	Manchester JTAI Serious Violence Action Plan				
	(November 2023)				
Ref	What needs to improve/ACTION	What will the impact be and how will we know	Evidence of progress	Lead Agency/Officer and Timescale	
1. How	effectively the arrangements for the monit	toring and evaluation of serious violend	ce support the partnership in imp	lementing its strategy.	
1.1	Develop an evaluation framework that includes feedback from young people and scorecard to monitor the progress and impact of the Serious Violence Strategy.	Informed decision making through a dynamic response to serious violence that measures both experience and outcomes for children affected.	Clear performance and assurance arrangements to measure progress against key milestones and impact of Serious Violence Strategy	Sam Stabler - Community Safety Partnership (CSP) via the Multi-Agency Serious Violence Board, and Greater Manchester Violence Reduction Unit May 2024	
1.2	Ensure that evaluation of effectiveness is incorporated within routine interactions with CYP across the Partnership, using engagement mechanisms such as the Youth Participation Framework	The views of CYP inform evaluation of contacts/interventions that services have with them which will drive up effectiveness of work to support them in achieving outcomes.	Young people's views/feedback are routinely used alongside performance reporting.	All agencies with the Community Safety Partnership. (Assured by the MSP) April 2024	
1.3	Increase use of Youth Participatory models of engagement with young people	The voices of children/young people whose voices are less well heard will be amplified and involved in decision making and are confident self-advocates.	Agencies can provide examples of how a youth participatory approach is embedded in practice.	All agencies with the CSP April 2024	

^{2.} How well the strong strategic intent to address the disproportionate impact of serious violence and criminal exploitation on children from some ethnic backgrounds and those with special educational needs and/or disabilities (SEND) has been translated into positive change for children.

2.1	EHCP are used to inform multi agency child in need, child protection or my safety plan, and clearly identify the vulnerability, education and health need to be addressed in the plan (See also Action 3.1)	Partners will collaborate effectively so that any barriers are removed in order that CYP are supported in attending school and achieving expected outcomes, including progression to Education, Employment or Training at post-16. This includes children with identified SEND needs, those with an EHCP and children who may be affected by disproportionality.	For all children known to Children's social care with issues regarding Serious Violence who have an EHCP, there is evidence that the plan identifies the child's specific need and vulnerability to the risk of serious violence and this is incorporated in the child in need, child protection or my safety plan	Education/Health/CSC May 2024
			Audit conducted by Complex Safeguarding Team	Complex Safeguarding Team/SEG June 2024
Cross Ref Action	See also Action 3.1 (Review practice/operational guidance)			
2.2	Evaluate the current data and audit of 100 children's experiences and develop a regular cycle.	A continually deepening understanding of the experiences of children from global majority communities to continually inform practice and strategic planning.	Initial results will provide a baseline against which progress and impact can be measured.	Community Safety Partnership Feb 2024 and annually thereafter
2.3	Child Centred Policing Strategy and Manchester Plan to have a crosscutting regard to children's cultural, religious and ethnic identity.	It is expected there will be a reduction in the over-representation of black and mixed heritage within the criminal justice system.	Regular reporting and assurance arrangements via Manchester's governance arrangements (CSP and MSP).	Chris Downey, Superintendent GMP (Dates as in CCPS)
2.4	MSP to commission training for multi agencies partners on culturally competent safeguarding children and adults practice. An expectation of this training will be that partners would	An increase in knowledge, skills and abilities of staff across the partnership and city.	Impact Survey completed to evaluate effective of training in improving agency practice	Ruth Speight, Co Chair, MSP Learning & Improvement Group Training commissioned

3. The s	implement learning into their own agencies specificity and thoroughness of plans, and I	now effectively they are implemented,	MSP Section 11 audit includes a standard to demonstrate cultural competency practice	February 2024 Training included on training offer calendar April 2024 children get the right help at the
3.1	Childrens services, along with relevant partners, to review practice and operational guidance that supports specificity and thoroughness of plans for children.	Greater consistency in planning with children and their families including the needs of brothers/sisters and contribution of all agencies and decision making using the QAF, sampling and supervision	Routine reporting arrangements within CSC.	Sean McKendrick/Relevant partners from Health, GMP, Education May 2024
Cross Ref Action	See also Action 2.1 (EHCPs)			
	consistently professionals look beyond the group of children, such as brothers, sisters a		e safety or welfare there may be o	concerns, and consider risks to the
Cross Ref Action	See Action 3.1 (Review practice/operational guidance)			
5. The	consistency with which key information is	recorded and shared between partner	s to enable effective decision-ma	king
Cross Ref Action	See Action 3.1 (Review practice/operational guidance)			
5.1	All agencies to ensure that their information sharing practices meets the requirements of the MSP Information Sharing Protocol.	Information is shared appropriately between partners where there are safeguarding concerns and throughout support	Agencies to take any actions (e.g dissemination of protocol, advice to managers/practitioners) that ensure staff are aware of	MSP (Via Executives and L&I subgroup)

from s	MSP Information Sharing Agreement is shared across the partnership through the L&I subgroup for discussion at multi agency safeguarding forum and implementation across agencies.			
6.1	7 Minute Briefing is produced and shared across Partnership about what is on offer around serious violence	There is increased awareness across the partnership and practitioners and managers have a clearer view of what is out there/available, knowledge and awareness.	7 MB is produced and shared across the partnership	CSP/MSP/VRU February 2024
6.2	In areas where clarification may increase understanding, communication is produced and shared across the partnership setting out CAMHS – capacity and clinical pathways (Health) (See also Action 6.3) Engage (GMP)	Agencies and practitioners working with CYP at risk from serious violence or criminal exploitation and who need support with well-being and mental health have a clear understanding of expectations, referral times and processes, pathways and outcomes.	Health, GMP (and any others identified where clarification would be helpful) produce and disseminate clear, concise guidance which is shared across partnership via the MSP Information Bulletin	Health, GMP February 2024

	Thrive (Health)			
6.3	Child and Adolescent Mental Health Service (CAMHS) will develop a communication strategy and deliver a communication campaign, with development Jan – Mar 2024 and delivery from April and ongoing,	There is increased awareness across the partnership and practitioners and managers have a clearer view of what is out there/available, knowledge and awareness.	Communication strategy developed and delivered	Al Ford Director of CAMHS Manchester University NHS Foundation Trust (MFT) Strategy developed March 2024 Strategy communicated/delivered from: April 2024
6.4	Develop a pilot project to enable Neurodevelopmental Risk stratification - prioritizing vulnerable groups e.g., young people connected to the Youth Justice system.	Prioritization of vulnerable groups to receive therapeutic treatment as part of the child and adolescent mental health services (CAMHS)	Neurodevelopmental Risk stratification priorities vulnerable groups	Al Ford Director of CAMHS Manchester University NHS Foundation Trust (MFT) Pilot developed April 2024 Roll out/Offer Launch, starting: April 2024
6.5	Develop a waiting well (while you wait) offer for children and young people awaiting a CAMHS appointment.	Additional service offer whilst children and young people await CAMHS appointment	Additional support offer is provided whilst children and young people wait for core offer	Al Ford Director of CAMHS Manchester University NHS Foundation Trust (MFT) April 2024