# Contextual Harm Risk Matrix Assessment and Safety Planning Tool

* This tool can help you focus on the specific indicators of risk, vulnerability and exploitation and determine whether further advice and/or support is needed. The assessment should support and inform core professionals’ assessments.
* Professionals need to exercise their own judgement when completing the tool. This includes capturing concerns about which they have some evidence **AND** concerns based on their “gut feelings”. Staff should differentiate between the two and explain this in the notes section.
* Where risk or exploitation is suspected the worker should discuss their concerns with their manager and should also inform their agency’s lead professional who will be monitoring the bigger picture for any emerging patterns.
* Professionals should feel free to use the tool creatively, including as part of awareness raising work with children or in engaging parents and carers in understanding the issues.
* **Please refer to the guidance** for more information about each section and each presenting need and context of risk. This includes guidance on how to undertake a contextual weighting of risk and safety planning to help identify, prevent, protect, disrupt, and support against contextual harm.

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| **Name/Role of Person Completing this Assessment** |  | | | | | | |
| **Date** |  | | | | | | |
| **Child or young person’s name** |  | | | | | | |
| **Gender** |  | **DOB** |  | | **AGE** |  | |
| **Ethnicity (**note language / need for interpreter) |  | | | | | | |
| **MOSAIC ID** |  | **YOS Involvement** (Yes / No / Previous) | | | |  | |
| **Legal Status**  (S17, S47 CP Plan, S31, Targeted services) |  | **Known to Police** (Yes / No) | | | |  | |
| **Home Address**  (Address / Postcode) |  | **Accommodation Type** (i.e., Home, Residential, Foster Care, Friends & Family, Supported Lodgings) | | | |  | |
| **Education Placement** (Name of School) |  | **Current Attendance** (%) | |  | | **SEND (**Yes/No)  Diagnosis  ECHP |  |
| **Known to Catch22 Risk and Resilience** (Yes / No / Previous) |  | (Note if Catch22 allocated for Substance Misuse, Missing or Exploitation) | |  | | | |
| **CAMHS** (Yes / No / Previous) |  | (Note if diagnoses or assessment underway) | |  | | | |
| **Physical Health needs** (Yes / No / Previous) |  | Outline any diagnoses / allergies / disabilities | |  | | | |
| **NRM Referral made** (Yes / No / Previous) |  | (Note if made, initial confirmation or final conclusive and the date of last activity) | |  | | | |

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| **Historical Incidents / Story of the Young Person** | |
| Consider cumulative harm and escalating behaviour.  Child response to previous parent/carers boundaries or safety plan. Long term history of abuse or harm.  Significant Events which may have impacted child’s development and presentation. | Summary of historical incidents / story of the young person: |

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| **What are we most worried about?** *Consider frequency, prevalence, severity and impact of presenting needs and experiences of harm. What is the impact on the child’s development and opportunities? Are there overlapping needs that compound the risk?* |
| **What’s working well?** *What are the areas that present no concern and provide opportunities for safety, support, and positive outlook?* |
| **Grey areas (information which is unknown)** |
| **What needs to happen next?** |
| **What is the child young person’s views and wishes?** |

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| --- | --- | --- | --- | --- | --- | --- | --- |
| **NEED** | **Coercion / Control** | **Missing / Running away** | **Sexual health / behaviour** | **Weapons / Offending** | **Social Media / Tech** | **Substance misuse** | **Mental Health** |
| UNIVERSAL(No Concern) | Relationships protective and supportive.  **0** | Arrives home on time. Let’s carers know whereabouts.  Answers phone.  **0** | Good knowledge of healthy relationships and sexual health.  **0** | Young person is not involved with crime or anti-social behaviour.  **0** | Has appropriate access and use of social media and internet  **0** | Young person has a healthy approach to alcohol and drugs.  **0** | Emotional outburst but no concerns for long term impact on wellbeing.  **0** |
| EARLY HELP  (Emerging) | Reduced contact with family/friends.  Excessive contact with someone.  Early grooming.  **3** | Regularly arriving home late.  Absent without permission, returning late to care home.  Absent from school.  Whereabouts often unknown.  Single incident of overnight missing  **3** | Sexually transmitted infections (STI’s).  Understanding of Consent may be unclear.  Verbal or non-contact sexualised behaviour.  Historic referrals regarding concerning sexual behaviour.  Current experience of abuse or neglect  **3** | Attention of ASB team or police.  Talks about carrying a weapon.  Reports from others young person maybe/ are involved or linked to named gang/group.  Glamorises criminal or violent behaviour.  Promoting gangs/ drugs extremist ideologies  Promoting Extremist views harmful to groups of people in society.  **3** | Approached and communicating online by unknown adults/peers.  Lacks awareness of online safety (including parents/carers).  Increased use/importance of social media and behaviour change.  Displaying signs of association and influence from gangs/ drugs, extremist ideologies.  Publishing personal information online  Hidden internet use  **2** | Experimenting with alcohol/cannabis.  Posting images with paraphernalia.  **1** | Low self-esteem. Some or reduced concerns of self-harm and/or eating disorders.  Difficulty in making or maintaining friendships with peers.  Significant change in appearance.  Poor self-image.  Recent Bereavement  **1** |
| TARGETED  (Moderate) | New or expensive possessions unaccounted for.  Unexplained access to cash/money/ bank deposits.  Secretive.  Changes in behaviour or habits.  Experiencing poverty or debt.  Detachment / isolation.  Child experiencing sexual violence or bullying.  Apparent use of mobile phone to control or coerce others.  Concerns that the child is going missing but not reported  Significant age gap with partner  **6** | Number of episodes of running away, missing from home, or missing from school / education or placement.  Unable to give explanations for whereabouts.  **6** | Repeat STI’s / attendance at GUM clinic  Concerning sexual activity (behaviour that is upsetting to others/ assaults /rape).  Allegations of non-penetrative abuse.  Disclosure of physical/ sexual assaults followed by withdrawal.  Concerns about sexual relationship with partner.  Exposure to pornography  Exposure to pornography by another peer or adult.  History of physical or sexual assault within family.  **6** | Excluded for possession of a weapon in school.  Arrested for possession of an offensive weapon, drugs, multiple thefts / going equipped / motoring offences.  Non-compliance of conditions.  Repeat offending.  Known group and gang association (evidence to prove this).  Thought to be carrying a weapon linked to concerns for their own safety.  Volatile/abusive behaviour/ aggression to member of community/ peer group  **6** | Coerced to share inappropriate or sexual images.  Meeting in person after online contact.  Evidence of sexual material being shared without consent.  Multiple SIMs or phones.  Concerns selling drugs online.  Possession of new mobile phone and/or regularly changing of numbers  Viewing and receiving extremist content online and/or building a high number of followers/contacts demonstrating being groomed online.  Using uncommon communication apps or platforms suggested by unknown peers or adults  **4** | Regular use of substances.  Use of drugs with alcohol.    Ability to access drugs easily.    Reports/accounts of Intoxication / ‘black out’ from use.  Concerns the child is selling and/or providing drugs to others (possible coercion)  Change in appearance / mood due to substance use.  **2** | Increased concerns of self-harm.  Self-harm requiring medical assistance  Violent or emotional outbursts.  May be exposed to violence / experiences of psychological trauma.  Noticeable changes in hygiene and presentation.  Significant recent bereavement.  Experiencing bullying at school or bullying others  Diagnosed depression or mental health condition.  **2** |
| SPECIALIST  (Significant) | Evidence of organised online activity / coercive adult contact / county lines / gang activity involvement.  No contact with family/friends/support systems.  Being bought or sold.  Being rewarded for recruiting other young people into a similar situation.  Supports others to travel to areas of conflict, shares interest in travelling abroad in support of r extreme or terrorist ideals/groups.  Threats made to family / home / child experiencing or threatened with violence and or intimidating behaviour.  3 years + older boyfriend /girlfriend.  Trafficked for the purpose of exploitation (including multiple perpetrators, domestic / national/ and international)  **12**. | Missing for more than 48 hours.  Persistently running away.  Missing from home / care and concern about safety or welfare.  Pattern of sofa surfing.  Whereabouts unknown.  **10** | Child under 13 has been forced into sexual activity.  Harmful sexual behaviour.  Child exploited to recruit others into sexual activity.  Repeated pregnancy, miscarriages and/or terminations  Fathering of children within unhealthy relationships.  Increase in severity of concerning sexual behaviour.  Multiple disclosure of physical/ sexual assaults followed by withdrawal.  Clipping (offering sexual favours with the intention to rob the victim)  Adults engaging child under 16 years into sexual activity.    Being taken to hotels or clubs and houses and/or specific locations for sexual activity.  Exposure to extreme pornography and/or by another.  Physical or sexual assault within family.  Physical and or sexual assault within relationship.  Concealed pregnancy.  High number of disclosed sexual partners or high rates of sexual partners disclosed  (consensual / non-consensual)  Untreated Sexual infections  **10** | Charged or convicted of Aggravated Robbery,  Multiple convictions for criminal activity / harm to others  Committed a serious assault /sexual assault / rape.  **10** | Regularly coerced to send / receive indecent images.  Coerced to meet in person for sexual activity.  Devices need to be removed and access always restricted  Accessing inappropriate/unsafe networking forums – dating websites, specialist forums including Self harm, eating disorders and fetish etc.  Child under 16 receiving communication from an adult. meeting unknown peers or adults from websites or forums in person.  **8** | Charged or convicted of  possession of large quantities of Class A and/or B drugs.  Long term / prolific alcohol or drug use / dependence on alcohol or drugs  **10** | Chronic low self-esteem.  Suicidal ideation.  Evidence of emotional abuse; domestic /sexual / physical violence, as witness or victim.  Psychological trauma.  Frequently at A&E. attempted suicide / chronic self-harm requiring hospital attention.  Bereavement has had a chronic effect on young person.  Ongoing bullying at school or bullying others.  Significant psychiatric or mental health involvement  **4** |

If Trafficking and Exploitation is a factor, a referral needs to be made to the National Referral Mechanism

Add the numbers in the selected box from each column to produce an overall weighted score. This will indicate of a risk rating from the table of NEED:

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| --- | --- | --- |
| Universal  (No concern) | 0 – 4 |  |
| Early Help  (Emerging) | 5 – 16 |  |
| Targeted  (Moderate) | 17 – 32 |  |
| Specialist  (Significant) | 33 – 50+ |  |

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| --- | --- | --- | --- | --- | --- | --- |
| **Context** | **Places / Spaces** | **Peer group / external relationships/ Associations** | **Professional engagement** | **Education** | **Family / accommodation** | **Self / identify / social isolation** |
| UNIVERSAL  (No Concern) | Good services in area and young person are aware / engaging positively.  Guardians in area ensure physical and psychological wellbeing of young people.  **0** | Peer group engage in positive activities / clubs / communities.  The group understands risk and harm.  Age appropriate and safe.  Peers that have ‘turned around’ in their journey.  **0** | Trusted adult in professional network.  Impactful engagement.  Curious and flexible.  **0** | Attending and engaging.  School provides a safe space with trusted adults.  Behaviour issues are managed by the school.  **0** | Positive relationships.  Family members understand the risks and implement strategies for those risks.  Place of safety for young person.  **0** | Young person is positively engaging with services.  Has awareness of the risks and grooming processes.  Motivated and positive outlook.  **0** |
| EARLY HELP  (Emerging) | Spending time in areas known for antisocial behaviour or where more vulnerable.  Child/ young person identifies and informs professionals of unsafe locations and reason for this.  Connection to new/unknown area.  **3** | Some indications that unknown adults and/or other exploited children have contact with the child/young person.  Some indications of negatively influential peers. new unknown associates (children and or adults).  **3** | Limited referral history with services.  Others lack confidence in worker or service to manage risk or work with the young person.  Multiple workers are confused or disagreeing on risk for the young person.  **3** | Mainly engaged in ETE but attendance /behaviour/attainment issues.  Some conflict with school.  Reports of bullying but responded to appropriately.  Peer concerns managed by the school.  **3** | Overcrowding.  Decline in relationship and/or communication.  History of abuse.  Family struggle to recognise and respond to risks.  Family’s response not having an impact.  Breakdown in home and/ or placements.  Poor communication within family and young person.  Parent or carer / sibling health difficulty or disability.  **3** | Perceived inability or reluctance to access more mainstream support.  Reduced access due to their ethnicity / cultural background / being in care / Identifying as LGBTQ / Educational Needs (SEN).  Has a disability which impacts upon capacity to consent, decision making or perception of risk taking.  **2** |
| TARGETED  (Moderate) | The neighbourhood or locality is having a negative impact on the child.  Reports of involvement in areas of concern.  Frequently spending time in locations, including online, where they can be anonymous or at risk of experience harm / violence / exploitation.  Introduced to adult activities for 18+ years.  6 | Unknown adults and/or other exploited children/young people associating with the child/young person.  Escalation in behaviour of peer group.  Accompanied by an adult who is not a legal guardian.  Arrested with individuals who at risk of exploitation / violence.  Getting into cars with unknown people / known subjects of concern or pose a risk.  Being taken to demonstrations / marches where violent extremist and /or ae inappropriate imagery or language is used.  Contact with people new to the area  **6** | Services previously involved and closed; new referral received for similar concerns.  Worker(s) or network believes the problem is in the child and they are making choices.  Several services involved but little change for the young person.  **6** | Irregular/poor attendance (below 80%).  Fixed term exclusion(s).  Reduced timetable. SLC difficulties and/or EHCP. ‘  Culture’ of inappropriate behaviour not managed.  Multiple changes of provision.  **6** | Parent/carer(s) expressing sense of hopelessness.  External factors have more influence / family not having an impact on the child’s risks.  Clear ‘push factors.  Low emotional warmth highly critical household.  Parents unable to acknowledge risk.  History of being a child looked after.  Alone at home for significant periods of time. **6** | Isolated and refuses to participate in activities.  Experiencing bullying or social isolation that may be exacerbated by personal, cultural, sexual identity or education needs.  Targeted by groups or individuals due to their vulnerability or perceived reputation.  Unable to discuss or disclose sexuality or gender identity to family / friends.  **4** |
| SPECIALIST  (Significant) | Found in areas/properties known for exploitation / violence.  Taken to hotel / B&B / property with intention of being harmed or harming others.  Area having profoundly negative effect on the child.  Removed from red light districts/ drug houses by professionals.  Child reports to have been abducted.  **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.  Found with adults / high risk individuals out of borough. Is being exploited to ‘recruit’ others.  Multiple incidents of attending inappropriate or unsupervised parties or other 18+ venues.  Tattoos, scars, marks, behaviours, sexual activity believed to be related to gang or group association.  **12** | History of multiple services / referrals with little change or escalation in risk.  Worker or network makes derogatory statements of young person and is unable to understand needs, trauma, push and pull factors for the young person.  Services report unable to keep safe.  **8** | NEET.  Regular breakdown of school placements.  Lack of trust in education system (young person or parents/carers).  Repeated concerns about school’s management of behaviour.  **8** | Homeless or sofa surfing.  Multiple moves or broken attachments across family.  Family not supporting child, fail to acknowledge risks.  Child blamed.  Family involved in exploitation / violence.  Parent abusive physically or emotionally.  Staying with adult or other believed to be exploiting them.  Abduction and forced imprisonment.  Carers / parents unwilling to acknowledge risk.  Parent carer colluding in behaviours and or relationships.  Currently a child looked after or on CP plan.  Adults/ peers visiting the address who pose a risk to the child.  **8** | Negative sense of self and abilities that risk of causing harm.  Completely isolated, refusing activities.  High levels of social isolation that may be exacerbated by personal, cultural, sexual identity or education needs.  6 |

Add up the weighted scores above from CONTEXT Table to achieve a sub-total:

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| --- | --- | --- |
| UNIVERSAL  (No Concern) | 0 – 5 |  |
| EARLY HELP (Emerging) | 6 – 16 |  |
| TARGETED  (Moderate) | 17 – 32 |  |
| SPECIALIST  (Significant) | 33 – 50+ |  |

# Final assessment

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| **Analysis and reflection** |
| How worried are you about this child/yp and why? How safe is the child? How motivated is the family? How well is the safety plan working?  ß-------------------------------------------------------------------------à       0        1        2        3        4        5        6        7        8        9        10  **0 High Risk -10 Less Risk** |

## **Final assessment of overall risk**

**Add up** the sub-totals from the presenting **needs** and **contex**t of harm box above to achieve a total score

**Total Score =**

**Outcome Consultation**

|  |  |  |
| --- | --- | --- |
| UNIVERSAL (No Concern) | 0 - 9 | *Getting help* |
| EARLY HELP (Emerging) | 10 – 32 | *Getting Help Advice (School/ Health*  */ Voluntary agencies)* |
| TARGETED  (Moderate) | 33 – 64 | *Getting more help*  *(Family Wellbeing Team / Catch 22/ Contextual Safeguarding Team* |
| SPECIALIST  (Significant) | 65 – 100+ | *Getting risk support*  *(Catch 22 / Contextual Safeguarding Team)* |

**Early Help (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.*

**Targeted (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.*

**Specialist (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.*

# Next steps and planning **(Plan to be completed by allocated workers/network after consultation)**

* Please refer to the guidance to review the level of involvement required from early help or statutory services and the potential child protection pathway
* The guidance outlines potential next steps for each of the presenting needs / experiences of harm and each of the contexts
* The planning is to support further identification of risk (the need for separate assessments or direct work that is yet to be completed), prevention activities (including partner activities), protection and disruptions for higher risk concerns and support options.
* The assessment and plan are designed to support existing assessment and planning processes focused on assessing contextual harm and increasing adolescent safeguarding.

**Danger statement:**

**Safety Goal:**

|  |  |  |
| --- | --- | --- |
| **Identify – what direct work needs to occur to help identify risks and perceptions of risk?** | | |
| **What needs to happen** | **Agency / Person** | **Timescale** |
|  |  |  |
|  |  |  |
|  |  |  |
| **Network Only – Not to be shared with family or YP without agreement** |  |  |
|  |  |  |
| **Prevent – what measures can be put in place to prevent escalation of risk?** | | |
| **What needs to happen** | **Agency/Person** | **Timescale** |
|  |  |  |
| **Network Only – Not to be shared with family or YP without agreement** |  |  |
|  |  |  |
| **Support – what is needed to support the child, parents/carers, trusted adults / peers, school / community?** | | |
| **What needs to happen** | **Agency / Person** | **Timescale** |
|  |  |  |
| **Network Only – Not to be shared with family or YP without agreement** |  |  |
|  |  |  |
| **Disrupt – what measures are required to monitor / locate / stop risk** | | |
| **What needs to happen** | **Agency / Person** | **Timescale** |
|  |  |  |
| **Network Only – Not to be shared with family or YP without agreement** |  |  |
|  |  |  |
| **Protect- what immediate measures need to be put in place to protect the young person?** | | |
| **What needs to happen** | **Agency / Person** | **Timescale** |
|  |  |  |
| **Network Only – Not to be shared with family or YP without agreement** |  |  |
|  |  |  |