve service provision and delivery.

Priority 2- Workforce Development

We plan to promote and facilitate opportunities for our workforce to work and train in partnership. Our approach to workforce development will be to promote greater collaboration and help develop a wider understanding of the contribution each agency can make to the prevention of serious violence. Supported by the senior leaders of each specified agency we hope to develop a workforce culture that is trauma informed, professionally curious and evidence led.



Priority 3- Intelligence-led practice and commissioning

The partnership is committed to sharing data and information in a timely way and strengthening its analytical capability to enable robust analysis and ensure a holistic understanding of local need and demand. This understanding will be used to review the current strategy and inform future priorities for the partnership.

We will seek to promote and use evidence based best practice to reduce serious violence across the partnership and in informing our commissioning decisions. Investment in analytical capability that can support qualitative evaluation of inventions is essential to the partnerships understanding of serious violence. Coupled with feedback of those with lived experience it will allow us to adopt the EMMIE framework (Effect, Mechanism, Moderators, Implementation, and Economic Cost) 4 to measure our success, impact and decision making on future commissioning.

To support this approach, we will develop a centralised mapping functionality, to improve partners awareness of existing provision and look to improve signposting and referral to relevant programmes, interventions, and support.

We also plan to invest in resources to improve data understanding and analysis to support practice and inform commissioning decisions.

[5] Introducing EMMIE: an evidence rating scale to encourage mixed-method crime prevention synthesis reviews. Johnson, Tilley and Bowers 2015.

Immediate actions

Action 1: Early intervention and targeted preventative work to support children at risk of involvement in serious violence

Children are disproportionately represented in the victim and offender cohorts for serious violence offences in Cheshire. The largest proportion of robbery, arson and sexual offence perpetrators were in the 10-15 age cohort. Almost three quarters of the local youth justice cohort have committed a violence against the person offence, followed by 17.6% who committed a sexual offence.

Children are targeted for criminal and sexual exploitation by organised crime groups, including county lines activity. There has been a significant increase in the identification of county lines networks in Cheshire from 2021/22 to 2022/23, and a significant proportion of these networks were linked to child criminal exploitation.

Early exposure to violence, childhood deprivation and neglect can have an impact on children's vulnerability to involvement in serious violence. Modelling undertaken by the Children's Commissioner estimates that over 2000 children in Cheshire are affected by factors including domestic abuse, parental substance misuse and mental health problems. Early intervention and targeted prevention activity around known risk and vulnerability factors for children's involvement in serious violence supports a public health approach. Consistent engagement with education is widely considered to be a protective factor against children's involvement in serious violence and the transition from primary to secondary school is a key opportunity for intervention.



How will we achieve this?

Ensure that more young people in Cheshire receive universal educational and preventative initiatives related to serious violence.

Universal service provision and primary intervention activity is integral to a public health approach to serious violence. This means taking a proportionate approach to ensuring that children and young people in Cheshire are taught about the harms, risks and consequences of serious violence - even before they are identified as 'at-risk'. The existing and planned activity set out below - including work with schools and local authorities - will drive progress against this outcome.

Improve the timeliness of identification and referral to support for children and young people who are at risk of involvement in serious violence.

Early identification of children and young people who are at risk of involvement in serious violence is important to ensure they are connected with the appropriate support in a timely way. Existing and planned partnership activity to improve early identification and ensure preventative interventions are available for children and young people who are at risk is key to achieving this outcome. These interventions will incorporate a whole-family approach.

Support children and young people who have experienced serious violence, either as perpetrators or victims, through targeted interventions.

The partnership will ensure that preventative and early intervention work for children and young people forms part of a suite of responses, with tertiary interventions and support in place for children at the acute end of offending (for example, county lines involvement and use of offensive weapons). Tertiary prevention is designed to support high-risk children and young people who are already known to the criminal justice system, and prevent re-offending, and / or involvement in more serious violence offending.

Improve the participation and engagement of children, young people and their families in the work of the partnership.

The partnership will proactively seek out and listen to the voices of children, young people and their families to understand their concerns around and experience of serious violence and what support or activity they would find most beneficial. This insight will be incorporated into reviews of the partnership strategy and response to serious violence to ensure that commissioning meets local need.

Some of the current activity and delivery under this priority across Cheshire is detailed in the following tables.

Primary
School educational programme on respect and interpersonal skills- to tackle domestic abuse and violence against women and girls.
RESET programme education teenagers of the early warning signs of domestic abuse.
'Designing out' crime: street lighting, safety buses, CCTV, alcohol licensing.
School education awareness sessions including topics on serious youth violence, including gangs, knife crime, exploitation, drugs and alcohol, anti-social behaviour and internet safety.
Trauma informed training.
OPCC Youth Commission is a forum for gathering the lived experience of young people.
There is an active Youth Senate (15 youth senators and two members of Youth Parliament) who can support initiatives and consultations.



Secondary
Cheshire Fire and Rescue youth outreach in hot spot areas.
Local authorities use Early Help Assessments to indentify children who might be at risk and connect them with appropriate support.
Local authorities provide a variety of programmes and activities jointly with the police - including boxing, dance workshops, climbing, football, and other sporting activities. These interventions are designed to move at-risk children and young people away from involvement in criminality through engagement in positive activities.
'Kops and Kids' - encourages children to play sports whilst making connections with police officers, and Volunteer Police Cadets which gives young people aged 15-17 the opportunity to get an insight into community policing.
Cheshire Fire and Rescue - Prince's Trust Team Programme, a personal development course for young people aged 16 to 25 who are not in education, employment, or training (NEET). The programme seeks to improve young people's employability, confidence, teamwork skills and self-esteem, whilst gaining a nationally recognised qualification.
Cheshire West and Chester -Pilot early intervention programme to prevent exclusion.
Troubled family scheme
Work is also ongoing through the Youth Justice Service to capture the voices of young people.

Tertiary
The Youth Justice Service takes referrals for 1:1 work with children and young people on their 'Turnaround Programme' as part of the wider Diversion scheme.
Cheshire-wide diversion project is working to reduce the number of Juvenile First Time Entrants to the criminal justice system and incorporates health assessment and psychosocial intervention as an alternative to prosecution.
Complex Youths is a service which works with children with developing patterns of criminality, often linked to County Lines.
Queensberry services offer interventions for the high-risk cohort (including mentoring programmes), referred through schools or contextual safeguarding teams.
The Fire and Rescue Targeted Youth Support Team works with children involved in anti-social behaviour. The Team works with primary and secondary school-aged children referred by their schools, often known to police or support services, and supports them to engage with education.
The police, youth justice service and local authorities work together to put in place restorative justice programmes for young people.
Local authorities gather service user feedback of commissioned services, and have Youth Cabinets

Action 2: Targeted work with victims and perpetrators to prevent and reduce domestic abuse related serious violence

Rates of serious violence related to domestic abuse are high in Cheshire. Stalking and harassment represents the largest proportion of serious violence offences in Cheshire, and over one third of stalking and harassment incidents had a domestic abuse flag recorded. Notably, 32% of violence with injury incidents, almost 30% of rapes, and 26% of knife crimes also had a domestic abuse flag recorded.

The largest proportion of stalking and harassment offenders are male, and are most frequently aged between 35 to 49, followed by 25 to 34. Victims are most often female, and aged 35 to 49, followed by 25 to 34. A significant number of people supported by children's social care and early help services are victims or perpetrators of domestic abuse.

Childhood experiences of witnessing domestic abuse can create a cycle of generational abuse and trauma within families. Research shows that children living in households with an adult experiencing mental ill-health or domestic abuse were more likely to be a victim of crime, experience violent crime, and be a victim of bullying.

How will we achieve this?

The actions and desired outcomes under this priority are focused on preventing reoffending and reducing the harm caused by domestic abuse perpetrators - particularly repeat and serial perpetrators - as well as reducing the harm experienced by victims. These outcomes will be met through existing perpetrator interventions and risk management, and whole family support for victims.

Manage risk and reduce harm associated with serial domestic abuse perpetrators through appropriate support and preventative interventions.

Activity will be focused on managing the risk and reducing the harm caused by serial domestic abuse perpetrators. A key part of meeting this outcome is improving identification of the target cohort, ensuring effective risk management, and facilitating engagement in interventions and support.

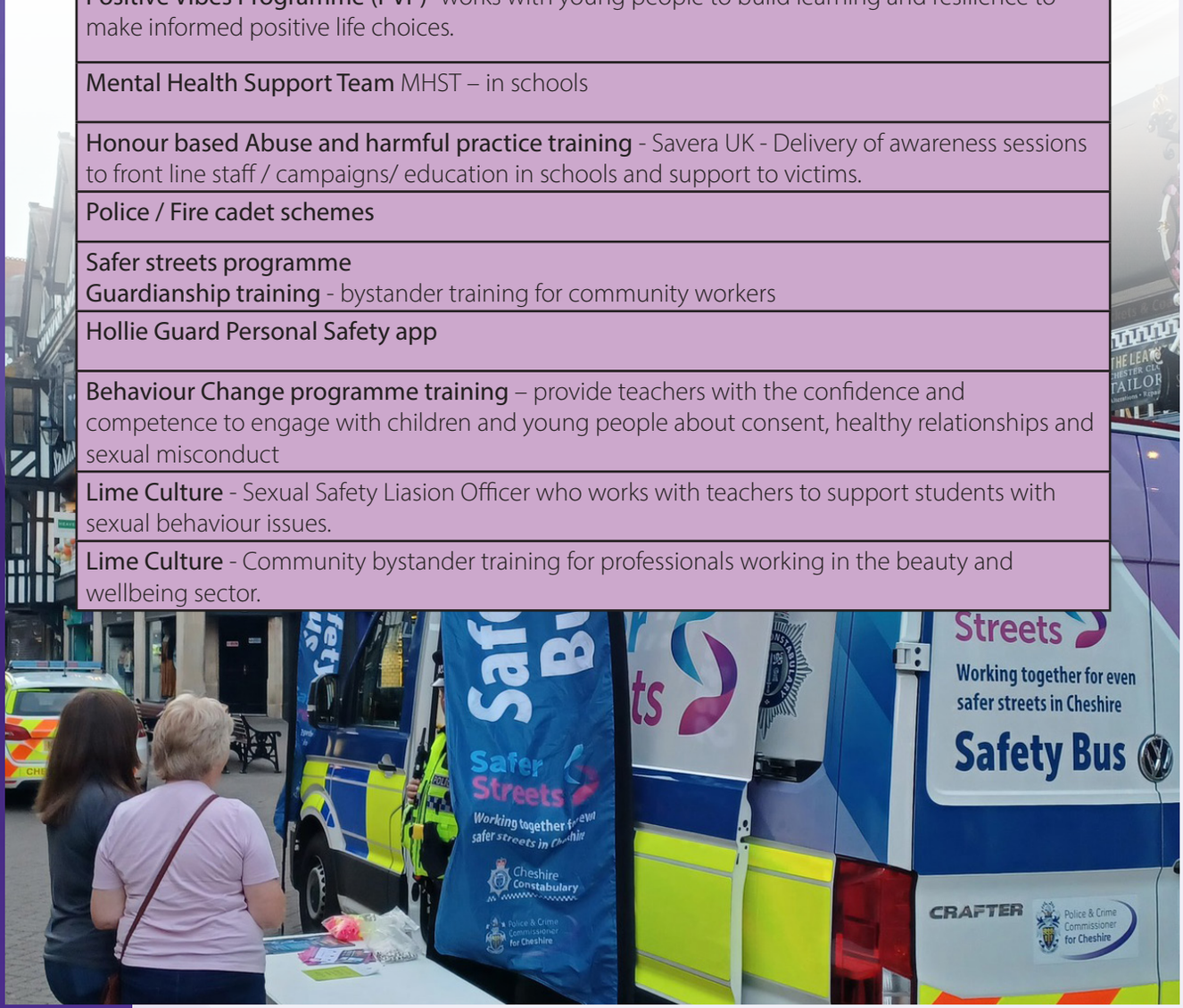
Ensure tailored and accessible support is available for victims of domestic abuse, including children and young people.

The provision of accessible and tailored support for victims of domestic abuse will be focused on harm reduction and in particular reducing repeat victimisation. Interventions take a whole family approach, which encourages practitioners to look at the whole family wellbeing in the context of domestic abuse. Work is ongoing to improve awareness of the signs, risk factors and harms associated with domestic abuse, to encourage reporting and ensure victims are connected with support.

[7] Office for National Statistics, Childhood vulnerability to victimisation in England and Wales: year ending March 2017 to year ending March 2019. 2020

Some of the current activity and delivery under this priority across Cheshire is deailed below.

Primary
Safe and Together training for professionals, focuses on developing the understanding of coercive control on children and promotes a 'whole family' approach in addressing domestic abuse.
Spotlight Project - youth programme of events for young people
School education programme – school education programme delivered by Perception theatre company, focusing on knife crime, exploitation, anti-social behaviour, and online crime. vulnerability
Warrington Youth Zone – Warrington, purpose-built youth centre offering a range of activities for young people ranging from sports, activities, music.
Healing Together Programme - provides emotional support to young people affected by DA.
Positive Vibes Programme (PVP) -works with young people to build learning and resilience to make informed positive life choices.
Mental Health Support Team MHST – in schools
Honour based Abuse and harmful practice training - Savera UK - Delivery of awareness sessions to front line staff / campaigns/ education in schools and support to victims.
Police / Fire cadet schemes
Safer streets programme **Guardianship training** - bystander training for community workers
Hollie Guard Personal Safety app
Behaviour Change programme training – provide teachers with the confidence and competence to engage with children and young people about consent, healthy relationships and sexual misconduct
Lime Culture - Sexual Safety Liasion Officer who works with teachers to support students with sexual behaviour issues.
Lime Culture - Community bystander training for professionals working in the beauty and wellbeing sector.



Secondary
RESET - Child to Parent domestic violence behaviour change programme, which encourages young people to adopt healthy relationship behaviours.
Engage – Whole family domestic abuse programme including support, behaviour change and parenting programme.
Remedi provides a full-time young victim practitioner via their Got Your Back Programme.
The National Centre for Domestic Violence – free domestic abuse and violence emergency legal protectio.
Open the Door campaign aims to raise awareness about the signs of domestic abuse, how to support a loved one, and how to get support.
Serial domestic abuse co-ordinators – Police officers targeting high harm perpetrators.
The Safe Lives model used in Warrington incorporates a whole person approach. Specific programmes provided in Warrington include young people victim advocate champions, child-parent violence advocates, therapeutic interventions, and emotional support for young victims of domestic abuse.
Vulnerability and Safeguarding Team in police call centre offering immediate first line support for vulnerable victims.
Cheshire Fire - Targeted youth support and Princes Trust programme – improves skills, confidence, and education / employment engagement.

Tertiary
HMPPS deliver domestic abuse perpetrator programmes and 1::1 offender management.
My CWA (formerly Cheshrie Without Abuse) provides the Cautioning and Relationship Abuse (CARA) programme. An early intervention tool targeting perpetrators in the criminal justice system. **Custody suite intervention to perpetrators** via workers situated alongside custody staff.
Multi-Agency Public Protection Arrangements (MAPPA) are in place to assess and manage risk posed by violent and sexual offenders.
PSS (Person Shaped Support) Turnaround - supports women who have offended access a whole range of practical and emotional support to help break down any barriers to reform.
Independent Domestic Abuse Advisors - within police custody, community and hospital locations in Cheshire supporting victims and perpetrators of domestic abuse.
Drive- Embedded Harmful Behaviour Case Managers - working intensively with high risk/harm perpetrators of domestic abuse who have a child open to Child in Need/ child protection.
Multi-Agency Risk Assessment Conferences (MARAC) - bring together key partners to manage risk and safeguard victims.

Communication Strategy

Our communication will focus on keeping partners and the public informed of the activity taking place to deliver on the priorities and actions detailed in this strategy. We will use internal channels of communications to promote effective dialogue between partners, reduce siloed practice and prevent duplication. We recognise the importance of also having good external channels of communication around the partnership response to serious violence to ensure transparency around actions and priorities. We are committed to:

- Providing a clear and accurate account of serious violence within Cheshire that aims to prevent and reduce serious violence.
- Indentifying opportunities for localised engagement with young people and communities.
- Understand barriers in engagement and make best use of appropriate communication methods to engage communities and stakeholders.
- Adapt and evaluate our communication to check it meets the specific needs of the community.
- Engage partners of specified and relevant authorities to establish and maintain strong community links to secure long term sustainable engagement.



Monitoring and Evaluation

Governance and Scrutiny

The Strategic Serious Violence Reduction Partnership will provide governance and scrutiny of the strategy, its priorities, actions and effectiveness. The partnership will carry out quarterly monitoring of inputs, activities and outputs that will be reported to the Criminal Justice Board and Community Safety Partnerships. The Operational group will be responsible for the co-ordination of varying workstreams that align to the strategic priorities but that may sit within alternate strategic partnerships. Equally we will ensure that the membership of both the strategic and operational group is representative of the relevant and specified authorities, to maximise opportunities for the implementation of the priorities.

All commissioned interventions will be subject to formal evaluation and be subject to review and scrutiny of the Board, with oversight from the Police and Crime Commissioner via the Local Criminal Justice Board on a quarterly basis.



All local authorities have both Children and Adults Safeguarding Boards and a Drug partnership Board.

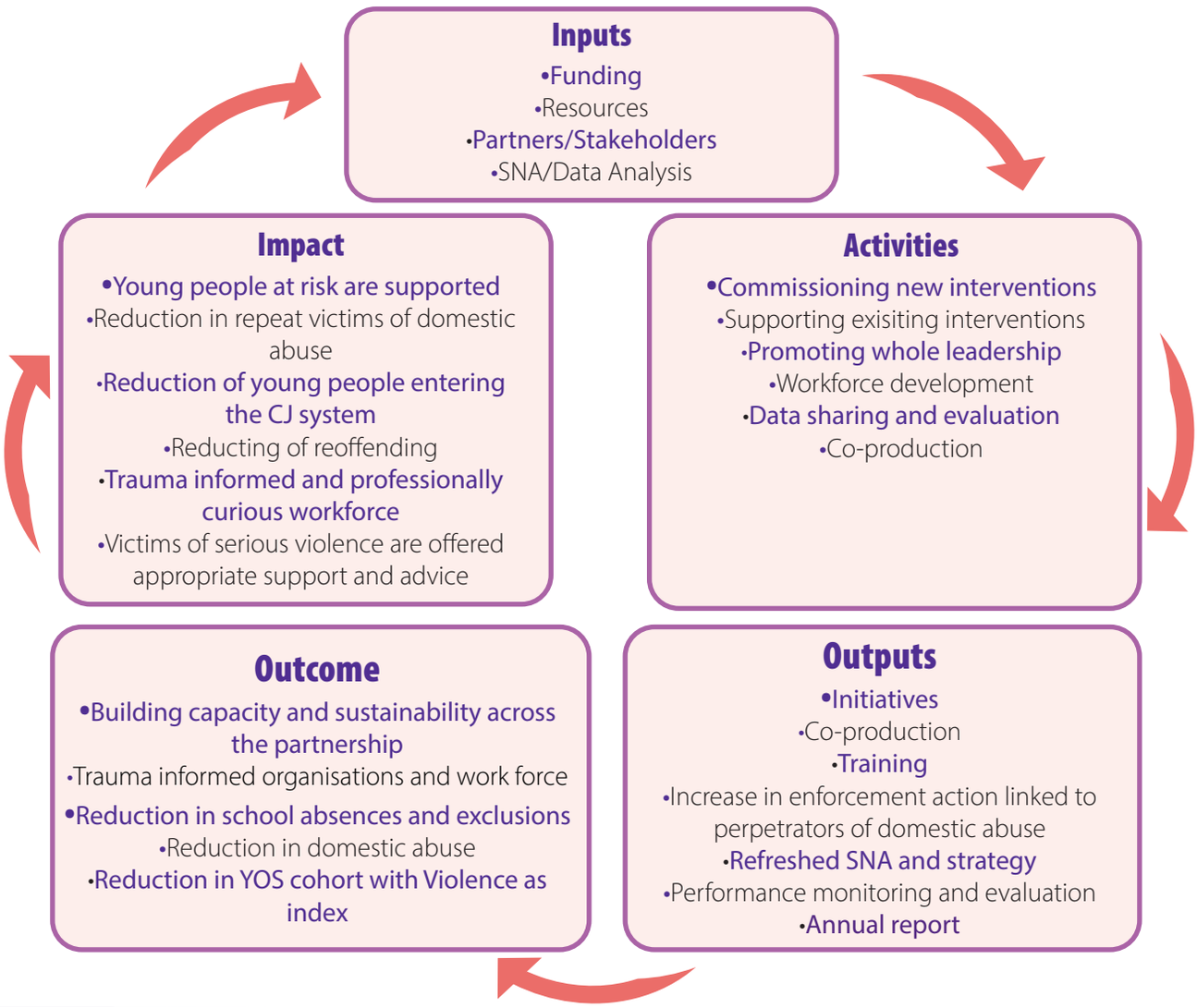
Outcome framework and measures

Under the Serious Violence Duty the Home Office have stipulated the following measures of success:

- A reduction in hospital admissions for assaults with a knife or sharp object.
- A reduction in knife and sharp object enabled serious violence recorded by police.
- A reduction in homicides recorded by the police.

In addition, the partnership will work collaboratively to assess and monitor the impact of our work and to measure out short- and long-term success. These successes will be monitored through our Theory of Change Model and Performance Framework which will allow us to track our progress and activites.

Theory of Change



Strategic priority 1: Prevention (Crime)

Outcome	Measures
Reductions in A&E attendances and admissions for assaults with a knife or sharp object	Number of A&E attendances and admissions for assaults with a knife or sharp object
Reduction in serious violence offending (including knife/ gun -enabled violence and homicides – adults and young people cohorts)	Number of arrests for serious violence
	Number of charges for serious violence
	Number of referrals to YOT
	Severity of crime per 1,000 population in Cheshire (compared to previous years and compared to figures for England and Wales)
	Knife crime figures as defined by the Home Office Annual Data Requirement
	Gun crime figures as defined by the Home Office Annual Data Requirement
Reduction in serious violence reoffending (including knife-enabled violence and homicides	Number of repeated arrests for serious violence
	Number of repeated charges for serious violence
	Number of repeated convictions for serious violence
Decrease in (reported/known) knife or sharp object carrying	Qualitative and quantitative data (e.g., programme information, surveys, interviews, reported knife carrying, community perceptions, number of recorded crimes for carrying a knife/ weapon
	% of children that have carried a knife (e.g., Trading Standards survey)
Reduction in serious organised groups in Cheshire	Number of (known) organised groups (e.g., police Organised Crime Group Map data linked to specific crime types – i.e., reductions and disruptions of groups related to the drivers of serious violence, linked to existing Home Office returns data)

Outcome	Measures
Reductions in repeat domestic abuse and violence demand	Number of police call outs for DVA for programme participants
	Number of arrests for DVA
	Number of charges for DVA
	Number of convictions for DVA
Increase in referrals to DA programmes	Numbers of people who complete DA programmes.
Reduced child to parent domestic abuse / violence	Number of reported incidents
	Number of child and families engaged with targeted interventions.
	Parents self-report, child self-reports
Impact of high harm, high risk domestic abuse SDAP programme.	Number of interventions recorded by SDAP co-ordinators.
Increase in feelings of support for victims	Qualitative data (e.g., programme information, surveys, interviews, focus groups
Increased feelings of safety (at home and in neighbourhoods)	Qualitative and quantitative data (e.g., programme information, surveys, interviews, reported crime, community perceptions
Successful community reintegration from prison	Reoffending data
	Offender accommodation status
	Offender employment status
	Offender substance misuse support / engagement
Reduction in youth anti-social behaviour/ youth offending and unnecessarily criminalising children	Number of youth anti-social behaviour incidents / report
	Number of recorded offences
	Number of first-time entrants in the criminal justice system
	Number of Out Of Court Disposals for young people
Agencies work together to identify children who are at risk of, or affected by, serious youth violence, including children who are exploited. They intervene to reduce risk and provide support for children; they effectively monitor the impact of interventions so that risk is reduced	Number of children identified
	Number of interventions delivered
	Number of risk / protective factors: professional judgements

Outcome	Measures
Cases of serious youth violence and exploitation are investigated effectively. The safeguarding needs of all children are addressed	Measures to be agreed with Partners
Increase in access to and engagement with therapeutic approaches (cognitive, behavioural, social or psychosocial) for young people at greatest risk of becoming involved or already involved in violence	Number of therapeutic programmes and other interventions, number of people engaged, programme data, interviews capturing young people's experiences, (e.g., professional response, use of support materials, family and child experience of support)
	Further measures to be agreed
Increase in restorative support for people involved in violence	Number of restorative programmes, number of people engaged, programme data, interviews capturing people's experiences
Reduction in child negative behaviours	Number of young people successfully completed a mentor programme

Strategic priority 1: Prevention (Education)

Outcome	Measures
Schools/education providers have effective systems to identify children at risk of, or subject to, serious youth violence and/or exploitation and children who are missing from school	Evidence of effective systems to identify children at risk within schools /education
	Timeliness of referrals to appropriate support, early help, or children's social care
Schools/education providers work to raise awareness and understanding of the risks of serious youth violence and exploitation	Qualitative and quantitative data (e.g., interviews, focus groups, surveys, multi-agency data)

Strategic priority 1: Prevention (Health)

Outcome	Measures
Improvements in mental health, physical health, wellbeing, and quality of life	Estimated prevalence of mental health disorders in children and young people: % population aged 5-16
	School pupils with social, emotional, and mental health needs: % of schools with social, emotional, and mental health needs (persons, primary / secondary school age)
	Numbers of hospital admissions for mental health conditions in 0–17-year-olds (e.g., Public Health Outcomes Framework data and child health profile)
	Number of hospital admissions as a result of self-harm
	Number of hospital admissions caused by unintentional and deliberate injuries in children (ages 0-4 and 0-14) and young people (age 15-24) (e.g., Public Health Outcomes Framework data and child health profile)
	Number of court ordered mental health treatment requirements
Reductions in substance 'misuse' and alcohol issues	Hospital admissions for substance 'misuse' (alcohol, drugs- illicit and non-illicit substances)
	Hospital admission episodes for alcohol specific conditions
	Numbers of children / young people / adults with unmet substance misuse needs
	Numbers in engaged with substance misuse services
	Number of drug and/or alcohol court ordered treatment requirements
Identification of young people living in households with DA, MH, Substance misuse, and ensuring suitable support is provided	Indentification measures to be agreed with partners
	Number of interventions available
	Number of young people engaged with intervention

Outcome	Measures
Minimise the impact of deprivation for children in at risk families	Children in low-income families
	Availability of activity programmes for children
Health practitioners, including those in ambulance services respond to the immediate needs of children presenting with injuries that may indicate they are victims of, or at risk of, serious youth violence	Number and timeliness of referrals from health practitioners to multiagency partners

Strategic priority 1: Prevention (Education and employment)

Outcome	Measures
Increased access to education and training opportunities	Numbers of people in education and training, education data, self-reports, specific programme data
Increased engagement in education and training opportunities	16–17-year-olds not in education, employment, or training (NEET) or whose activity is not known (persons 16-17 years)
	Qualitative data (e.g., programme data; interviews)
	Numbers of young people successfully completing Princes Trust programme.
Improved child school attendance	16–17-year-olds not in education, employment or training (NEET) or whose activity is not known (persons 16-17 years)
	Local schools' data; programme participant data
Partners work together to reduce school and higher education exclusions	Secondary school fixed period exclusions: rate per 100 pupils (persons, secondary school age)
	Fixed period exclusions due to persistent disruptive behaviour: rate per 100 pupils (persons, secondary school age)
	Primary school fixed period exclusions: rate per 100 pupils (persons, secondary school age)
	Persistent absentees and number of permanent exclusions

Strategic priority 2: Workforce development

Outcome	Measures
Increased application of a trauma informed and child centred approach	Numbers of professionals receiving trauma informed training.
Professionally curious culture and workforce	Number of staff trained by organisation
	Case file audit
	Professional survey, focus groups or interviews
Improved recognition and knowledge of trauma and how it can affect people differently	Training feedback / professional / public survey
Improved support to those disclosing trauma	Lived experience qualitative feedback, number of people who feel better supported to disclose
Improved professional confidence in identifying and supporting people who have experienced trauma	Professional survey, focus groups or interviews
Reductions in re-traumatisation	Lived experience and professional perspectives
Improved service from lived experience perspective	Lived experience – young people / adults and professional perspectives
Assessments show that the experiences, strengths and needs of children are well understood. Strengths and risks within the family and address risk to, and the protective capacity of, other children, including siblings and peers	Strength based training completed by professionals. Case file audit – for risk / protective factors. Multiagency response
	Case file audit – for risk / protective factors. Multiagency response
Assessments are timely, include contributions from all relevant agencies and consider extra-familial harm, including risks online	Timeliness of assessment
	Case file audit – for risk / protective factors.
Children's views are clearly recorded and central to a multi-agency response	Qualitative data / Case file audit
Effective support to professionals exposed to trauma	Professional feedback (quantitative and qualitative, e.g., through surveys, focus groups and interviews

Outcome	Measures
Improved trust and respectful relationships between 'service users' and professionals	Lived experience and professional survey data
Increase / improvements in quality of interagency working	Qualitative and quantitative data (e.g., interviews, focus groups with professionals, case records, programme data)
Increased knowledge of support services (for public and professionals)	Qualitative and quantitative data (e.g., interviews, focus groups and programme data)

Strategic priority 3: Intelligence-led and practice Commissioning

Outcome	Measures
Partners target resources on prevention and early intervention, using evidence-based approaches. This includes work with the community, businesses, education providers, parents, and children	Number of commissioned interventions across the partnership
	Evidence of use and understanding of the Youth Endowment Fund and other evidence-based tools to inform commissioning decisions across all partnership groups
Partners share and analyse information effectively	Quality and timeliness of multiagency information sharing
	Use of multi-agency data analysis and audits/ reviews
Partners understand: the prevalence of serious youth violence the localities where children may be at risk; the demographics of perpetrators and victims (including issues of disproportionality such as ethnicity, disability, or gender); and the experiences of children	Qualitative partner data relating to demographics
	Use of multi-agency data analysis
	Qualitative feedback, questionnaires, focus groups, surveys of young people and professionals
Leaders and managers share information and intelligence to inform decisions about partners' interventions in places and spaces	Number of effective data sharing agreements across the partnership
	Professional feedback, surveys, focus groups

Outcome	Measures
Relevant partners are involved and understand the aim of interventions and the intended outcomes	Evidence of alignment of priorities and funding
	Partnership involvement in review of SVD priorities and commissioned interventions
Children, places, and spaces are safer and meets the need of the community	Qualitative data, lived experience feedback, surveys
Partners evaluate interventions and use that learning to continually improve	Evidence of intervention evaluation data



Stay in touch

www.cheshire-pcc.gov.uk

pcc@cheshire.police.uk

@CheshirePCC

01606 364000

Office of the Police and Crime Commissioner
Clemonds Hey, Oakmere Road
Winsford, Cheshire CW7 2UA

John Dwyer Police & Crime Commissioner for Cheshire

Cheshire Constabulary

Cheshire Fire & Rescue Service

NHS Cheshire and Merseyside

Probation Service

HALTON BOROUGH COUNCIL

WARRINGTON Borough Council

Cheshire West and Chester

Cheshire East Council