

# Contextual Harm Practice Guidance

Guidance to complete Contextual Harm Risk Matrix Assessment and Planning Tool

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## Introduction

This guidance has been produced to support the practice of Children Social Care's response to Contextual Harm and to support in the completion of the Contextual Harm Matrix. The guidance has taken into account the following areas of the London Child Protection Procedures:

### Concept of Significant Harm

**1.1.6** Sometimes 'significant harm' refers to harm caused by one child to another (which may be a single event or a range of ill treatment) and which is generally referred to as 'peer on peer abuse.'

### Definitions of Child Abuse and Neglect

#### 1.3.3 Emotional Abuse includes:

Exploiting and corrupting children.

**1.3.13 Controlling behaviour is:** a range of acts designed to make a person subordinate and/or dependent by isolating them from sources of support, exploiting their resources and capacities for personal gain, depriving them of the means needed for independence, resistance and escape and regulating their everyday behaviour.

**Coercive behaviour is:** an act or a pattern of acts of assault, threats, humiliation and intimidation or other abuse that is used to harm, punish, or frighten their victim."

In addition Working Together to Safeguard Children has introduced the concept of Contextual Safeguarding which recognises that as well as threats to the welfare of children from within their families, children may be vulnerable to abuse or exploitation from outside their families. These extra-familial threats might arise at school and other educational establishments, from within peer groups, or more widely from within the wider community and/or online. These threats can take a variety of different forms and children can be vulnerable to multiple threats, including: exploitation by criminal gangs and organised crime groups such as county lines; trafficking, online abuse; sexual exploitation and the influences of extremism leading to radicalisation.

The levels of risk in this document are aligned to Merton's Threshold Document (March 2020):

<https://www.mertonscp.org.uk/wp-content/uploads/2020/03/Merton-Threshold-Document-2020.pdf>



Please also refer to the Contextual Harm and Adolescent Safeguarding protocol that outlines how contextual harm is recognised, assessed, included in planning and intervened against within Children's Social Care core processes. This document provides guidance for completing the assessment and planning tool referred to in that protocol.

## Contextual Harm Risk Matrix

The Contextual Harm risk matrix allows for both the young person's presenting needs or experiences of harm to be weighted alongside the context(s) that have the most influence and present the most harm for the young person.

Experiences of harm / presenting needs:

- Coercion / Control
- Running away / Missing
- Sexual health and behaviour
- Offending / violence
- Use of social media
- Substance misuse
- Physical / emotional health

Contexts:

- Places / Spaces
- Peer group / external relationships
- Professional Engagement
- Education
- Family
- Young person

Each is scored and then the overall contextual risk is the combined score. Having them separately scored allows for consideration of where the priorities need to be focused, both in regard to the presenting needs and the contexts.

The Safety Planning section of the tool is focused on the following areas of activity:

- Identify
- Prevent
- Support
- Protect
- Disrupt

The guidance provides a summary of what actions could be undertaken for each of these areas. The actions in regard to identification should be completed as part of the core activity of any assessment and before safety planning but in some situations this may involve direct work, journaling or mapping that needs to be undertaken as part of the ongoing assessment and oversight of risk.

Where the young person has mostly emerging concerns the focus would be expected to be on prevention and support activities. Where there are moderate to significant risks the focus should be on protection and disruption, in addition to prevention and support.

The assessment and safety planning will require good partnership working with not only the young person and family but also their education setting and any services that may currently or previously be involved who would have 'reach' into the contexts of peer groups and places/spaces, such as Catch22 Risk and Resilience Service, Sexual Health services, CAMHS, Youth Justice Team, Safer Merton and Antisocial Behaviour Team.

## Initial areas of the form

### **Summary of concerns/Reason for Assessment:**

Ensure you cover the concerns as to why a contextual harm assessment is being completed. For example, information received that young person is experiencing harm from peers, within the community or at their school. This could look like regular missing, ASB reports, incidents at school, carrying of knives/weapons, fights with peers, sharing of indecent images of other young people, found in unknown location or a combination of any of these.

### **Historical Incidents:**

Historical incidents are important in looking at the timeline of a young person's experiences that in turn can help practitioners to see if current concerns are a part of increasingly worrying concerns, if the incidents or information is increasing in severity, or if behaviour by a young person is mirroring one they may have experienced, for example, the grooming process.

Mapping out historical incidents is also important in looking at previous strategies that have been used to try and address the worries, and if they have been effective. This could look like, over a 12 month period, 3 referrals noted on the young person's file. ASB referral, parents responding positively, case closed. School referral, sharing indecent images, parents engaged, case close. School referral, bringing knife into school, parents engaged, case stepped down to FWBS. These referrals are important to be reviewed in the context of one another in order to assess if the harm that may be occurring outside of the family home is increasing or the young person may be becoming more vulnerable to influences outside the family home.

### **Other Service Involvement:**

Children who have involvement with a number of services may be presenting with a range of complex needs. This is particularly important if there are compounding needs such as substance misuse, education needs, offending and mental health. It will be important to consider each service's existing involvement and plans. The final section of the assessment also considers the ability of professionals to engage the child/young person and who within the network has the trusted relationship with them.

### **NRM Referral:**

National Referral Mechanism (NRM)<sup>1</sup> is a framework for identifying and referring potential victims of modern slavery and ensuring they receive appropriate support. Any young people who you suspect has been trafficked, that is, moved from one location to another for the purpose of exploitation can be referred. NRM referrals should be completed for all young people involved with 'county lines', brought into or moved around the UK for purposes of exploitation, for example cannabis farming, domestic servitude or drug dealing. The Police can refer to NRM so do check if they have referred already.

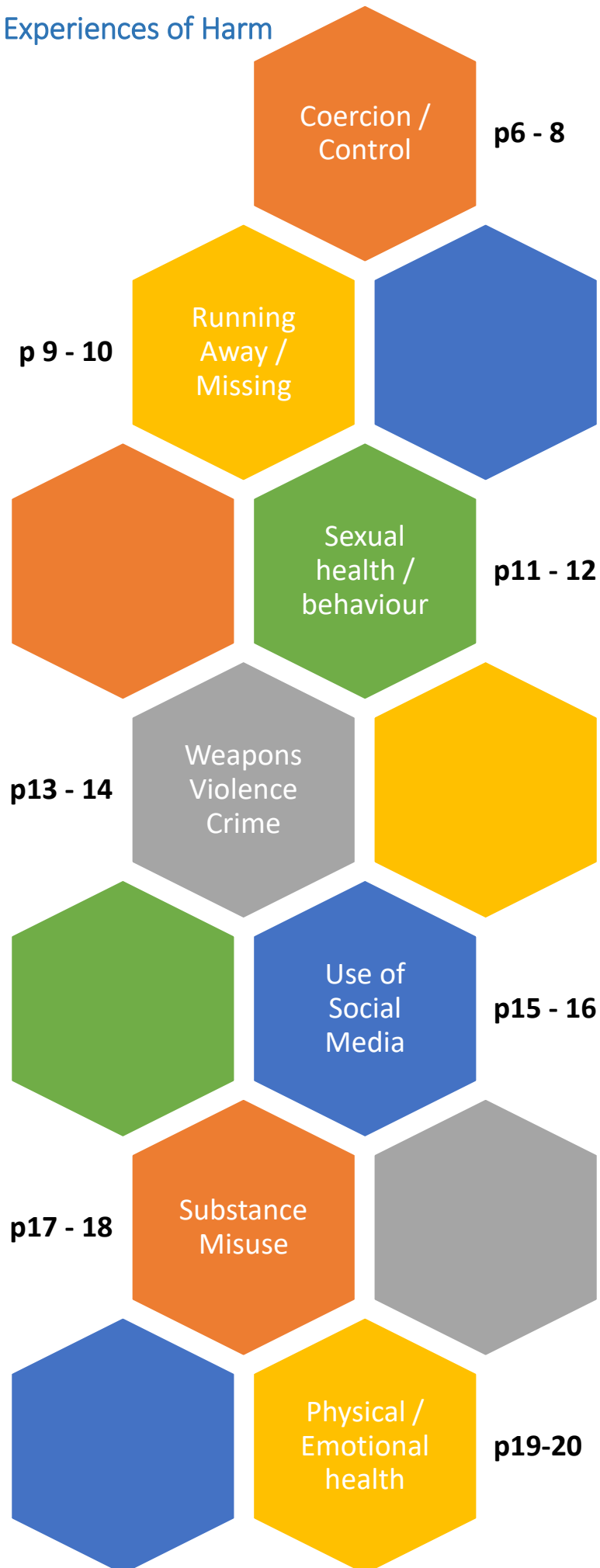
Possible outcomes from NRM referrals include, Reasonable Grounds, Conclusive Grounds, Non-Conclusive Grounds. Victims may not be aware that they are being trafficked or exploited, and may think they have 'consented' to elements of their exploitation, or accepted their situation. If you suspect someone is a victim, you should refer, you do not need to be certain. The agency that reviews the referrals has access to Police information and National Crime Agency intelligence to help inform the decision.

[NRM Referral link](#)

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<sup>1</sup> <https://www.modernslavery.gov.uk/start>

## Presenting Needs / Experiences of Harm



## Coercion/Control

Coercion or control is the highest ranked presenting need due to the entrapment that young people can experience and it can be difficult for young people to see and identify this within their relationships.

**Controlling behaviour is:** a range of acts designed to make a person subordinate and/or dependent by isolating them from sources of support, exploiting their resources and capacities for personal gain, depriving them of the means needed for independence, resistance and escape and regulating their everyday behaviour.

**Coercive behaviour is:** an act or a pattern of acts of assault, threats, humiliation and intimidation or other abuse that is used to harm, punish, or frighten their victim.

It is often the case that children do not perceive themselves to be victims, as they consider they have acted voluntarily. Their behaviour is often a reaction to the trauma / coercion they have experienced and therefore is not voluntary or consenting. It can be very subtle due to the length or type of relationship, thinking particularly around what the exploiter is exploiting the young person for. It is important to acknowledge that a relationship a young person is forming with a potentially abusive person may be meeting an unmet need that the young person has. At times this can make it harder for young people to share the same view as professionals around the relationship and potential harm.

*Young people may say things to you like, 'I wanted to go to earn money', 'I am safe, they aren't like that/it's different with me', 'he/she/they love me' or repeat similar stories as other young people, which is an indicator that they may have been coached.*

### Things to consider:

- Has the child/young person's behaviour changed? Think about potential relationship breakdowns from family/positive influences, change in language or increased / excessive use of social media.
- Is the child/young person hiding things/becoming secretive? Has unexplained gifts or money?
- Has the child/young person formed new relationships/new peer group connections?
- Has the child/young person reported threats towards them? Making and withdrawing allegations
- Are there identified potential groomers of the child?
- Does the young person talk of having 'olders' in a group

### What to do to complete your assessment

- Case discussion to unpick the trauma related behaviour and potential interventions
- Parent/professionals to note changes in young person's behaviour and changes in discussions. Note any increasing anxiety in relation to money, freedom and mobile phone usage.
- Direct work with young person to understand what need the coercive/controlling relationship may be meeting

No Concern 0	Young person has helpful, fair and kind friendships / relationships. Young person's relationships are protective and supportive with no coercion, bullying or control. Young person has regular access to pocket money and family are in stable financial position.
EMERGING 3	Recent change in peer group and/or behaviour within the group has changed. Reduced contact with family/friends. Excessive contact with someone. Language of dealing that indicates coercion by others. Older boyfriend or girlfriend where any imbalance of power unknown. Being approached by others who are looking to potentially exploit and show

	beginnings of a grooming process (eg. Befriending, gifting, enticement). Experiencing or talking about financial difficulties in the family home.
<b>MODERATE</b>  6	Secretive about having a mobile phone or other device, or has more than one. Excessive receipt of phone calls or texts – particularly during professional meetings and if anxious to leave soon after text/call. Limited contact with family/friends. New or expensive possessions which cannot be accounted for. Unexplained access to cash/money. Changes in behaviour or habits. Demanding money from carers. Has similar story to other children ('coached'). Entered country illegally / unable to confirm how arrived / no passport. Links to gang activity involvement. Being found with items that child/young person has been asked to hold for others. Experiencing poverty, debt and financial distress.
<b>SIGNIFICANT</b>  12	The child has experienced such persistent or severe bullying that his/her wellbeing is at risk. Disclosure of or police intelligence in regard to physical/sexual assault followed by withdrawn allegation/reluctant to report. No contact with family/friends. Disappear from system (no contact with support systems). Evidence of relating to organised online activity / coercive adult contact / county lines/gang activity involvement, talks about having debts and an urgent need for money. Reports of hostile acquaintances coming to the door or telephoning/messaging and making threats – or experiencing violence. Reports that child/young person is making threats towards others on behalf of concerning others. Disclosure of or police intelligence in relation to fraud. Evidence of domestic servitude. Forced marriage. Forced isolation from family. When a child experience gross betrayal from someone they depend on, the young person's awareness of harm is significantly reduced.

If there are any concerns that the young person is in a **Domestic Abuse or Violence** relationship with their boyfriend/girlfriend then please review the DASH risk assessment, one is available for young people: <https://safelives.org.uk/node/516>.

The DASH asks if:

[Dash Risk Assessment for young people](#)

- Recent incident resulting in injury
- The victim is frightened and what they are frightened of, any feelings of isolation
- Feelings of depression or suicidal thoughts
- They have or tried to separate from the abuser in the past year
- Conflict of child contact or if they are pregnant or recently had a baby (in 18 months)
- Abuser constantly texts, calls, contacts, follows, stalks or harrases
- Abuse is happening more often or getting worse
- Abuser tries to control everything they do and/or excessively jealous
- Abuse has used weapons or objects to hurt, ever threatened to kill them, ever attempted to strangle / choke / suffocate or drown them
- Abuser does or says things of sexual nature to make them feel bad or that physically hurt them or someone else
- There are other persons who has threatened them or who they're afraid of
- The abuse has hurt someone else or mistreated an animal or family pet
- Any financial issues
- Abuser had problems with drugs, alcohol or mental health leading to problems in life; attempted or threatened suicide; ever broken bail / an injunction or formal agreement or ever been in trouble with the police or has a criminal history

A referral to MARAC is required for any high risk young people aged 16+ and sent to [merton.marac@merton.gov.uk](mailto:merton.marac@merton.gov.uk). For Domestic Abuse support services, please email: [merton.communityidva@victimsupport.org.uk](mailto:merton.communityidva@victimsupport.org.uk) Also use these emails for consultation / advice.

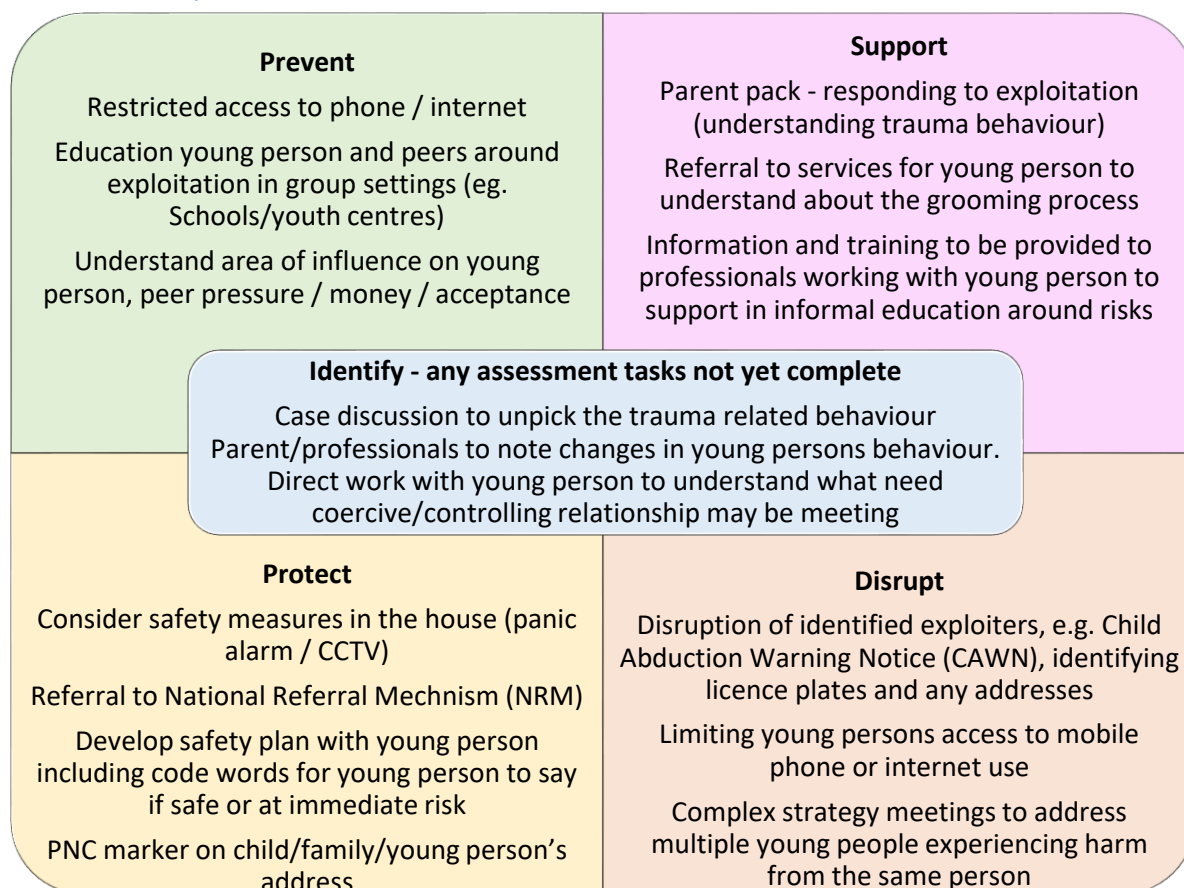
[MARAC referral](#)

[DV/DA support](#)

If there are concerns about **radicalisation or extremist views** then please liaise with the Prevent Lead and undertake any relevant assessments to support that process. Every organisation working with young people has a duty to notify any concerns in regard to radicalisation or extremist risks. According to the London Child Protection Procedures the following thresholds would need to be taken into account:

- Emerging** The child expresses sympathy for ideologies closely linked to violent extremism but is open to other views or loses interest quickly. The child is expressing verbal support for extreme views - the child has espoused racist, sexist, homophobic or other prejudiced views and links these with a religion or ideology.
- Moderate** The child expresses beliefs that extreme violence should be used against people who disrespect their beliefs and values. They've viewed extremist websites and has said s/he shares some of those views but is open about this and can discuss different viewpoints. The child has connections to individuals or groups known to have extreme views.
- Significant** The child supports people travelling to conflict zones for extremist/ violent purposes or with intent to join terrorist groups. The child expresses a generalised non-specific intent to go themselves. There are significant concerns that the child is being groomed for involvement in extremist activities. They are actively concealing internet activity.

*Possible next steps - Coercion/Control*



Also see London Child Protection Procedures (click for link to relevant chapter):

- [Safeguarding Children from Sexual Exploitation](#)
- [Organised and Complex abuse](#)
- [Safeguarding Trafficked and Exploited children](#)



## Running Away/going missing

Running away or going missing can be an indicator of additional worries for a young person outside the family home. There may be familial concerns that act as ‘push’ factors, or there could be ‘pull’ factors whereby a young person is being drawn out of the family home to spaces and locations with fewer protective factors, or groups of young people/adults engaging in harmful behaviour. There may be circumstances where a young person is not reported missing, but there are significant amount of unaccounted for time, for example, truancy from school and not returning home until after 7pm at night. The frequency, duration and any patterns are important to be analysed when assessing missing episodes as this can support in understanding who (*with*), where and when the young person may be experiencing harm.

Information regarding where (including how they got there) and who the young person was with while missing is helpful in understanding the risks for the young person at this time. If there is knowledge surrounding a young person’s friendship group, it also important to see if all young people are missing for the same time periods. The use of Return Home Interviews will assist workers in gathering more information relating to a young person’s missing episode.

### Things to consider:

- Does the child go missing?
- Frequency of missing episodes and length?
- Is the child where they should be in the day?
- Details of missing incidents: timings, reasons, patterns, places and associations whilst missing.
- Do parents / carers report their child missing? If not why?
- Is it safe for them to be where they should be?

### What to do to complete your assessment

- Mapping of friends and network – if possible, addresses / contact numbers
- Develop calendar with young person of weekly activities and map out time spent with positive influences vs worries (Signs of Safety tool)
- Record times of missing episodes to identify pattern
- Identify licence plates of any cars picking up / bringing back

No Concern 0	Comes home on time. Let’s parents / carers know their whereabouts when goes out. Answers their phone when out.
EMERGING 3	Regularly coming home late. Absent without permission, Returning late to care home. Absent from school. Whereabouts often unknown. Single incident of overnight missing
MODERATE 6	Number of episodes of running away, missing from home or missing from school / education or placement. Looking well cared for despite having no known base. Regular breakdowns of care placements due to issues relating to missing or acceptance of boundaries. Unable to give explanations for whereabouts. Missing beyond a Police or Court curfew.
SIGNIFICANT 10	Missing for more than 48 hours. Persistently running away, going Missing from home or care placement and there is a concern about their safety or welfare concerns. Pattern of street homelessness / sofa surfing. Whereabouts often unknown or of significant concern, talks about and/or known to travel to different areas or cities. Currently missing with no contact and other significant risks present. Missing following placement made due to exploitation. Aged 12 years or under.

Possible next steps – Running Away / Missing



Also see London Child Protection Procedures, Part B3 – Chapter 3:

[Children Missing from Home Care and School](#)

## Sexual Health, inappropriate or harmful sexual behaviour

This assessment needs to consider a number of areas in regard to sexual health and behaviour; the sexual health of the individual, their access to sexual health services (this could be an indicator of need as well as a protective self-care factor) and their risk of inappropriate or harmful sexual behaviour.

It is important to always bear in the mind that a young person who is displaying harmful sexual behaviour may also be a victim of sexual abuse themselves.

Things to consider:

- Disclosures made and withdrawn
- Age of consent is 16 years old in UK
- Repeat referrals re: sexualised behaviour. Be mindful regarding the age, and ensuring that this is an age appropriate response.
- Understanding if a young person is accessing pornography, how this is impacting on their normalising of sexual activity and the category of pornography being sought out (eg. Rape fantasy/children).
- Content that is being accessed is impacting on their behaviour and self-identity
- Has the child/young person had multiple sexually transmitted infections?
- Multiple disclosures re: sexual assault/rape and then subsequent withdrawal
- Has the child/young person had a termination or multiple terminations of pregnancies?
- Is the young person displaying other behaviours that could be reflective of a potential grooming process? For example, the young person may be mirroring harmful sexual behaviour they have suffered as part of a grooming process (eg. Humiliation) in order to keep them within another's control. It may also be acted out as part of an initiation.
- Has harmful sexual behaviour occurred within a group? Look at all young people connected to this group and analyse any similarities in behaviours to identify group concerns.
- Who is at risk from the presenting behaviour (consider their age and relationship)

### What to do to assist your assessment

- Genogram and chronology development
- Relationship / eco map
- Trigger mapping
- Consider specialist assessment

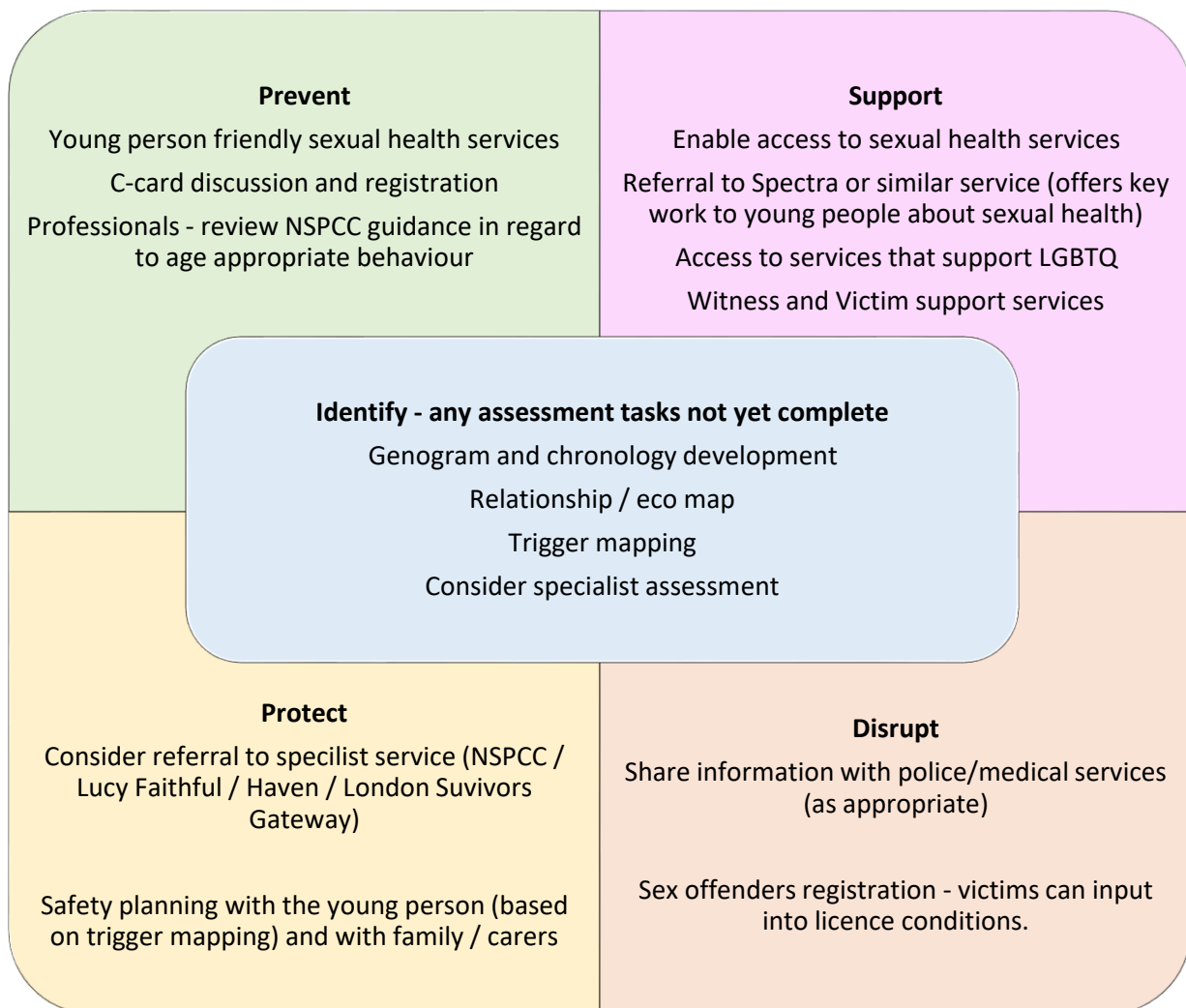
NO CONCERN 0	Young person has good knowledge of healthy relationships and sexual health. The young person is accessing sexual health clinics appropriately and if any sexual activity with boyfriend/girlfriend this is with consent and at age of consent.
EMERGING 3	Sexually transmitted infections (STI's). Access to and engagement with sexual health services. Single instance of mildly concerning sexual behaviour. Consent issues may be unclear. Verbal or non-contact sexualised behaviour. Child/ young person encourages or normalises highly problematic sexual behaviours. Obscene gestures. Historic referrals in regard concerning sexual behaviour amongst peers/ family.
MODERATE 6	Multiple / untreated sexually transmitted infections (STI's). Frequent use of emergency contraception. Unusual behaviour for that particular child. Concern in regard to age or developmental differences. Impulsivity (states unable to control self). Information from

	peers and/or community highlighting concerning sexual activity (behaviour that is upsetting to others). Current allegations of sexual abuse within family/ peer group (non-penetrative). Sexual behaviour that's becoming a compulsive habit or happening frequently. Has sexual interest in adults or children of different ages.
SIGNIFICANT  10	Repeated pregnancy, miscarriages and/or terminations. Increase in severity of concerning sexual behaviour. Child exploited to recruit other peers. Harmful sexual behaviour (penetration / use of violence / excessive use of power / violence arousing to them). Excessive, secretive, compulsive, coercive, degrading or threatening sexual behaviour. Significant age / developmental / power difference. Group sexual offence. MAPPA / Sex Offender threshold.

\*For more detailed breakdown per age group see [Brooke Traffic Light](#) system for Sexual Behaviour.

[Brook tool](#)

*Possible next steps - Sexual Health / Inappropriate or Harmful Sexual Behaviour*



Also see London Child Protection Procedures:

[Safeguarding Sexually Active children](#)

[Children harming others](#)

## Weapons/ Criminal Activity / Anti-Social Behaviour / Violence

Information pertaining to all criminal activity or offending may not always be referred into social services, for example, out of court disposals. It is important to make contact with the Youth Justice Team and Liaison and Diversion Service to discuss any previous contacts that they may have had with a young person to obtain a clear picture regarding their criminal activity and interventions.

It is also important to make contact with the anti-social behaviour (ASB) team as they hold information pertaining to young people's potential peer groups and types of ASB occurring.

### Things to consider:

- Is the child/young person regularly coming to the attention of police or the anti-social behaviour team? Also consider locations of incidents
- Has the child/young person's anti-social behaviour been linked with criminal trends occurring in the area? For example, moped thefts.
- Note that low level offending can lead to more serious offences and potential exploitation (in particular repeat theft, motoring offences and criminal damage)
- Has the child/young person been excluded from school for carrying a weapon or being violent?
- Does the child/young person glamorise criminal or violent behaviour? Think about the varying levels of violence and how the child/young person perceives that
- Has the child/young person committed violent acts against others or animals?
- Does the child/young person see criminal/violent behaviour as a 'norm' in their life? Think about young person's experiences with domestic/neighbourhood violence
- Has the child/young person been connected with drug distribution networks?

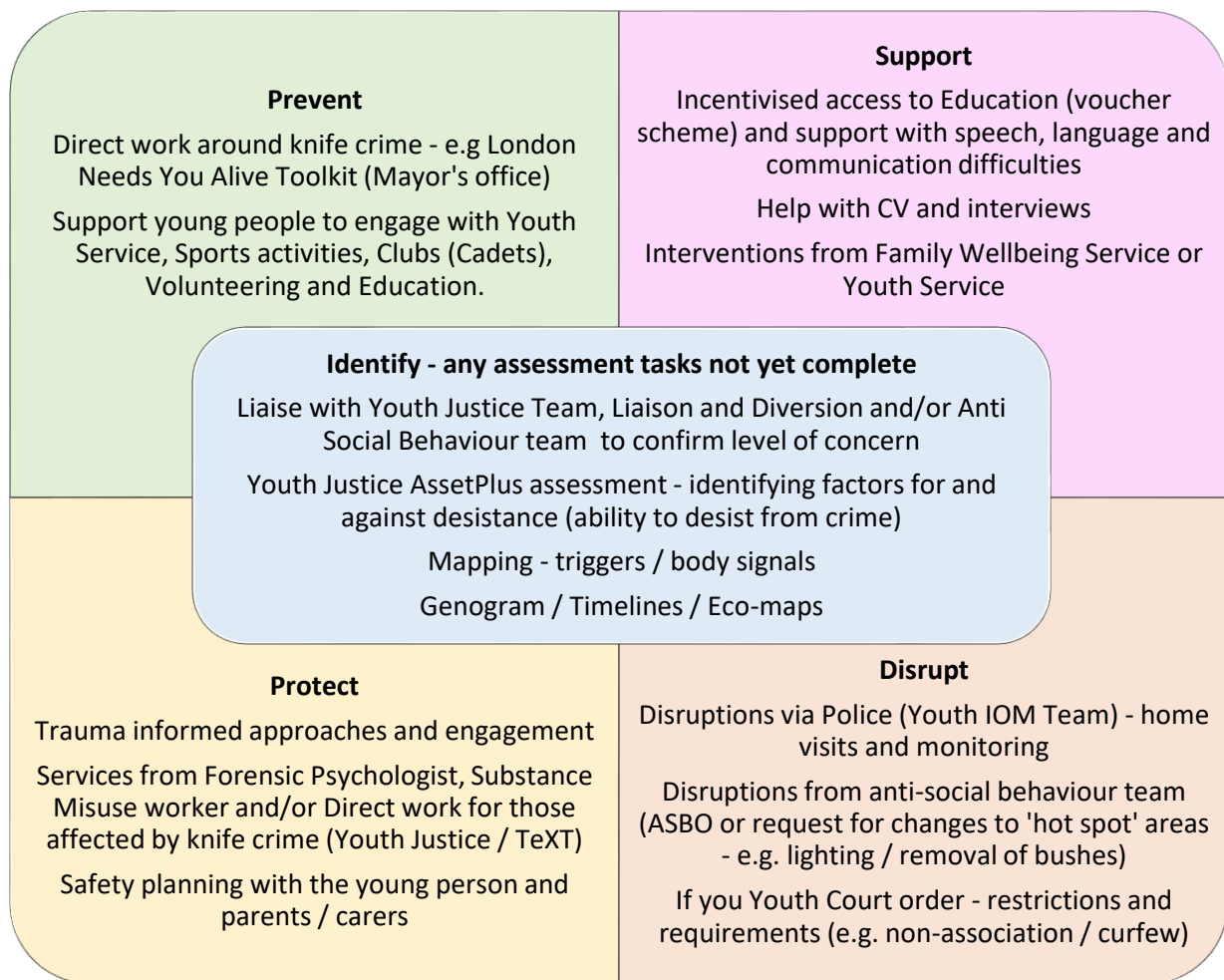
### What to do to assist your assessment

- Liaise with Youth Justice Team, Liaison and Diversion and/or Anti Social Behaviour team to confirm level of concern
- Youth Justice AssetPlus assessment - identifying factors for and against desistance (ability to desist from crime)
- Mapping - triggers / body signals
- Genogram / Timelines / Eco-maps

NO CONCERN 0	Young person has no involvement with crime or anti-social behaviour. The young person is involved in positive citizenship activities (e.g. volunteering / charity work). Has friends or family known to the criminal justice system but there are no concerns about this young person's views or behaviour of crime and citizenship.
EMERGING 3	Coming to the attention of anti-social behaviour team or police. Reports from peers/community/parents that child/young person may be involved with low level offending and not yet come to attention of police. Concerns that child/young person may be experiencing violence at home or in community. Talked about or considered carrying a weapon. Reports from home / school / peers that involved in named gang. Admires or glamorises criminal or violent behaviour.
MODERATE 6	Arrested / investigated / charged by the police for offences of possession of offensive weapon, possession of drugs, multiple thefts / going equipped / motoring offences. Appeared in video eliciting violence with background role. Involved in violent incidents. Indicators of harm towards a family pet/animal with little remorse/empathy shown.

	Tattoos / clothes to identify as part of a gang. Expressions of 'invincibility' or not caring what happens to them. Non-compliance on bail or court order. Interest in fire starting. Youth Justice assessed as 'Medium' Risk of Serious Harm to others.
<b>SIGNIFICANT</b>  10	Excluded for weapon in school. At risk of remand (and becoming looked after) due to offending behaviour. Significant intelligence indicating / charged or convicted of Robbery/Use of offensive weapon/ possession of large quantities of drugs. Known to be active with drug distribution networks and lines / recruiting others to run drug lines and into organised crime. Appeared in video eliciting violence with speaking role. Witness intimidation suspected. Actively seeking to retaliate or continually drawn to high risk areas. Intentional harm of an animal through wilful neglect, inflicting injury, pain, or distress or malicious killing. Arson. MAPPA Level 1. Youth Justice assessed as High or Very High Risk of harm to others.

*Possible next steps - Weapons/ Criminal Activity / Anti-Social Behaviour*



Also see London Child Protection procedures:

[Safeguarding Children affected by Gang Activity / Serious Youth Violence](#)

[Risk management of known offenders](#)

## Misuse of Social Media/ Technology

Online is an area where young people may experience harm, such as bullying, sexual/criminal exploitation, radicalisation and other types of grooming and is important for adults to understand a young person's experiences on online platforms.

*Children can be at risk of online abuse from people they know or from strangers. It might be part of other abuse which is taking place offline, like bullying or grooming or group violence retaliations. Or the abuse might only happen online. Therefore it is important to understand how the relationship developed.*

Although it may feel that there is little influence we can have over increasing safety online for a young person, gathering information around the context, content, conduct may support an understanding about what they may be getting from using an online platform in order to better target interventions.

### Things to consider:

- Social media profile details (consider obtaining actual profile names of young person and their network)
- Consumption- access and usage? For example, how much time are they spending on their phone and key times of contact, apps and online platforms used
- Multiple phones and sim cards?
- Conduct- Has the child/young person been targeted or abused online?
- Contact- Has the child met someone following online contact? Did they know them before?
- Has the child/young person been coerced to take / share images?
- Content- Does the child/young person have indecent images of other children/young people on their phone? Have they been seen in online videos that are considered to be a part of inciting violence and/or retaliation between groups? Is the content developmentally appropriate?
- Compatibility - How has the use of online use impacted on the child/young person's behaviour?
- Have they been involved in filming violent or incident incidents
- What does the child/young person gain from their online platforms? Eg. Connection- does this increase their popularity/influence? What networks/platforms offer the most?
- Parents / carers safety plan in response to online concerns and knowledge of social media.

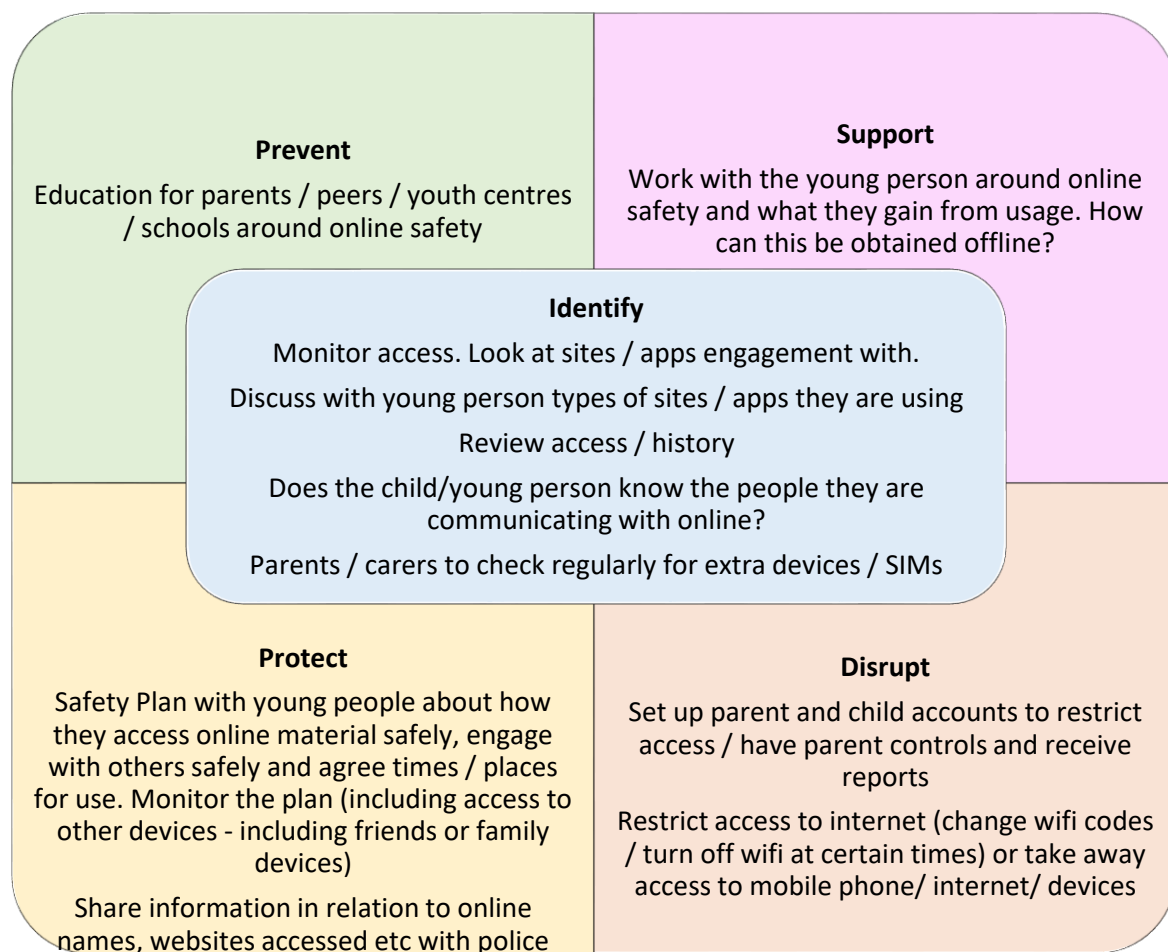
### What to do to assist your assessment

- Monitor online access. Look at sites / apps engagement with.
- Discuss with young person what types of sites / apps they are using
- Review access / history
- Does the child/young person know the people they are communicating with online?
- Parents / carers to check regularly for extra devices / SIMs to inform assessment

No Concern 0	Has appropriate access and use of social media and internet
EMERGING 2	Approached online by unknown adults/peers and communicating with them via the internet. Lack of awareness of online safety (young people and parents/carers). Concerns that child/young person is using online platform to increase popularity/influence by engaging with content that is considered worrying or not developmentally appropriate. Friends with peers online who are much younger or older. Concerns that parents/carers are unable to understand child/young persons access and usage of social media. Child/young persons use of social media has changed, as have their behaviours and self-identity in a

	negative way. Invited on social media platforms for purposes of fraud / youth violence / exploitation / bullying.
<b>MODERATE</b> 4	Coerced online to share inappropriate or sexual images. Meeting in person a peer following contact via social media. Evidence of sexual material being shared without consent. Scammed into online fraud scheme. Child/ young person consuming concerning content in order to increase status/popularity/influence. If device becomes available for use, immediate access is sought for contacting unsafe content/contacts. Multiple phones or SIM cards, in particular what appears to be 'burner phones' (cheap throw away type phone).
<b>SIGNIFICANT</b> 8	Regularly coerced into sending or receiving indecent images. Coerced to meet adult in person or to meet unknown peers for sexual activity following online contact. Evidence of sexual bullying through social media/internet. Evidence of sexual material being shared online without young person's consent. Coerced into sending or receiving images that include abuse or significant harm to young children. Child/young person producing concerning content in order to increase status/popularity/influence. Accessing sites, including violent videos that have a negative impact on self-identity and linked to potential changes in behaviour. Online use is of such a concern, that devices need to be removed and access restricted at all times.

*Possible next steps – Social Media / Technology*





## Substance Misuse

If a young person is accessing support for substance misuse from Catch22, this may be through self-referral or referral through their schools. Social care would not always be notified of this intervention, therefore it is important to check with the young person/services.

Access to substances can indicate a vulnerability in regard to other presenting needs (e.g. offending or mental health needs). Class A drugs (heroin, crack, cocaine) would be considered as more serious than Class C drugs (cannabis) but regular and habitual use of Class C drugs can be harmful to the young person, both physically and emotionally.

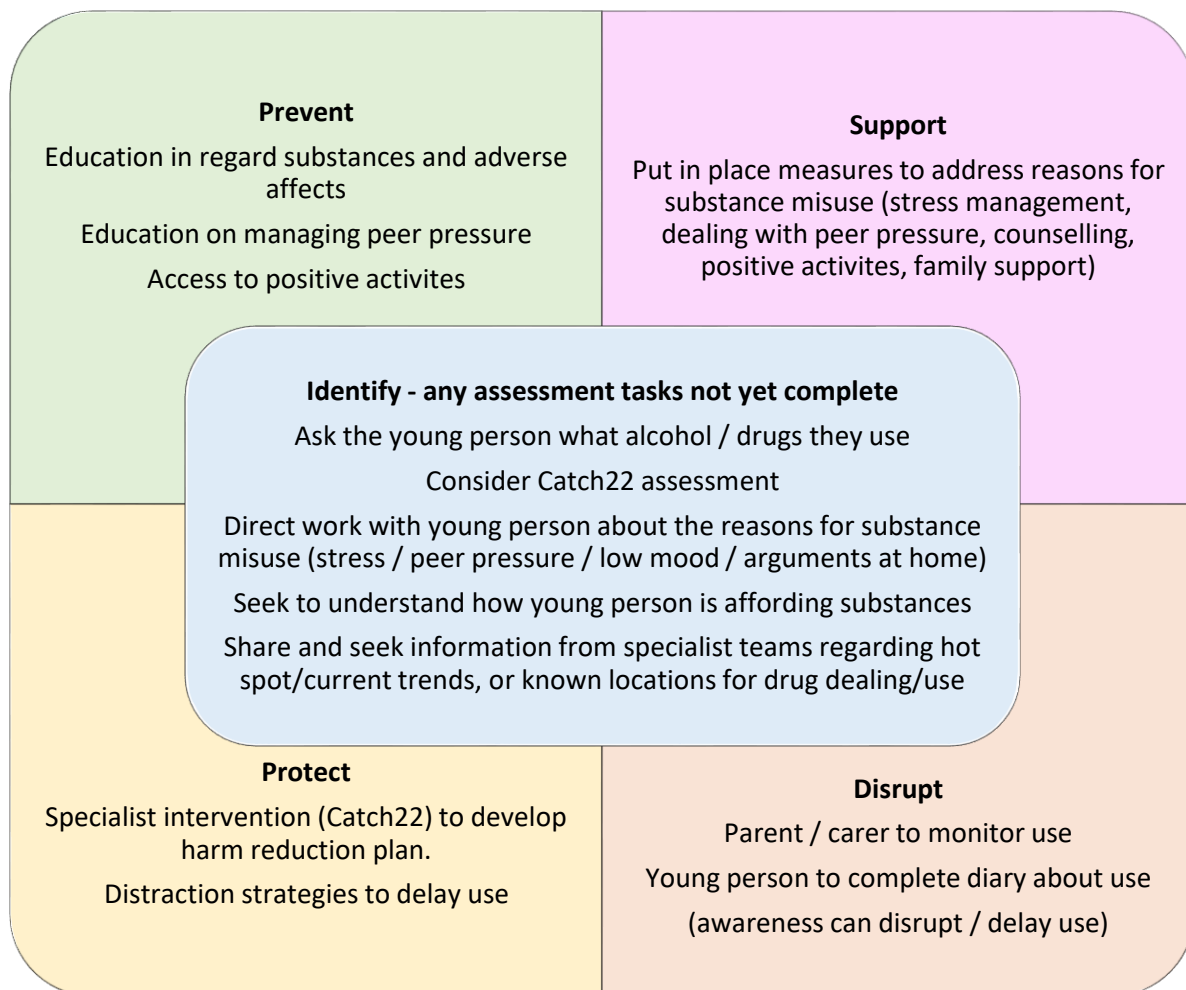
- How/means of accessing substances
- Escalation of type/frequency (amount) of substance misuse
- Overdose/hospitalisation regarding drug use
- Dependency vs recreational use
- Context of use (eg. Alone, at a party or forced use for exploitation purposes)
- Knowledge and language regarding substances, costs etc
- Being found with drug paraphernalia, eg scales, grinder etc
- Type of arrest, possession (personal use) vs intent to supply (PWITS) and category of substance (eg. class A, B or C)
- Are their peer group or family members linked to substance misuse or dealing

### What to do to assist your assessment

- Ask the young person what alcohol / drugs they use
- Consider Catch22 assessment
- Direct work with young person about the reasons for substance misuse (stress / peer pressure / low mood / arguments at home)
- Seek to understand how young person is affording substances
- Share and seek information from specialist teams regarding hot spot/current trends, or known locations for drug dealing/use

<b>NO CONCERN</b> 0	Young person has a healthy approach to alcohol and drugs. They have alcohol within their family environment and under supervision. They are not accessing or using drugs.
<b>EMERGING</b> 1	Experimenting with alcohol/cannabis / Associating with young people known to use substances regularly. Posting images or found with drug paraphernalia.
<b>MODERATE</b> 2	Regular use of or recent increase in use of substances / Use of drugs in addition to alcohol/cannabis (e.g. MDMA, cocaine, spice oil) / Concerns for drug dependency. Ability to access drugs easily (family / associates). Intoxication / 'black out' from use. Change in physical appearance that is believed to be related to drug/alcohol use, for example, significant weight loss. Change in young person's mood related to substance misuse. The child's substance misuse dependency is affecting their mental and physical health and social wellbeing.
<b>SIGNIFICANT</b> 4	Evidence of dependency on alcohol/drugs (for example, committing offences, selling). Using opiates (e.g. heroin, crack, codeine, methadone). Injecting of any substance. Supply of substances to others / coerced into sexual or criminal activity to pay off drug debts or access drugs. Use of multiple types of substances to manage highs and lows. Significant knowledge regarding the use of multiple drugs to manage side affects. The child's substance misuse dependency is putting the child at such risk that intensive specialist resources are required.

Possible next steps – Substance Misuse



## Physical and Emotional Health

This will often be impacted by the other presenting needs but also needs to be considered separately. Physical health can be about the general health needs of the young person and their access to health services but also their hygiene, personal care, sleep routine and diet. Emotional health can be volatile for anybody and particularly for adolescents experiencing a number of changes developmentally and socially. It is important to consider the young person's presenting behaviour in the context of trauma and emotional needs.

London Child Protection Procedures outline the importance of understanding self-esteem in the context of contextual harm and risk of exploitation:

*The child's vulnerability resulting from their negative sense of self and low esteem has been exploited by others who are causing them harm (Red under Child's Emotional Wellbeing).*

### Things to consider:

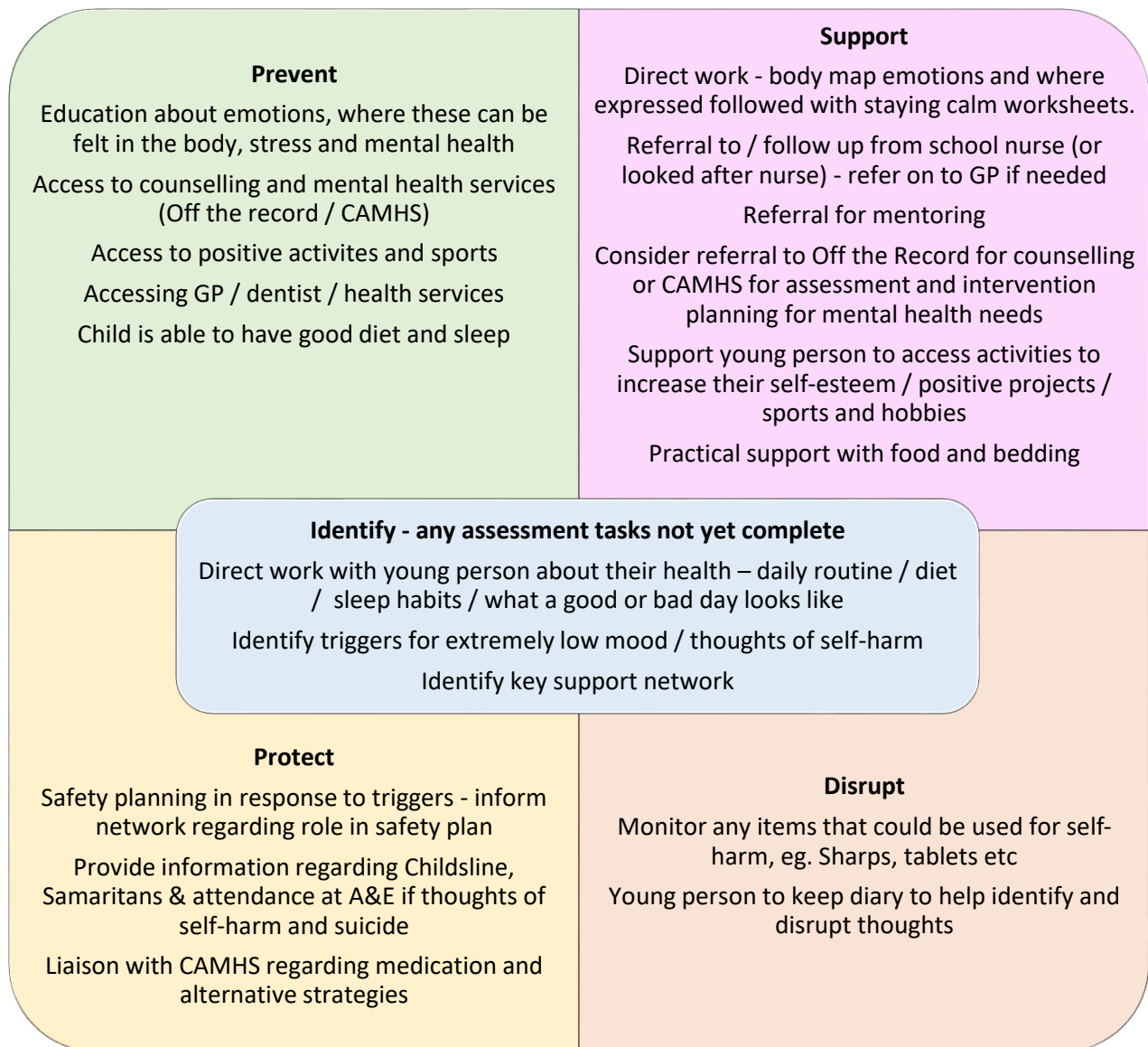
- What is the child/young person's emotional response to the contextual harm?
- Are there any factors impacting on the child's overall physical health?
- Are there any physical/mental health concerns for the child/young person?
- Think about adverse childhood experiences, self-worth. Bereavement/loss
- Has the child had any injuries? Think about relation to physical or sexual assault, A&E admissions, 'accidents' that are resulted in bruising.
- Noticeable changes in hygiene (both neglectful and excessive self-care).

### What to do to assist your assessment

- Direct work with young person about their health – daily routine / diet / sleep habits / what a good or bad day looks like
- Identify triggers for extremely low mood / thoughts of self-harm
- Identify key support network

NO CONCERN 0	Young person has some developmentally based emotional outbursts and difficulties with their strong emotions but these are not raising concerns in regard to the long term impact of their physical or emotional wellbeing.
EMERGING 1	Low self-esteem. Some or reduced concerns of self-harm and/or eating disorders. Difficulty in making or maintaining friendships with peers. Tiredness or sleep deprivation. Referrals made to CAMHS.
MODERATE 2	Low self-esteem impacting upon young person's mental health. Increased concerns of self-harm. Violent or emotional outbursts or bullying or threatening behaviour. Concerns young person may be exposed to violence / experiences of psychological trauma. Noticeable changes in hygiene (both neglectful and excessive self-care). Not taking required medication to manage health (e.g. diabetes, epilepsy). Open to CAMHS Tier 3.
SIGNIFICANT 4	Chronic low self-esteem. Changes or extremes in mental health. Suicidal ideation. Evidence of emotional abuse from domestic /sexual / physical violence, as witness or victim. Psychological trauma due to experiences suffered as part of exploitation, for example, impact of being held against will, environment trap houses, journey/movement of the young person/child. Evidence of self-harm, eating disorders, previous suicide attempts or overdoses. Frequent attendance at A&E. Physical symptoms suggestive of sexual physical assault or serious violent incident. Open to CAMHS Tier 4.

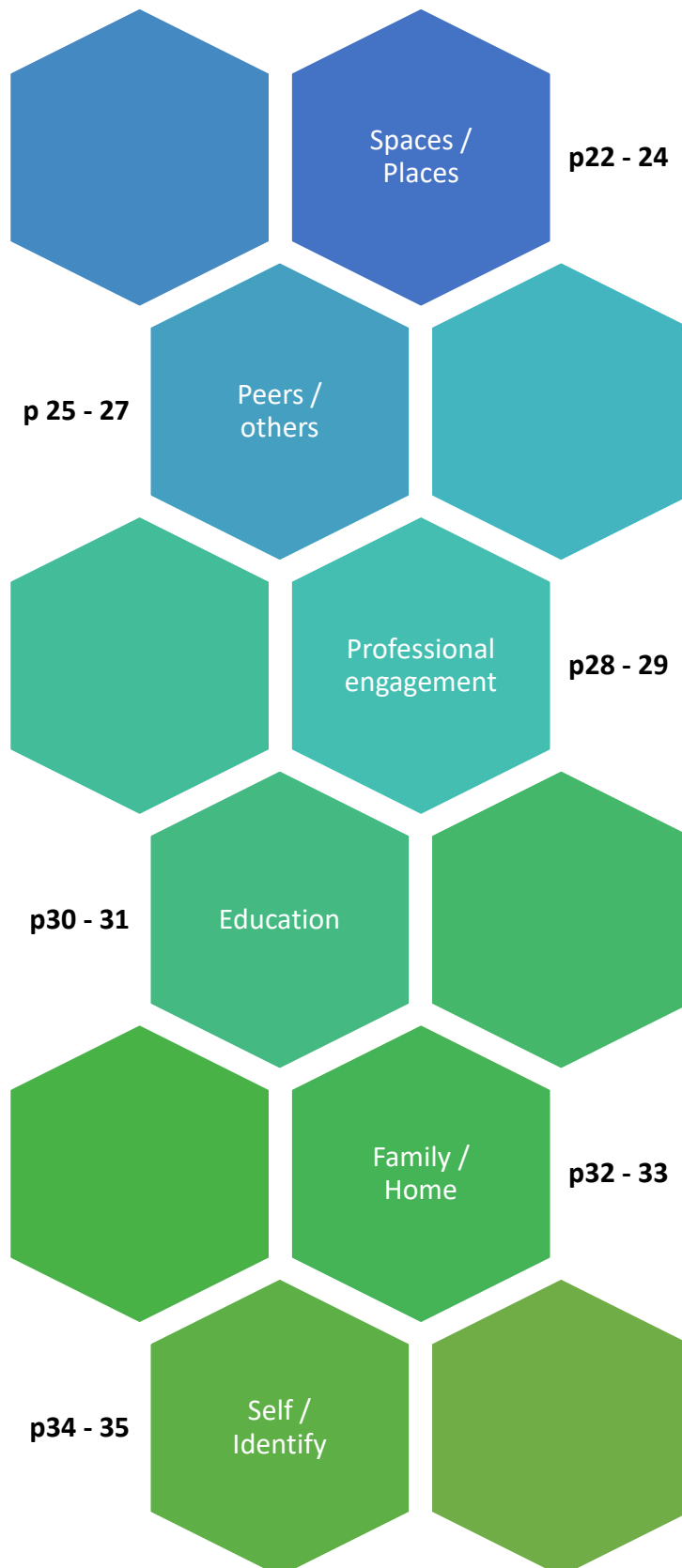
Possible next steps – Physical and Emotional Health



Also see London Child Protection procedures

[Self-harm and Suicidal behaviour](#)

## Contexts of safety or harm



## Places and Spaces

Locations themselves can be a major factor contributing to the type of harm a young person is experiencing outside the family home. This may be due to an area/location being well known as a location where drug dealing or 'sexual acts' occur, therefore the location itself becomes a priority in responding to, not just the young person. This would include online sites.

### Things to consider:

- Where are the child's safe spaces?
- Locations of concern and why? (Including party locations or potential cuckooed addresses- who owns the property/ social landlord?)
- Can these locations be made safer?\*
- Rival groups / gangs?
- How has the child travelled? Date / time and who with?

\*for example, safety planning with the child/young person around how safety can be achieved in a location of concern, such as planning quick exit points when at the location or involving other adults who are in the space, eg. Chicken shop owners about worries/how to respond. It may also involve professionals to think outside of their usual professional network, by including colleagues from neighbourhood safety, housing, ASB team, greenspaces etc.

### If safety within the young person's home is at risk due to extra-familial harm, consider:

- What should the young person do if someone forces entry into the house?
- Is there a safe room that provides an extra lock/barrier to allow enough time for police response?
- Is there CCTV at the property? (MASCOT can sometimes do this immediately in urgent situations)
- Does the YP know what extra measures to take to stay safe during a knife attack? (eg. hiding behind extra pillows, under a sofa etc) In particular, think about fight or flight responses
- Can the family purpose extra locks for security?
- Have we seen the address they are staying for us to confirm it is secure?
- Would another person staying at the property increase safety? (eg. An extended family member)

### Tools to help assess

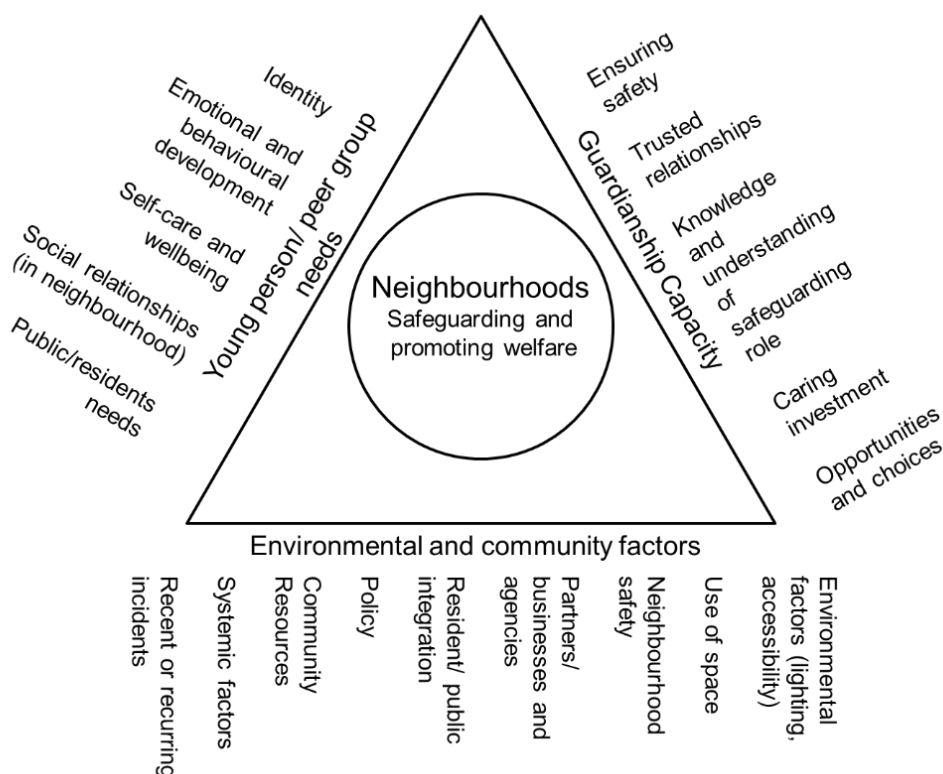
- Assessment triangle (next page)
- Speak to your Safer Merton colleagues and anti-social behaviour team
- Liaise with the gangs and contextual safeguarding workers
- Direct work to complete neighbourhood risk assessment (involve the areas' community safety team) <https://www.csnetwork.org.uk/en/publications/neighbourhood-assessment-toolkit>
- Direct work with the young person to understand locations of concern, <https://www.csnetwork.org.uk/en/publications/safety-mapping>

POSITIVE 0	Youth Services in the area, community services, housing wardens, sports facilities, safe spaces / safe adults, active spokes persons supporting community safety and cohesion – <b>and</b> young person is aware / engaging positively with these. Area has low level crime / drug dealing. Young person able to travel safely and confidently. There are guardians who care about and are invested in the wellbeing of young people in the area. Guardians have training on safeguarding, are aware of safeguarding procedures and act upon these. Guardians are able to ensure the physical, emotional, psychological wellbeing of the young person and/or their peer group.
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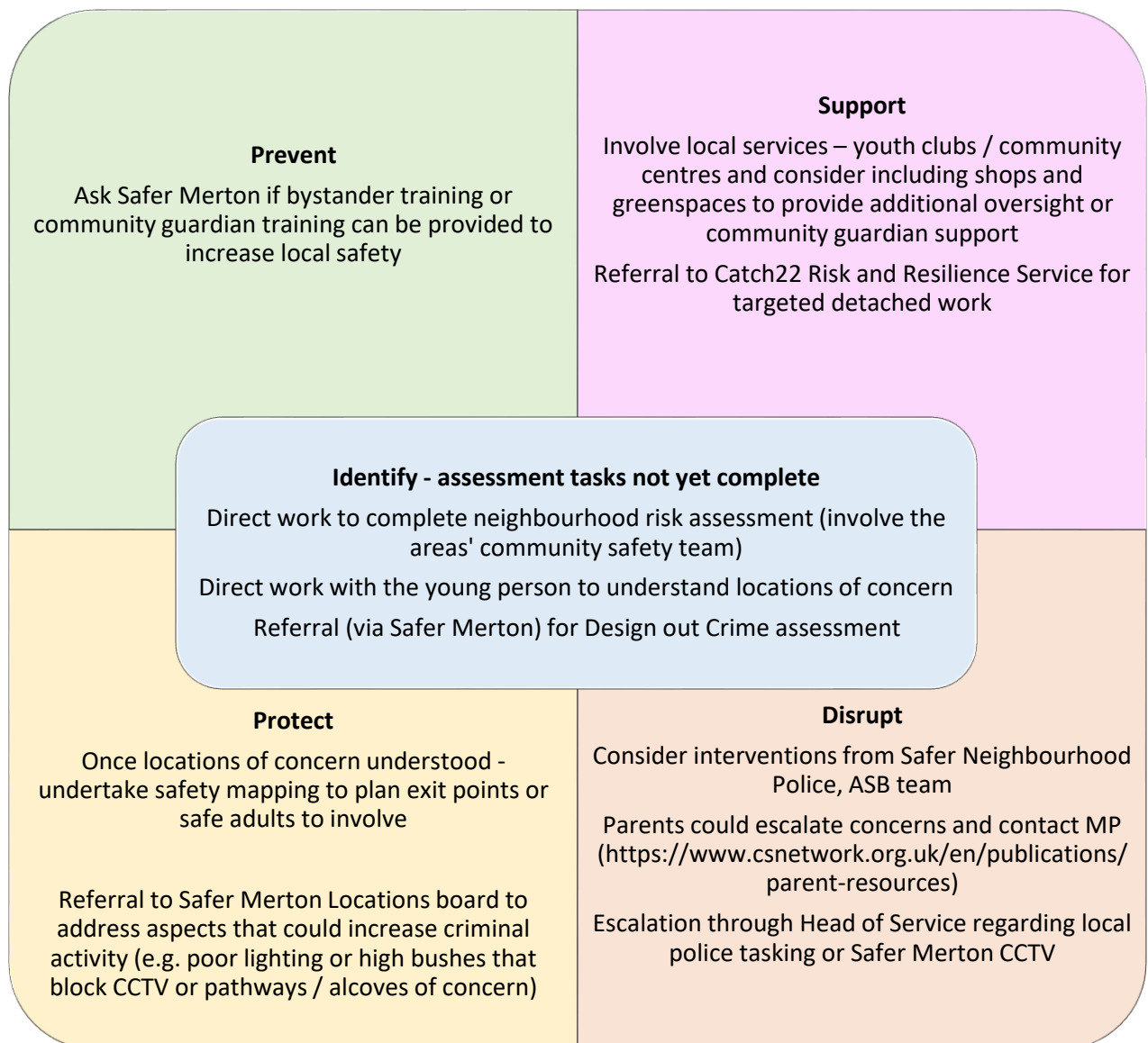
<b>EMERGING</b> 3	Spending time in areas known for antisocial behaviour or concerning parties (consider age). Several changes in placement. Spending time in locations, including online, where young person is more vulnerable. Child/ young person identifies and informs professionals of unsafe locations and reason for this.
<b>MODERATE</b> 6	The neighbourhood or locality is having a negative impact on the child – for example, the child is a victim of anti-social behaviour or crime, or is participating in anti-social behaviour or at risk or participating in criminal activity. Spending time in areas where drug activity known to take place or fearful of going to certain areas. Received invitation or planning to go to location of concern in regard to sexual or drug activity. Discusses a number of different locations they attend. Registered at a number of addresses. Concerns about foster carer / care home’s management of child’s behaviour. Care home unable to manage multiple young people who have experienced similar harm placed in their provision. Child/young person goes to shop or area they know people are more likely to buy them alcohol or tobacco for sexual activity. Frequently spending time in locations, including online, where they can be anonymous or at risk of experience harm / violence / exploitation.
<b>SIGNIFICANT</b> 12	Found in areas/properties known for sexual exploitation / adult sexual activity / drug activity / factory / cannabis farm / ‘trap house’ / cuckooed address / violence. Taken to hotel / B&B / property with intention of being harmed or harming others. The neighbourhood or locality is having a profoundly negative effect on the child. Care home / house (including family address) is targeted and / becomes a hotspot.

### Assessment triangle focusing on Neighbourhoods

The following triangle extends the notion of ‘parenting capacity’ to ‘guardianship capacity’, considering the role of all trusted adults or peers in the spaces/places that young people spend their time. The environmental factors have also been extended to include businesses and resources.



Possible next steps - Places and Spaces





## Peer group / external relationships

It is crucial to not only be aware of the network names but also the relationship amongst and/or between the child and their peers to understand their overall influence on the child/young person's behaviour or life. Peer groups can be a positive influence on young people but where there is a history of offending / exploitation it is important to consider the dynamics and influence over the young person, particularly if the young person has been a victim of crime. Incidents of violence could be for a variety of reasons, including retaliation, an 'initiation' process, seeking 'kudos' or seeking connection / protection from others. . Young people naturally find it difficult to remove themselves from a peer group. A young person's volatile behaviour could be an indication of how 'trapped' they feel within that group.

### Things to consider:

- Positive and trusted relationships?
- Known / suspected involvement in exploitation / crime?
- Check names of those in the referral
- Consider those connected on Merlin reports, Missing episodes or incidents of concern
- How they are known to each other? Consider regular ASB reports
- Social status of the child in the group?
- What are the social norms within their groups?
- What need is this relationship meeting?
- Is the child presenting a risk towards others?
- Talks about having 'another family' or 'having youngers'

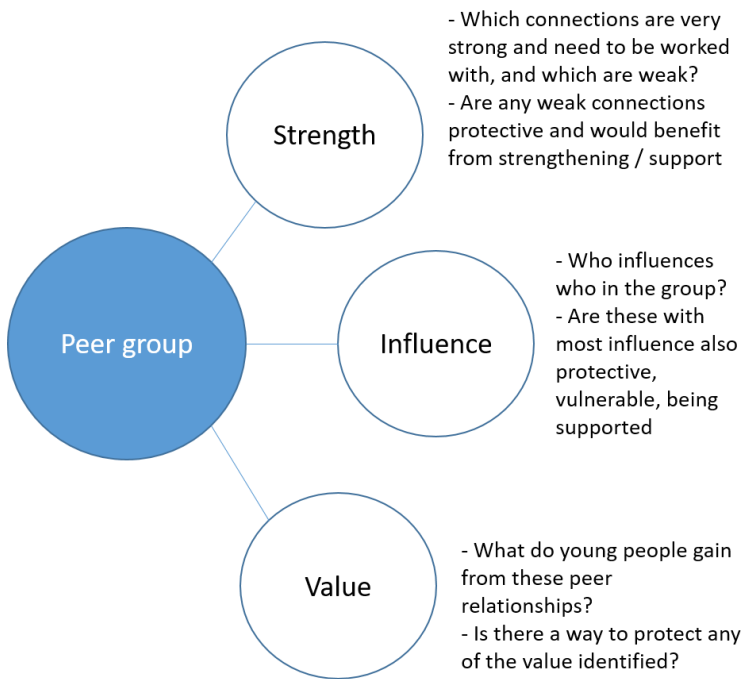
### Tools to help you assess:

- Assessment triangle (next page)
- Direct work with young person to complete Peer group assessment and mapping tools: <https://www.csnetwork.org.uk/en/publications/peer-group-assessment-and-mapping>
- Direct work to understand who influences the young person - worksheet 'who decides'
- Complex strategy to discuss concerns across young people involved in peer group

POSITIVE  0	Peer group engage in positive activities / clubs / communities. The group understands risk and harm. Relationship between the peer-group are non-coercive or controlling. Appropriate age ranges. Peer groups who are not open to services for ASB / criminal behaviour / exploitation. Friendships that the young person can go to for support or have a trusted conversation with. Peers that have 'turned around' in their journey. Guardians are able to ensure the peer group's physical, emotional, psychological wellbeing.
EMERGING  3	<u>Some</u> indications that unknown adults and/or other exploited children and/or missing children have contact with the child/young person. <u>Some</u> indications of negatively influential peers. Concerns about being involved with offending peers. Involved with a peer group whose identity or internal dynamics cause concern.
MODERATE  6	Unknown adults and/or other exploited children/young people and/or missing children associating with the child/young person. Escalation in behaviour of peer group. Drug dealers approaching or associating with young person. Information and Police Intelligence suggesting some risk of exploitation or harm from others. Individuals who have significant mental health needs befriended child/young person. Getting into cars with unknown adults or suspected perpetrators. Accompanied by an adult who is not a legal guardian. Arrested with individuals who are considered at risk of exploitation, serious youth violence, pro-

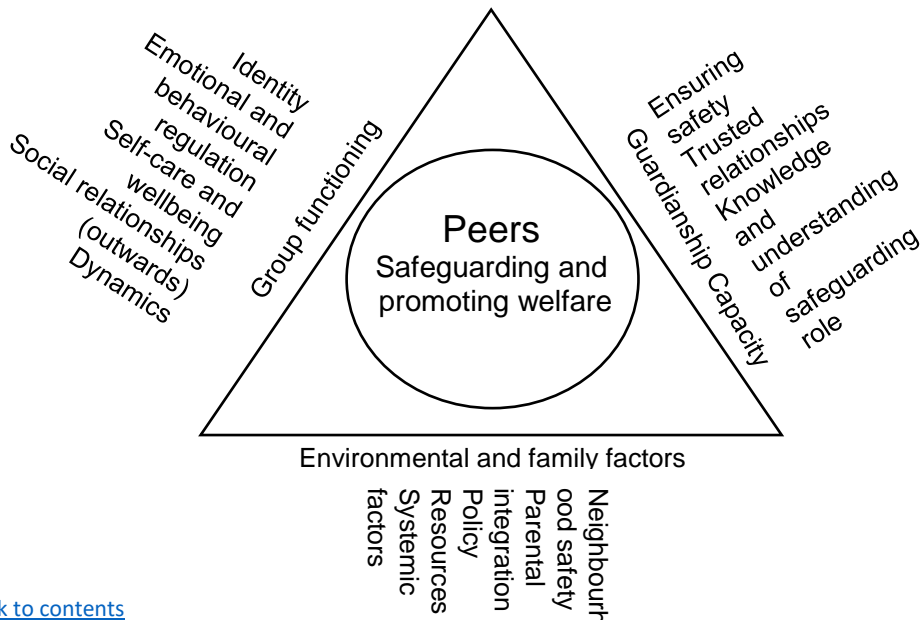
	criminal behaviour, missing. Friends with young people across different boroughs where no known natural link (e.g didn't go to same school or isn't a family friend)
SIGNIFICANT  12	Staying with someone believed to be exploiting them. Person with significant relationship is coercing child / young person to meet and child is sexually or physically abused. Evidence or Police Intelligence to suggest being moved around for sexual or criminal activity. Abducted and/or forced imprisonment (described by young person as "locked in"). Arrested or found with adults / high risk individuals out of borough. Associates/peers present with similar high risk harm indicators. Child/young person is being exploited to 'recruit' others, or to introduce others to person of concern. When peer group/ friends together, they engage in organised criminal activity and/ or violent behaviour against each other or others.

**Peer group assessment considerations (Firmin, 2020:155)**

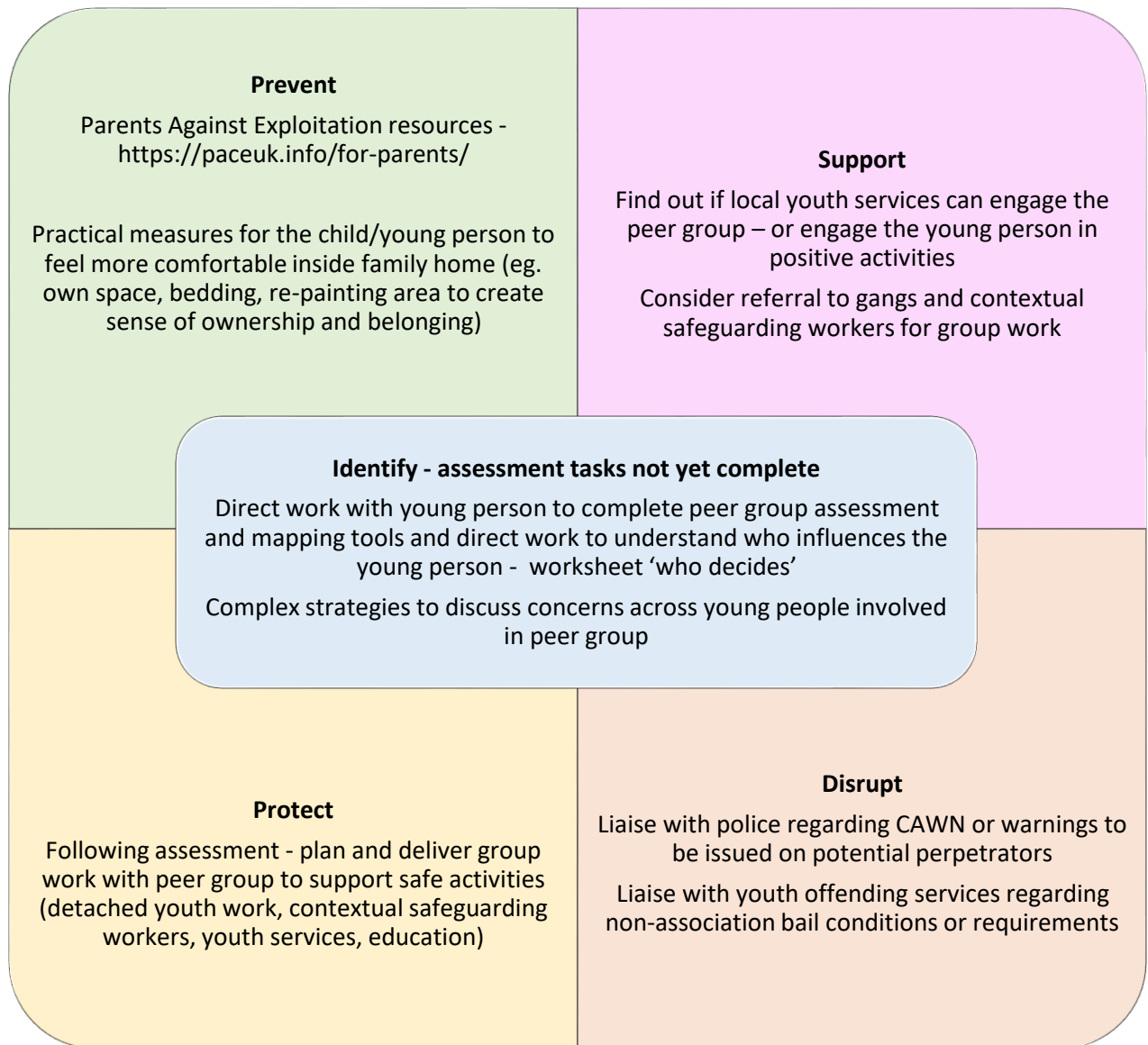


**Assessment triangle focusing on Peer Group**

The following triangle also extends the notions of parenting capacity and of child development.



*Possible next steps - Peer group / external relationships*



## Ability of professionals to engage

It is not the child / young person's role to engage with you, it is the responsibility of professionals to engage the child/young person. The professional's ability to engage the child/young person and their family has a significant impact on the safety for the child / young person. They are more likely to engage in the discussion and assessment of risk and the planning to disrupt this. Please note that the National Panel for Safeguarding have published a report that highlights the importance of professional relationships – and building the team around the professional who can engage – [click here for report](#)

### Young people value:

- Honesty and transparency
- integrity
- being listened to
- if say going to do something then do this
- give the purpose of our meeting and make it meaningful
- “switch it up” - if the sessions feel boring, listen if I don't like an approach



### Things to consider:

- Trusted relationship with a professional?
- What has worked well previously? Can this be re-visited and implemented?
- Professionals adapting to child and parent's needs.
- Is there an assessment of whether the child/ family is safe to pull away from the exploitation?
- Can we provide a plan to disrupt the harm and avoid moving the child away?
- Agencies able to engage?
- Could the involvement of professionals create tensions for the child / family? E.G. disruption of illegal income? Too much information being shared?
- Is there something that can be adapted to make it safe?

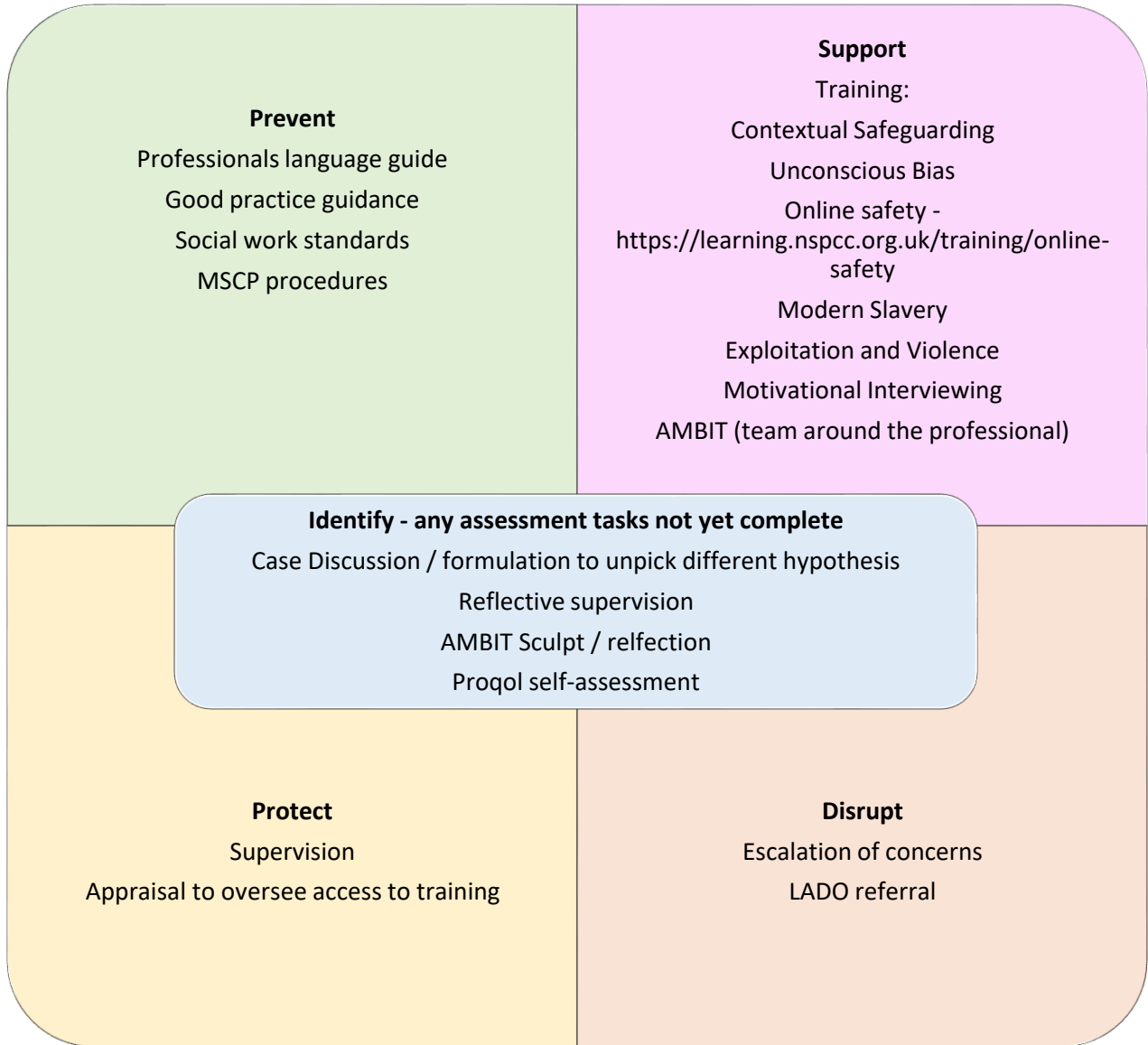
### What else to assist your assessment:

- Case Discussion / formulation to unpick different hypothesis
- Reflective supervision
- AMBIT model <https://manuals.annafreud.org/ambit-static/relationship-to-help>
- Professional Quality of Life self-assessment - [https://www.proqol.org/uploads/ProQOL\\_5\\_English\\_Self-Score.pdf](https://www.proqol.org/uploads/ProQOL_5_English_Self-Score.pdf)

POSITIVE 0	Trusted adult in professional network. Professionals able to impact on young person's engagement, learning and understanding. Professional willingness to be curious, open to different hypothesis and perspectives. Flexibility and responsiveness. Uses appropriate language when describing the child – non-blaming and able to see the impact of coercion and trauma experiences.
EMERGING 3	Limited referral history with other services. Lack of confidence in worker / service to manage risk or work with adolescents. Multiple workers confused about the presenting needs or disagree with the level of risk.
MODERATE 6	Services previously involved and closed; new referral received for similar concerns. Worker(s) believes the problem is in the child. Several services involved but little change in the experience of harm for the child / young person. Barriers to engagement and influence.

<b>SIGNIFICANT 8</b>	History of multiple services / referrals with little change or escalation in risk. Worker makes derogatory statements about the young person. Services report they are unable to put in place plans that can keep the child / young person safe. Systemic barriers to access resources or services.
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*Possible Next Steps - Professional engagement*



## Education

The education setting needs to be considered in regard to safety / protection measures (additional professional oversight and support) and for potential risks (that may be unconscious or unrecognised), in regard to ‘corridor culture’, the management of bullying and behaviour expectations.

The London Child Protection Procedures has reference to the impact of non-school attendance:

*The child is becoming involved in negative behaviour/ activities, for example, non-school attendance and as a result may be excluded short term from school. This increases their risk of being involved in ASB, crime, substance misuse and puts them at risk of grooming and exploitative relationships with peers or adults*

Not being in education is therefore seen as significant and non-engagement in mainstream settings, such as education, is also addressed within the social isolation section.

Things to consider:

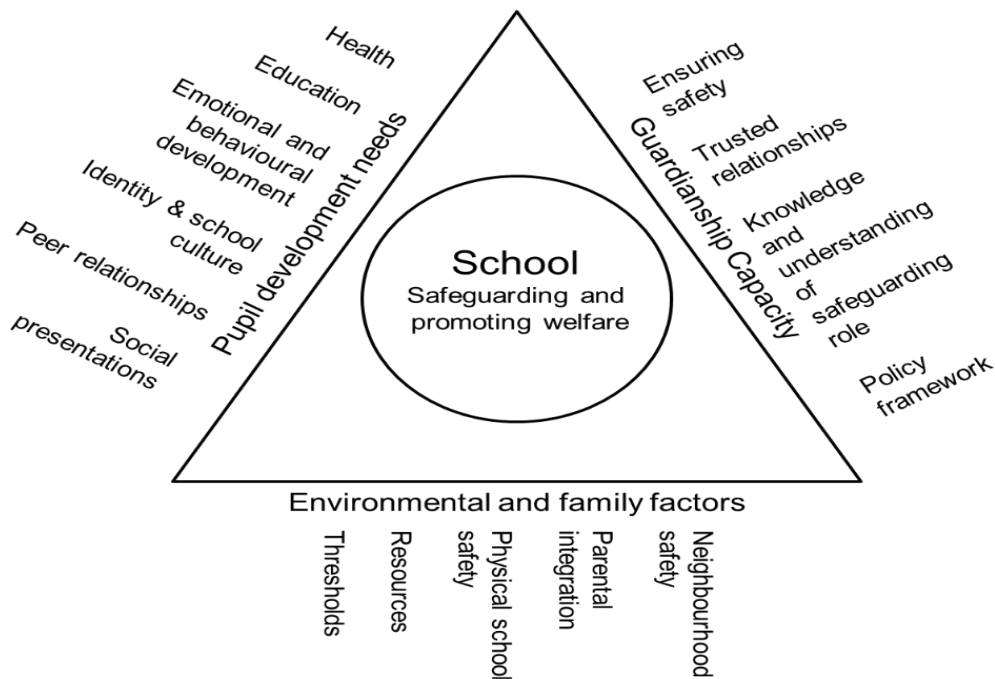
- What is the school / provision offer (including details of timetable)? EHCP details
- Exclusions / attendance? Significant incidents in school?
- Previous involvement in education welfare service
- Is the child safe in school? Fear of safety in or going to education
- Culture within provision – have there been repeat incidents by different children?
- Motivation of the young person and response to support /authority

### Tools to help assess:

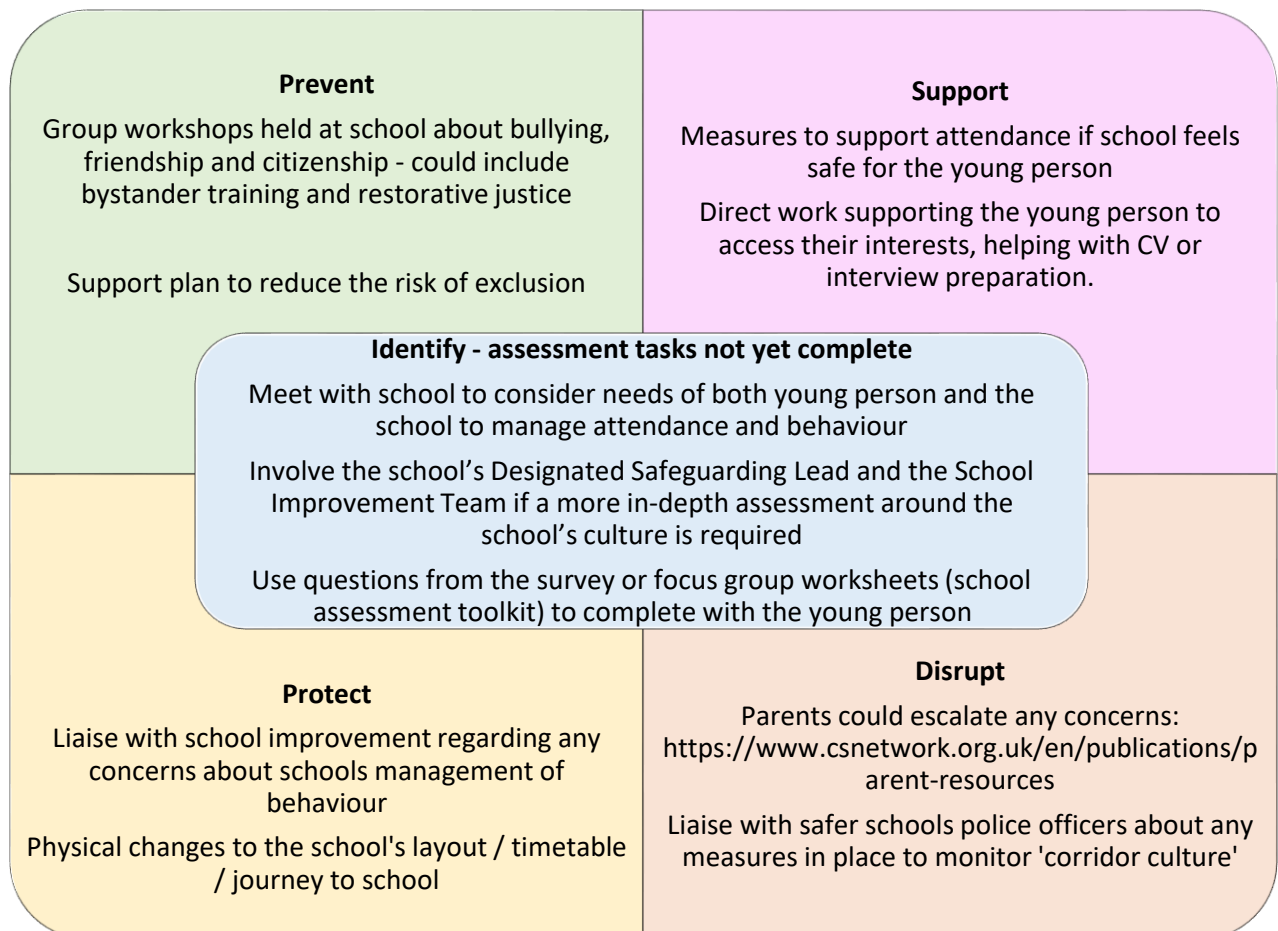
- Assessment triangle (see next page)
- Involve the school’s Designated Safeguarding Lead and the School Improvement Team if a more in-depth assessment around the school’s culture is required
- <https://www.csnetwork.org.uk/en/publications/school-assessment-toolkit>
- Meet with school and young person to consider needs, how to manage attendance and behaviour
- Use survey or focus group worksheets (school assessment toolkit) to complete with young person

POSITIVE  0	Young person is attending and engaging. School provides a safe space and there are trusted adults at school for the child to talk to. Behaviour issues are managed by the school. Ability to monitor and support safety plans. School understands the needs behind the child’s risks and how the school can support these needs. School has a good relationship with parents / carers and professional network. School is aware of peer group and dynamics of peer groups. School supports the child to achieve academic potential and ability.
EMERGING  3	Mainly engaged in education, employment or training but some attendance/behaviour issues or poor educational achievement. Some conflict with teachers or those in authority. Reports of bullying in the school but these are responded to appropriately. Peer group concerns that are managed by the school. In setting where there are other exploited or high risk young people
MODERATE  6	Irregular/poor attendance with this dropping below 80%. Truancing from school. Losing interest. Period of fixed term exclusion(s). Whereabouts during school hours unknown. On a reduced timetable. Speech, language, social, emotional and communication difficulties. Education, Health and Care Plan. Experience of bullying that are not being responded to. Mention of a ‘culture’ of aggression / inappropriate behaviour that is not managed.
SIGNIFICANT  8	Not in Education, training or employment (NEET). Regular breakdown of school placements due to behavioural problems. Lack of trust in education system (young person or parents/carers). Repeated concerns about the school’s management of behaviour of a number of young people.

## Assessment triangle – for education



### Possible Next Steps - Professional engagement



## Family Relationships and accommodation

### Parent/Carer:

- Their understanding of exploitation
- Their resilience
- Positive/negative relationship?
- Are they benefitting from drug dealing/criminal acts?
- Mental health concerns?
- Substance misuse issues?
- SEN or communication needs?

### Brothers and Sisters:

- Positive/negative relationships?
- Have they been/could they be targeted for exploitation?
- Older - additional pressures on them to oversee safety or internet plans?

### Family / Home:

- Any cultural/ethnicity considerations?
- Support network – what does it look like? Is it working? What support would be needed?
- Any positive influences in the family? Nature of their relationship?
- Overall vulnerabilities – domestic abuse, financial issues, criminality within the family, ACEs
- Accommodation – is it suitable? Is it safe? Who is living in the home? Landlord? How long have the family been living there?

### What to do to assist your assessment:

- To assess parent/carers' understanding of risks – the What's Happening Tool can be helpful: [https://www.csnetwork.org.uk/assets/images/Whats-Happening-Tool\\_190307\\_163417.pdf](https://www.csnetwork.org.uk/assets/images/Whats-Happening-Tool_190307_163417.pdf) (with guidance - <https://www.csnetwork.org.uk/assets/images/Whats-Happening-Tool-Guidance.pdf>)
- Joint assessments if older brothers / sisters / cousins are opened to partner agencies
- Genograms / ecomaps

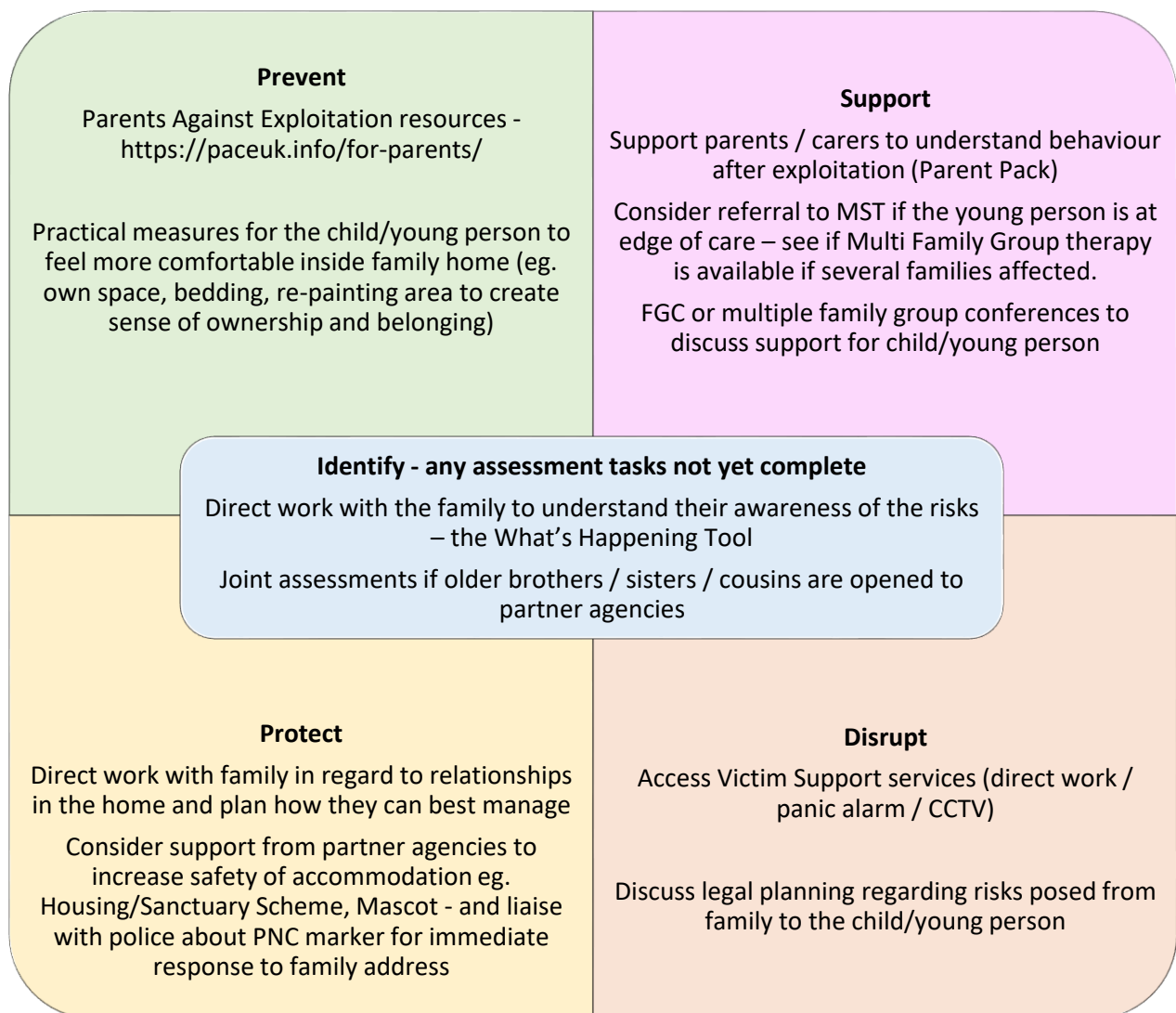
POSITIVE  0	Positive relationship with family or family member. Family members are understanding the risks and implement strategies for those risks. Family engaged with professionals supporting young person. Knows the young person's network. Young person feels safe where they are living. Parents/carers engaged with their own required services (health / housing / substance misuse).
EMERGING  3	Overcrowding (living on sofa?). Evidence of decline in relationship and/or communication with family/parent/carer. History of domestic violence or abuse. Struggle to recognise and respond to the risks. Parent's response not having an impact.
MODERATE  6	Parent/carer(s) expressing sense of hopelessness. External factors have more influence than the family. Parent / carers not having an impact on the child's risks due to other external influences. Several changes in where the child is living in the family and experiencing multiple relationships. Lack of consistent parental relationships. Current neglect or violence in the home witnessed by child. Staying away with other young people who are considered to be at risk of exploitation / harm. Lack of parental supervision or interest in the young person. Older brother, sister, cousin or family member has been exploited or involved in offending, associated to gangs / violent groups. Family experiencing financial stress / debts and/or housing issues. Clear 'push factor' is the stress caused by the young person's caring responsibilities.
SIGNIFICANT	Homeless or sofa surfing. Young person often stays elsewhere. Thought to be missing but not reported by parent/carer(s). Lack of relationship / understanding or trust between child



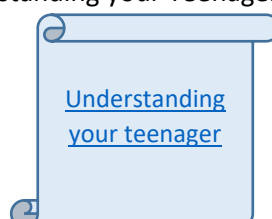
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and parent/carer(s). Multiple broken attachments across the family network and 'pushed' around the family. Parents / carers not supporting their child, fail to acknowledge the risks and/or not protecting them. Parent/ adults blame child/young person for their exploitation and physical or emotional harm experienced and see it as the child's responsibility to address the risk/ change their behaviour. High risk concerns but parent/carer(s) not acknowledging the risk or unable to protect them. Family are known or suspected perpetrators of CSE/ Organised Crime / Drug dealing / abuse towards the child. Parent is unavailable to them physically or emotionally. Parent is abusive physically or emotionally.

*Possible next steps - Family Relationships and Accommodation*



Some parents may find the MSCP guidance 'Understanding your Teenager' helpful.



## Self / Identity / Social Isolation Factors

Social Isolation and the impact of Social Graces / Identity is the primary factor for considering the child's ability to self-protect and the potential push / pull factors within the individual. However consider these alongside their mental health / mood, access to services, substance misuse and personal physical care.

### Things to consider

- Accessing mainstream support?
- Social Graces\* impacting on actual / perceived access
- Experiencing bullying
- Targeted due to perceived vulnerability?
- Seeking inclusion or recognition / identity from high-risk peers?
- Community protective factors (youth services in the area, community services, housing wardens, sports facilities, safe spaces / safe adults, active spokes persons supporting community safety and cohesion) and engagement with these?
- SEN factors considered to increase child's vulnerability to exploitation?

### \*Social Graces

**G:** Gender, Gender Identity, Geography, Generation

**R:** Race, Religion

**A:** Age, Ability, Appearance

**C:** Class, Culture, Caste

**E:** Education, Ethnicity, Economic

**S:** Spirituality, Sexuality, Sexual Orientation

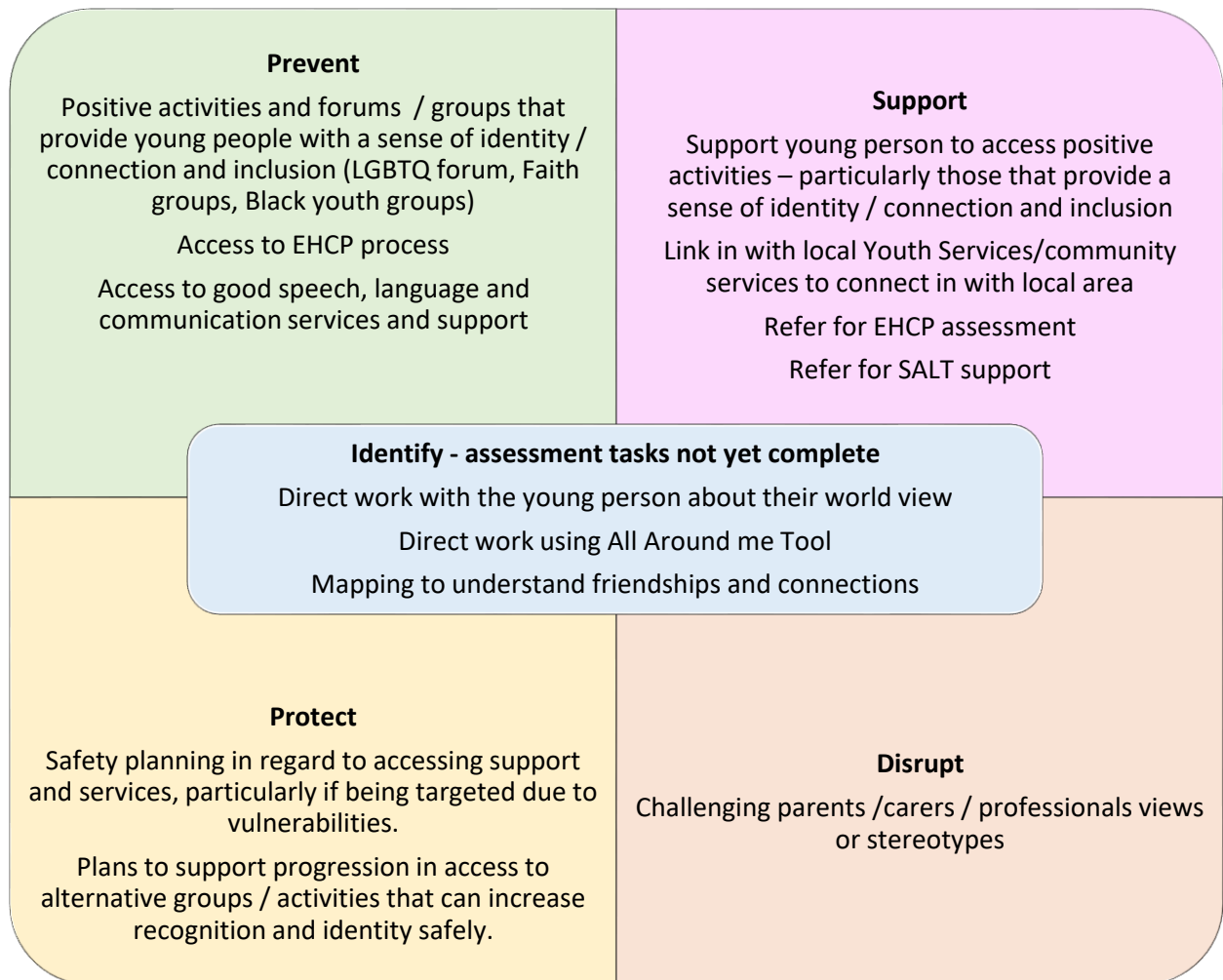
### What to do to assist your assessment:

- Direct work with the young person about their world view (words to describe me / words to describe the world – how these interact) and about their experiences of discrimination or exclusion.
- All Around me Tool: <https://www.csnetwork.org.uk/assets/images/All-Around-Me-Tool.pdf> (with guidance - <https://www.csnetwork.org.uk/assets/images/All-Around-Me-Guidance.pdf>)
- Undertake mapping of peers / online use to understand friendships and connections the young person seeks

POSITIVE 0	Young person is positively engaging mainstream support and services (education and/or health services). Has awareness of the risks and grooming processes. Young person is motivated and has a positive outlook. Has capacity and willingness to engage in professional relationship. Can identify places they can go to for advice – particularly in regard to managing any cultural needs or support for their identity or addressing past trauma. Has capacity to regulate difficult emotions. Spends time in positive activities at home or community.
EMERGING 2	Perceived inability or reluctance to access more mainstream support. Reduced access due to their Ethnicity / cultural background / cultural dissonance / a Child Looked After / Identifying as Lesbian, Bisexual, Gay or Transgender (LBGT) / their Special Educational Needs (SEN).
MODERATE 4	The child or young person is isolated, and refuses to participate in social activities. Experiencing bullying or moderate levels of social isolation that may be exacerbated by their personal, cultural, sexual identity or special education needs? Concerning online use due to sexual identity (e.g. accessing the 'dark web'). Targeted by groups or individuals due to their vulnerability or perceived

	reputation. Young person refusing to engage in mainstream support (e.g. education) and there is a concern this results from or is impacting their mental health.
<b>SIGNIFICANT</b>  6	The child has such a negative sense of self and abilities that there is evidence or likelihood that this is causing harm. The child or young person is completely isolated, refusing to participate in any activities. Young person experiencing high levels of social isolation that may be exacerbated by deprivation (including being part of an inward-looking community), their Ethnicity/ cultural background/ cultural conflict, being a Child Looked After, identifying as Lesbian/ Bisexual, Gay or Transgender (LBGT)/ their Special Educational Needs (SEN). Being targeted by groups or individuals due to their vulnerability. Seeking inclusion or recognition and identity from pro-criminal, high-risk or exploitative peers. Being unable to implement safety strategies due to significant influence of pro-criminal/exploitative peers. Lack of community protective factors or disengagement by young person.

*Possible Next steps - Self / Identity / Social Isolation*



## Dual assessment

In parallel to weighting each of the presenting needs and experiences of harm this assessment includes a weighting for each context of harm that may be influencing, driving or protecting against those experiences of harm / vulnerabilities. For adolescents these are broader than the parents / carers due to their increased autonomy and increased time spent outside of the home. Often it can be easiest to assess and respond to the young person and their family as individuals, whereby the locations that the harm occurs (including online locations) can seem the most difficult to change or influence. However, in identifying these macro elements of the young person's life can help assess the decreased capacity of the young person or their parents / carers in disrupting the exploitation.

When looking at context weighting decisions, analyse the information regarding the young person's risk / presenting needs and experiences of harm alongside the context(s) that has the most influence or where vulnerabilities lie for the young person:

Experiences of harm / presenting needs:

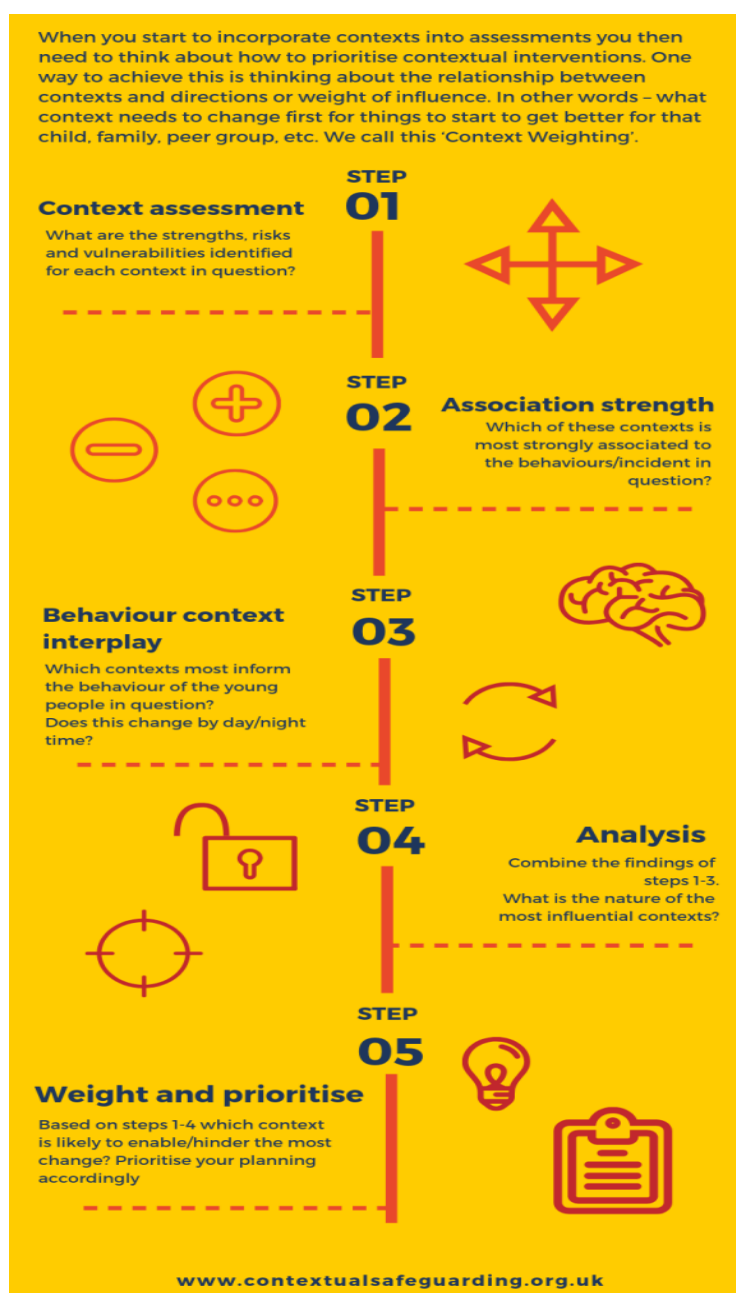
- Coercion / Control
- Running away / Missing
- Sexual health and behaviour
- Offending / violence
- Use of social media
- Substance misuse
- Physical / emotional health

Contexts:

- Spaces / Places
- Peer group / external relationships
- Professional engagement
- Education
- Family / home
- Self / identity

The contexts includes the professional's ability to engage – ensuring that services are effective.

It is common that multiple contexts will be influencing a child or young person's experience of harm. By making a context weighting decision, this allows interventions to be targeted at the context that has the most influence over the situation for the young person, family, peer group etc. in order to create a space where things start to get a little bit better for the child / young person and can avoid the child having to be moved from their family / peer group / school or community.



## Final assessment of overall risk

### Combined assessment

#### Level of risk in regard to experiences of harm

- Coercion / Control
- Running away / Missing
- Use of social media
- Sexual health
- Offending / violence
- Substance misuse
- Physical / emotional health

NO CONCERN	0 - 4	
EMERGING	5 – 16	
MODERATE	17 – 32	
SIGNIFICANT	33 – 50+	

#### Level of risk in regard to the context of harm (influence / lack of safety)

- Places / Spaces
- Peer group / external relationships
- Professional ability to engage
- Education
- Family / home
- Young Person self-identity / isolation

NO CONCERN	0 - 5	
EMERGING	6 – 16	
MODERATE	17 – 32	
SIGNIFICANT	33 – 50+	

### Final assessment of overall risk

#### **Emerging – child / young person is vulnerable to experiencing harm, including outside the family home**

*Some evidence that the child or young person's behaviour may have changed and/or is coming to the attention of multiple services. Some evidence that the child or young person is at risk of harm when in the community, school or from their peers but there are protective influences in these spaces. Some concerns that the child/ young person is at risk of being targeted or groomed, but there are positive protective factors in the child's life. The child / young person may require a referral to targeted early intervention services for education / intervention.*

#### **Moderate – child / young person may be experiencing harm, including outside the family home**

*There is evidence the child / young person may experience protective factors, but circumstances and / or behaviours place him/her at risk of harm, exploitation or violence. A plan is likely to be required to support the child and family in managing the experiences and disrupt the contexts where further escalations in risk is identified.*

#### **Significant – child / young person is experiencing harm, including outside the family home**

*Evidence / disclosure suggests that the child is at immediate and / or continuing risk of exploitation or harm. The child / young person is being drawn or pushed into high risk situations / locations / relationships. Evidence / assessments suggests that the child is experiencing harm / exploitation / violence (they may not recognise this). Coercion / control is explicit.*

LITTE TO NO CONCERN	0 – 9	<i>Advice and guidance</i>	<i>Prevent</i>
EMERGING	10 – 32	<i>Early Help</i>	<i>Support</i>
MODERATE	33 – 64	<i>Assessment</i>	<i>Support &amp; Disrupt</i>
SIGNIFICANT	65 – 100+	<i>Strategy and Plan</i>	<i>Protect &amp; Disrupt</i>

Consideration should be given to multiple referrals within a 6 month period where there is evidence that previous interventions or support may not be having an impact. Information could be seen as part of a larger picture of harm and may lead to professionals being more worried about the young person's risk of harm than in the initial referral.

<p><b>Emerging Risk</b></p> <p>Level of response:</p> <ul style="list-style-type: none"> <li>• Prevent</li> <li>• Support</li> </ul>	<p>Continued support from single agency completing this tool might be the most appropriate course of action. An Early Help Assessment may be deemed appropriate alongside the contextual harm assessment tool if the needs cannot be met by a single agency or that agency is 'stuck'.</p> <p>If appropriate ensure information gathered to complete this assessment is shared with other agencies already working with the young person/family. Consider a professionals or Team Around the Child / Family meeting for this purpose. If appropriate, think about inviting other professionals who may be working the friends/close relationships to the child/family.</p> <p><b>Intervention</b> may be based on <b>preventative</b> and <b>support</b> work i.e. Early Help Plan, coordinated response from the following key agencies; Youth Justice prevention, Education, Safer Merton, Sexual Health, Catch22 Risk and Resilience Service, Housing, Voluntary Sector, Faith based community support, Youth Clubs or Leisure activity providers.</p> <p>Direct work with children, young people and families to develop an awareness of the risks that can lead to a situation in which they may be at risk or exposed to harm in the community, school or with/by peers.</p> <p>Keep records as to new incidents and risk indicators and monitor any changes in vulnerability which may result in increased risk of harm outside the home in the future.</p>
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<p><b>Moderate Risk</b></p> <p>Level of response:</p> <ul style="list-style-type: none"> <li>• Support</li> <li>• Disrupt</li> </ul>	<p>If the child is not open to Children's Services then a referral is to be made. A decision will then be made whether to hold a strategy meeting or progress to an assessment.</p> <p><b>Intervention</b> should include a planned programme to <b>support</b> the child and family to understand and respond to risk, prevent further escalation through co-ordinated responses with those having oversight of contexts and <b>disruption</b> tactics to be considered including consideration via criminal and civil proceedings to disrupt those identified as causing harm or exploiting the child.</p> <p><b>Child Protection plan?</b> There may be situations when risks outside the home are recognised by parents or carers who are responding appropriately and working with agencies to reduce the risk. In these circumstances, depending on the outcome of strategy discussions and any assessments, it may not be appropriate or necessary for a child to be made subject to a child protection plan. But the child and their family may still need multi-agency intervention and support that is well coordinated, regularly reviewed and monitored to make sure it is the right response. It is vitally important that parents and carers get the appropriate help and support they need in these circumstances.</p> <p>If parents or carers are not supporting their child, fail to acknowledge the risks, and/or are not protecting them, then depending on the outcome of the strategy discussion and assessment, a child protection plan may be appropriate. Please see blog by the Director of Ofsted about this matter: <a href="https://socialcareinspection.blog.gov.uk/2020/03/06/dealing-with-risks-to-children-outside-the-family-home/">https://socialcareinspection.blog.gov.uk/2020/03/06/dealing-with-risks-to-children-outside-the-family-home/</a></p> <p><b>Partnership working</b> In order to prevent escalation and disrupt harm in the contexts out of the home then partnership working will be essential. This should include as a minimum: Safer Merton for Spaces/Places; Catch22 Risk and Resilience for Spaces/Places (detached youth work) and Peers. Education Inclusion for Peers and Spaces/Places (Youth Clubs) and Schools; Education Inclusion for Schools; Youth Justice or Tackling Exploitation for Peers.</p> <p>Any significant change in circumstances should lead to a review of risks or review every 3 months.</p>
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<p><b>Significant Risk</b></p> <p>Level of response:</p> <ul style="list-style-type: none"> <li>● Protect</li> <li>● Disrupt</li> </ul>	<p>If child not open to Children’s Services, referral to be made asap. Professionals completing the assessment MUST seek advice from the allocated Social Worker if open to Children’s Social Care. Complete the referral form and attach this assessment, making it clear that it is believed there is a risk of significant harm to ensure a strategy discussion can be held in a timely manner.</p> <p>If it is felt that the child is at immediate risk of harm, the Police must be contacted on 101.</p> <p><b>Intervention</b> with the children, young person and families should be aimed at interventions that can <b>protect</b> the child/young person from the identified harm. This may require <b>disruption</b> measures involving police or partner agencies and support from the family and friends to address risk awareness and staying safe work.</p> <p>A planned programme to raise awareness of exploitation and to provide tools for children and young people to self-protect is required.</p> <p>Disruption tactics to be considered including consideration via criminal and civil proceedings to disrupt perpetrators.</p> <p>Safety plan and actions to include immediate and long-term intensive direct work with the individual child or young person.</p> <p><b>Partnership working</b></p> <p>In order to protect against and disrupt harm in each of the contexts then partnership working will be essential. This should include as a minimum:</p> <ul style="list-style-type: none"> <li>- Safer Merton for Spaces/Places</li> <li>- Education Inclusion for Peers and Spaces/Places (Youth Clubs) and Schools</li> <li>- Education Inclusion for Schools</li> <li>- Youth Justice or Tackling Exploitation for Peers</li> <li>- Catch22 Risk and Resilience Service for Spaces/Places (detached work) and Peers</li> </ul> <p>Coordination with Police and Catch22 Risk and Resilience Service regarding missing episodes and independent return home visits to be completed.</p> <p>Consideration for Health, Police, Children’s Services risk alerts. Cross referencing with links to other safeguarding issues such as Teenage Pregnancy and Domestic Abuse.</p> <p>If open to Youth Justice, close joint working and safety planning.</p> <p>Consultation with the UKHTC / UKBA where appropriate, for example in relation to trafficking.</p> <p>Harm reduction / detox intervention to be offered to the child, young person and family.</p> <p>Risk should be closely monitored and reassessed <b>every 6 weeks</b> as part of the risk reduction process.</p>
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## Planning next steps

See each of the sections for detailed ideas for possible next steps – below is a summary captured under the different elements of intervention (Identify, prevent, protect, disrupt and support)

Also see - <https://www.csnetwork.org.uk/en/publications/intervention-catalogue#>

<b>Identify – as part of assessment tasks, if not complete</b>
<ul style="list-style-type: none"> <li>√ Mapping of peers, relationships, places (including online), cars and routines.</li> <li>√ Direct work to understand and assess behaviours, contexts and perspectives / understanding.</li> <li>√ Timetables / calendars / diaries of behaviour or triggers or access to spaces / harm</li> <li>√ Time lines / chronologies. Genograms / ecomaps</li> <li>√ Case Discussion – hypothesis, unpick trauma</li> <li>√ Complex strategies when multiple people involved or cross borough.</li> <li>√ Seek and share information with each other. Consider specialist assessments.</li> </ul>
<b>Prevent</b>
<ul style="list-style-type: none"> <li>√ Access to services – sexual, youth activities, sports and clubs, education / SALT, counselling, physical and mental health services, faith / diversity and identity forums,</li> <li>√ Education of bullying, peer pressure, push &amp; pull factors, online safety, substance misuse, emotional and mental health, stress and mood, diet and sleep, citizenship, guardianship</li> <li>√ Professional awareness and knowledge – e.g. language guide and good practice guidance</li> <li>√ Restrictions to prevent escalation (curfew / online use / friend's details)</li> <li>√ Pre-incident contracts and planning with young person knowing what would happen if...</li> <li>√ Practical support (bedding, food, clothes) to prevent push factors</li> </ul>
<b>Support</b>
<ul style="list-style-type: none"> <li>√ Referrals to services that can support presenting need or underlying reasons for these</li> <li>√ Identify trusted professionals and network to support – including community guardians</li> <li>√ Direct work of assessment as part of intervention – how can needs be met elsewhere?</li> <li>√ Information and training – parents / carers and professionals</li> <li>√ Access to positive activities and mainstream services – support self-esteem, confidence, sense of identity and belonging, provide purpose and pathways to positive outcomes.</li> </ul>
<b>Protect</b>
<ul style="list-style-type: none"> <li>√ Safety planning and contracts – find my phone, agreed curfew, safety words, trigger planning, online access, safe locations, monitoring and supervision.</li> <li>√ Involve network and ensure all information shared and aware of their role in the safety plan</li> <li>√ Safety measures – panic alarms, CCTV, PNC marker on home, sanctuary scheme. Also in spaces – CCTV / changes to access. Numbers for the young person or family to call</li> <li>√ Specialist interventions (Sexual, forensic, substance misuse, offending, exploitation, violence) and alternative strategies, family support, group work, changes to locations and spaces.</li> </ul>
<b>Disrupt</b>
<ul style="list-style-type: none"> <li>√ Police actions – visiting young person, locations or people of concern, delivering Child Abduction Warning Notice (CAWN), track travel (Oyster or car licence plates)</li> <li>√ Work with network to co-ordinate responses and disrupt activity if necessary. Monitoring.</li> <li>√ Restrictions to pocket money, travel or access to devices / online.</li> <li>√ Youth Justice / Police restrictions – bail / court order requirements.</li> <li>√ Share information – complex strategies, escalations</li> <li>√ Changes to contexts – physical changes to home, school or spaces (lighting / removal of bushes etc) and challenges to stereotypes and negative perceptions</li> <li>√ Young person to self-monitor in order to identify and disrupt behaviours / thoughts.</li> </ul>