Southport Inquiry Phase 2

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Greater Manchester Violence Reduction Unit

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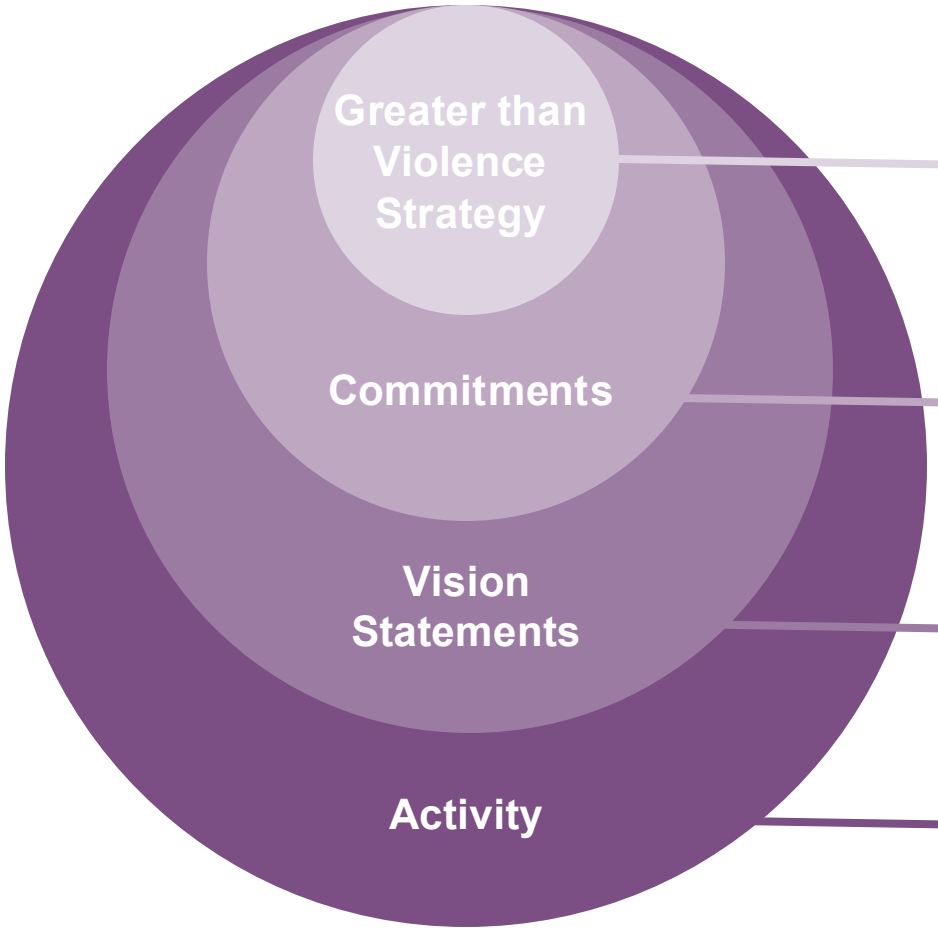
Greater Manchester Violence Reduction Unit (VRU)



The Greater than Violence Strategy rests on two pillars
PREVENTION and RESPONSE
and underpinned by five core principles: to be **community-led**; to prioritise **early and timely intervention**; **partnerships for change**; to promote **equality, equity and justice**; and to be a **trauma-responsive city region**.

Embedded within the VRS is a set of **commitments** that describe how we will work together to deliver against these five principles.

Our 12 vision statements reflect the VRU''s implementation priorities over the next three years. These are priority outcomes that we have defined in consultation with our statutory and Voluntary, Community and Social Enterprise (VCSE) partners.

VRU activity has been shaped by these 12 vision statements.

Principles	Vision Statements
Partnerships for Change	1. Violence prevention and response is a key priority for our partners and communities. 2. We work together to identify problems, and design and deliver solutions. 3. We make decisions and assign resource innovatively, based on international, national and local intelligence.
Community-Led	4. The voices of those with lived experience, families and communities are at the heart of our decision making. 5. Our city region's VCFSE sector is strong and sustained, with a stable funding model and strong foundations for future delivery.
Equality, Equity and Justice	6. Children and young people of all abilities and backgrounds feel safe, valued and motivated about their future. 7. Key outcomes demonstrate a reduction in violence across diverse communities in all parts of the city region. 8. Fair treatment for all children and young people in the criminal justice system.
Early and Timely Intervention	9. Local services across GM are flexible and respond to the needs and assets of our children, young people and their families at the earliest possible opportunity. 10. Education settings across GM work in partnership with the VRU to provide programs that keep children and young people actively and positively engaged in their education. 11. We have a good understanding of digital engagement and exploit opportunities to respond to the needs of young people, communities and partners.
Trauma Informed City Region	12. We have embedded behavioural and cultural change across organisations and within our communities that responds to trauma and childhood adversity.

GMVRU's role: strategic leadership, oversight and coordination across Greater Manchester

The VRU provides the city-region convening function for serious violence prevention, linking local delivery to shared strategy, evidence and governance.

What this means in practice

GMVRU brings together relevant agencies around a whole-system approach, supports shared information and targeted interventions, and links local prevention activity to Greater Than Violence strategy principles.

How local authorities fit

Local authorities remain central delivery and safeguarding partners. The VRU's added role is to support alignment, coherence and learning across ten places while preserving local flexibility.

Lessons from GMVRU's public health approach to prevention, early intervention and public protection

Serious violence is preventable when partners act earlier, address root causes and connect prevention with safeguarding and public protection.

Primary prevention
Change norms
Universal activity
Prevent violence before it starts

→

Secondary prevention
Reduce risk
Targeted early intervention
De-escalate before harm escalates

→

Tertiary prevention

Interrupt violence
Intensive response
Support rehabilitation and protection

Start with causes, not incidents

Our approach focuses on underlying risk factors and protective factors. This supports earlier, more proportionate action before risk becomes entrenched.

Build around place and community

Community voice, lived experience and VCFSE insight should sit alongside statutory data, so interventions are credible, trusted and shaped by local context.

Link prevention to protection

Early intervention should connect clearly to safeguarding, policing, mental health, youth justice, Prevent or Channel routes where thresholds are met.

GMVRU's public health approach offers a practical model for community safety and violence reduction: it combines strategic oversight, data-led targeting, community-led prevention and clear escalation routes. Our added value is not only funding individual interventions, but aligning people, evidence, governance and delivery around earlier, shared action and establishing a common language to our approach.

How GMVRU helps partners identify risk earlier and coordinate practical prevention

The GM approach moves from intelligence to community-designed solutions, making prevention practical across local partnerships.

1 Understand need

Use local (SNA), national and international intelligence, including MMU analysis of violence hotspots.

→

2 Identify assets and gaps

Work with communities to understand strengths, challenges, issues and opportunities.

→

3 Design with communities

Put lived experience, families, communities and VCFSE partners at the heart of decision making.

→

4 Coordinate support

Align interventions, education, health, safeguarding, youth services and trusted community organisations.

Relevant intervention portfolio

Hospital Navigators; Primary School Transitions; Community-Led Programmes; Communication and Engagement; Evaluation; Community Sport; Parent and Carers Support; ACE and Trauma; Continued LA Funding; NEET Pathways , Targeted Inclusion

The VRU is not a single constituted organisation; it is a collaborative system.

GMVRU supports partners by making prevention practical: better data, stronger local intelligence, community trust, and commissioned activity that can reach children and young people before crisis.

Investment and delivery

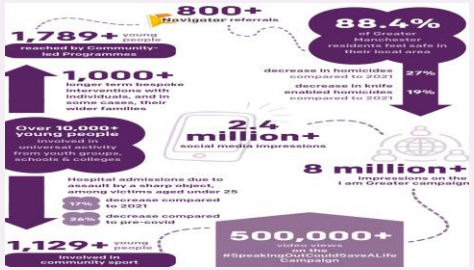
GM A+E Navigators

BLOCKS - Primary School Transitions Programme

Community-Led Programmes

Youth Voice Led Campaigns

Intensive Mentoring - STEER



Research, Data and Evaluation

Community Sport

Youth Civic Leadership Programme

Skills for Living

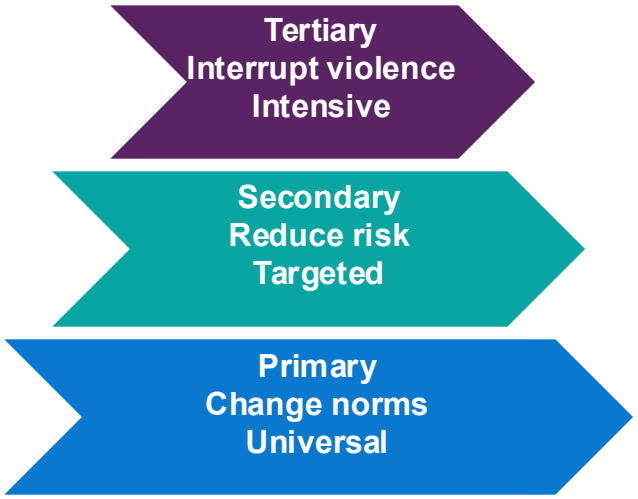
Parent and Carer Support 'PACS'

Devolved Funding to Local Authorities

Prevention Partnership Panels: pre-threshold support within a wider prevention system

Prevention Partnerships sit within the Young Futures Programme and alongside the 'Serious Violence Duty' and VRUs, not outside them.

Public health approach to tackling violence



Early signs of vulnerability → **Prevention Partnership Panel** → **Tailored support plan** → **Monitor and adjust** → **Escalate when thresholds met**

What PPPs can strengthen

Multi-agency information sharing, early help, local support, child-centred planning, family-inclusive practice, and clearer links to safeguarding, exploitation and support pathways.

What PPPs should not become

A standalone high-risk VFI forum. Potential violence-fixated risk needs escalation routes into statutory safeguarding, policing, mental health, youth justice, MAPPA, Prevent or Channel where thresholds are met.

PPPs are a secondary prevention mechanism within the wider GM public health model, with clear escalation for high-risk cases.

Additional considerations for potential violence-fixated risk

Caveats about referral routes, threshold filters, partner attendance and training.

Early vulnerability identified → **Discretionary referral route works** → **Right partners at panel** → **Back story and behaviours explored** → **Support or escalation agreed**

Terminology Caution

There is no agreed definition of a violence-fixated individual, so identification can be subjective. Panels can identify risk early, but referral filters generally mean lower-level risk individuals enter panels, while those already open to services, frequently suspects, or linked to high-impact offending may be excluded.

Practical implication for PPPs

A panel referral is strongest where education, health, children's services and other engaged partners are present, allowing partners to explore background, ongoing behaviours and the right intervention. Without the right partners, opportunities may be missed.

Risks to address

Low-level concerns without a recorded crime may not reach referral. Low-level concerns with a recorded crime may reach panel but lack a full background picture. Concerns labelled as violence-fixated may be escalated to Police or Prevent, but where not deemed serious enough may fall through gaps.

Recommended strengthening

Frame PPPs as suitable for early, low-level concerns only if referral routes, discretionary referrals, partner representation, training and escalation pathways are clear. Higher-risk cases may be beyond panel scope and require statutory routes.

DATA CONTEXT

What the latest indicators add to the prevention and public protection narrative for GM

Overall, our serious violence indicators show longer-term reductions or stabilization.

Homicide
Down 27% in the year ending March 2026; lowest rate on record since 1990; below national average and most peer police force areas.

Under 25 victims
Overall downward trend since 2022, although recent monthly variation and small numbers mean changes should be treated with caution.

Knife-enabled homicide
Up 67% in the year ending March 2026, equal to four incidents; still relatively low compared with the previous four years.

A&E attendances due to assault

Fell rapidly from the formation of the VRU to 2023, then broadly stabilised. The latest year shows a 3% rise, not statistically significant, and rates remain 20% lower than four years prior. For ages 10 to 24, rates were broadly unchanged in the latest year at -1%, not statistically significant, and remain 15% lower than four years ago.

Hospital admissions due to assault

Similarly fell markedly from the formation of the VRU to 2023, then broadly stabilised. Year ending March 2026 rates were up 4% for all ages and down 6% for victims aged 10 to 24, neither statistically significant. Rates remain 18% lower for all ages and 25% lower for victims aged 10 to 24 compared with four years previously.

The overall trend is positive, with sustained reductions in serious violence and key indicators stabilising at lower levels. Although some short-term fluctuations should be treated cautiously, the longer-term picture demonstrates meaningful progress and reinforces the value of the GMVRU sustained public health approach.

Thank you

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