**Contextual Harm screening tool - point of referral**

Guidance

This tool is to support MASH when reviewing referrals for young people where there are presenting needs or experiences of harm and to review the level of safety or risk present for the young person and in the contexts in which they spend their time.

The information in this tool is a summary from the full guidance for completing the contextual harm risk matrix and planning tool

The accompanying protocol also sets out the processes and thresholds for responding to contextual harm, including when an assessment is needed in regard to a peer group or location.

This tool (and full risk matrix) is separated into two sections

Presenting Needs and Experiences of harm

* + Coercion or Control (exploitation)
	+ Running Away or going missing
	+ Sexual health, inappropriate or harmful sexual behaviour
	+ Weapons, criminal behaviour or antisocial behaviour
	+ Concerns about use of social media or technology
	+ Substance misuse
	+ Physical and emotional health

Contexts of safety or harm :

* + Within the professional network (engagement)
	+ Places / Spaces (locations of concern)
	+ Peer groups / external relationships
	+ Family relationships / accommodation
	+ Education
	+ Self / identify / social isolation

A brief summary is provided of the factors to determine the level of risk (no concern, emerging, moderate or significant), which includes a scoring matrix.

To ensure that cumulative harm and compounding needs are recognised all presenting needs should be considered to inform the response.

Where either the total score or one or more area is ‘significant’ this should trigger an s47 Enquiry. Where there is a total score or a few areas are ‘moderate’ this would likely require a Child and Family Assessment (utilising the full contextual harm risk matrix tool). The total scores when all accumulated would result in:

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| Little to no concern | 0 - 9 | *Advice and guidance* |
| EMERGING  | 10 – 32  | *Early Help* |
| MODERATE  | 33 – 64  | *Assessment*  |
| SIGNIFICANT  | 65 – 100+ | *Strategy and Safety Plan*  |

Please note that substance misuse and mental health are scored lower than other areas as these on their own do not represent contextual / extra-familial harm but do complicate and compound risk. Where there is significant risk in these areas consultation must occur with Catch22 (substance misuse) or CAMHS.

The context in regard to the young person has the lowest scoring as the focus should be on those providing safety or causing harm but where there are significant concerns in regard to inclusion / social isolation this will certainly complicate and compound risk.

Please always consider the historical context of incidents and the young person’s experience of harm over their lifetime.

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| **NEED** | **Coercion / Control** | **Missing / Running away** | **Sexual health / behaviour** | **Weapons / Offending** | **Social Media / Tech** | **Substance misuse** | **Mental Health** |
| No Concern | Relationships protective and supportive. | Comes home on time. Let’s carers know whereabouts. Answers phone.  | Good knowledge of healthy relationships and sexual health.  | Young person has no involvement with crime or anti-social behaviour.  | Has appropriate access and use of social media and internet | Young person has a healthy approach to alcohol and drugs.  | Emotional outburst but no concerns for long term impact on wellbeing.  |
| EMERGING | Reduced contact with family/friends. Excessive contact with someone. Early grooming. **3** | Regularly coming 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). Consent issues may be unclear. Verbal or non-contact sexualised behaviour. Historic referrals in regard concerning sexual behaviour. **3** | Attention of ASB team or police. Talks about carrying a weapon. Reports from others that involved in named gang. Glamorises criminal or violent behaviour. **3** | Approached and communicating online by unknown adults/peers. Lack of awareness of online safety (and parents/carers). Use of social media and behaviour changed. **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. **1** |
| MODERATE  | New or expensive possessions unaccounted for. Unexplained access to cash/money. Secretive. Changes in behaviour or habits. Experiencing poverty or debt. **6** | Number of episodes of running away, missing from home or missing from school / education or placement. Unable to give explanations for whereabouts. **6** | Multiple / untreated sexually transmitted infections (STI’s). Concerning sexual activity (behaviour that is upsetting to others). Allegations of non-penetrative abuse. **6** | Excluded for weapon in school. Arrested for possession of offensive weapon, drugs, multiple thefts / going equipped / motoring offences. Non-compliance of conditions. **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 **4** | Regular use of substances. Use of drugs with alcohol. Ability to access drugs easily. Intoxication / ‘black out’ from use. Change in appearance / mood due to use. **2** | Increased concerns of self-harm. Violent or emotional outbursts. May be exposed to violence / experiences of psychological trauma. Noticeable changes in hygiene **2** |
| SIGNIFICANT  | Evidence of organised online activity / coercive adult contact / county lines / gang activity involvement. No contact with family/friends/support systems. **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** | Harmful sexual behaviour. Child exploited to recruit others into sexual activity. Repeated pregnancy, miscarriages and/or terminations. Increase in severity of concerning sexual behaviour. **10** |  Charged or convicted of Aggravated Robbery/Use of offensive weapon/ possession of large quantities of Class A drugs. Intentional harm of others / animals. **10** | Regularly coerced to send / receive indecent images. Coerced to meet in person for sexual activity. Devices need to be removed and access restricted at all times. **8** | Evidence of dependency. Using opiates (e.g. heroin, crack). Injecting. Supply of substances to others. Dependency putting others at risk. **4** | Chronic low self-esteem. Suicidal ideation. Evidence of emotional abuse; domestic /sexual / physical violence, as witness or victim. Psychological trauma. Frequently at A&E. **4** |

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|  | **Places / Spaces** | **Peer group / external relationships** | **Professional engagement** | **Education** | **Family / accommodation** | **Self / identify / social isolation** |
| No Concern | Good services in area **and** young person is aware / engaging positively. Guardians in area ensure physical and psychological wellbeing of young people. | 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. | Trusted adult in professional network. Impactful engagement. Curious and flexible.  | Attending and engaging. School provides a safe space with trusted adults. Behaviour issues are managed by the school. | Positive relationships. Family members understand the risks and implement strategies for those risks. Place of safety for young person.  | Young person is positively engaging with services. Has awareness of the risks and grooming processes. Motivated and positive outlook.  |
| 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. **3** | Some indications that unknown adults and/or other exploited children have contact with the child/young person. Some indications of negatively influential peers. **3** | Limited referral history with services. Lack of confidence in worker / service to manage risk or work with adolescents. Multiple workers confused or disagreeing on risk. **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. **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). **2** |
| MODERATE  | The neighbourhood or locality is having a negative impact on the child. Frequently spending time in locations, including online, where they can be anonymous or at risk of experience harm / violence / exploitation. **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. **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. **6** | Irregular/poor attendance (below 80%). Fixed term exclusion(s). Reduced timetable. SLC difficulties and/or EHCP. ‘Culture’ of inappropriate behaviour not managed. **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’. **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. **4** |
| 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. **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. **12** | History of multiple services / referrals with little change or escalation in risk. Worker makes derogatory statements of 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. **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** |

**Crib sheet for scoring referral**

Child’s name:

Date of referral:

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| **Area of presenting needs / harm** | No Concern | Emerging | Moderate | Significant | Total |
| Coercion / Control | 0 |  | 3 |  | 6 |  | 12 |  |  |
| Running Away / Going Missing | 0 |  | 3 |  | 6 |  | 10 |  |  |
| Sexual health / harmful sexual behaviour | 0 |  | 3 |  | 6 |  | 10 |  |  |
| Weapons / Criminal Activity / ASB | 0 |  | 3 |  | 6 |  | 10 |  |  |
| Use of Social Media / technology | 0 |  | 2 |  | 4 |  | 8 |  |  |
| Substance Misuse | 0 |  | 1 |  | 2 |  | 4 |  |  |
| Physical and Emotional health | 0 |  | 1 |  | 2 |  | 4 |  |  |
| **Contexts of Harm** | No Concern | Emerging | Moderate | Significant | Total |
| Places / Spaces | 0 |  | 3 |  | 6 |  | 12 |  |  |
| Peer groups / external relationships | 0 |  | 3 |  | 6 |  | 12 |  |  |
| Ability of Professionals to engage | 0 |  | 3 |  | 6 |  | 8 |  |  |
| Education | 0 |  | 3 |  | 6 |  | 8 |  |  |
| Family relationships / accommodation | 0 |  | 3 |  | 6 |  | 8 |  |  |
| Self / identity / social isolation factors | 0 |  | 2 |  | 4 |  | 6 |  |  |

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| Little to no concern | 0 - 9 | *Advice and guidance* |  |
| EMERGING  | 10 – 32 \* | *Early Help* |   |
| MODERATE  | 33 – 64  | *Assessment*  |   |
| SIGNIFICANT  | 65 – 100+ | *Strategy and Safety Plan*  |   |

**\* If an area on its own scores 10 or more this should result in a strategy or multiagency adolescent risk meeting.**

# **Planning next steps**

The Guidance has detailed ideas for each section – below is a summary for each of the levels of response from Prevent to Protect.
***NB: An assessment is an intervention in its own right***

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| Prevent | * Access to services – sexual, youth activities, sports and clubs, education / SALT, physical and mental health services, faith / diversity and identity forums,
* Education of bullying, peer pressure, push & pull factors, online safety, substance misuse, emotional and mental health, diet and sleep, citizenship
* Professional awareness and knowledge – e.g. language guide and good practice guidance
* Restrictions to prevent escalation (curfew / online use / friend’s details)
* Pre-incident contracts and planning with young person knowing what would happen if…
* Practical support (bedding, food, clothes) to prevent push factors
 |
| Support | * Referrals to services that can support presenting need or underlying reasons for these
* Identify trusted professionals and network to support – including community guardians
* Direct work of assessment as part of intervention – how can needs be met elsewhere?
* Information and training – parents / carers and professionals
* Access to positive activities and mainstream services – support self-esteem, confidence, sense of identity and belonging
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|  Identify | * Mapping of peers, relationships, places (including online), cars and routines.
* Direct work to understand and assess behaviours, contexts and perspectives / understanding.
* Timetables / calendars / diaries of behaviour or triggers or access to spaces / harm
* Time lines / chronologies. Genograms / ecomaps
* Case Discussion – hypothesis, unpick trauma
* Complex strategies when multiple people involved or cross borough.
* Seek and share information with each other. Consider specialist assessments.
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| Disrupt | * Police actions – visit young person, locations or people of concern; deliver Child Abduction Warning Notice (CAWN), track travel
* Work with network to co-ordinate responses and disrupt activity if necessary. Monitoring.
* Restrictions to pocket money, travel or access to devices / online.
* Youth Justice / Police restrictions – bail / court order requirements.
* Share information – complex strategies, escalations
* Implement changes to contexts – physical changes to home, school or spaces (lighting / removal of bushes etc) and challenges to stereotypes and negative perceptions
* Young person to self-monitor in order to identify and disrupt behaviours / thoughts.
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| Protect | * Safety planning and contracts – find my phone, agreed curfew, safety words, trigger planning, online access, safe locations, monitoring and supervision.
* Involve network and ensure all information shared and aware of their role in the safety plan
* Safety measures – panic alarms, CCTV, PNC marker, sanctuary scheme. CCTV / changes to access in spaces. Numbers for young person or family to call
* Specialist interventions (sexual, forensic, substance misuse, offending, exploitation, violence) and alternative strategies, family support and group work
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