



**SURREY**  
COUNTY COUNCIL



# **Risk and Vulnerability Management**

**Surrey's multi agency response to  
supporting children who are  
vulnerable to or who are  
experiencing Extra Familial Harm**

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## Terms of Reference

Risk and Vulnerability Management (RVM) brings together partners from Children's Services including Social Care, Family First, Youth Justice and Placement Services, Surrey Police, Health Services, Education and Inclusion providers, District and Borough Community Safety, and Community and Voluntary Organisations. The purpose of RVM is to connect and hold oversight of the individual plans around children, the disruption of activity by those causing harm, and context-based intervention to increase safety. Partners review active plans to assure the identification and response to extra-familial harm is targeted and proportionate to need, risk and vulnerability. Chairs must be satisfied that plans are robust or where required direct action, resolve, or escalate within the relevant agency line of command.

To achieve the stated aims, the Adolescent Service Central Hub threads together knowledge to build a comprehensive and dynamic overview of the individuals, groups and contexts (places and spaces) impacted. This ensures that RVM can provide scrutiny and oversight of the data and analytics that indicate active threat or harm, identification of adults or groups and activity to disrupt, and context-based responses linked to extra-familial risk and abuse.

The Central Hub and RVM panels link directly with the eleven District and Boroughs across Surrey. The framework for targeted tactical context-based responses is via the multiagency Joint Action Group (JAG) framework, with the assistance of the Central Hub. The Central Hub ensures the flow of information between groups with RVM ensuring representation across agencies where required. Bi-Monthly strategic risk and mapping achieves the countywide overview of all activity and feeds SSCP Subgroups and Strategic Boards.

We will measure the success of our Extra-Familial Harm and Risk and Vulnerability Management Pathway in observing:

- **Response** - Practice review will demonstrate services responding at the earliest opportunity to prevent, disrupt and protect robustly when concerns are in their infancy. For children identified later, we will observe a reduction in the frequency and severity of harm.
- **Consistency** - We will observe improved consistency in how extra-familial harm is understood across the partnership, with clear thresholds and resultant action. We will observe continuity in how risk is reviewed, graded and responded to throughout intervention.
- **Knowledge** - Our knowledge of where risk, harm and abuse is located will improve and this will inform our understanding of children and contexts impacted. This will support both initial decisions, and the cycle of assessment, intervention and review.
- **Dynamic** - Our understanding of harm will be dynamic rather than static and we will observe a moving picture that will support onward action specific to current circumstances. Overtime, this will contribute to a unique knowledge of areas, locations and themes.

- **Partnership** - Work undertaken will align partners closely in their collective understanding and ownership of action required. It will lay a foundation for the development of better joint assessment, investigation and intervention.
- **Culture** - A shared thinking space to consolidate responses between agencies and achieve the alignment of collective ownership of complex challenges. We will observe an active working together to understand and intervene across the system

## Information Sharing Agreement Statement

The Risk and Vulnerability Management (RVM) process supports multi-agency information sharing and discussion but does not replace the need for wider information sharing which should also take place between relevant practitioners outside of any RVM meetings. Likewise, RVM is not a replacement for good case management. RVM supports the overall grading of risk and resultant safety and disruption planning. Decisions are made based on information provided in advance, information shared between agencies and discussion.

### PURPOSE

To share information between relevant agencies in respect of all children who are at ***risk of extra-familial harm including sexual and criminal exploitation, serious violence, radicalisation and missing children***. Meetings and reviews will identify the specific risk to each child, ensuring that a multi-agency safety and disruption plan is in place.

All individuals must comply with the Multi Agency Information Sharing Protocol ([Surrey Multi-Agency Information Sharing Protocol - Surrey County Council \(surreycc.gov.uk\)](https://www.surreycc.gov.uk/information-sharing-protocol)) and have due regard to the handling and management of the personal data regarding perpetrators & victims.

Please refer to Appendix F for full version.

## Extra-Familial Harm Pathway

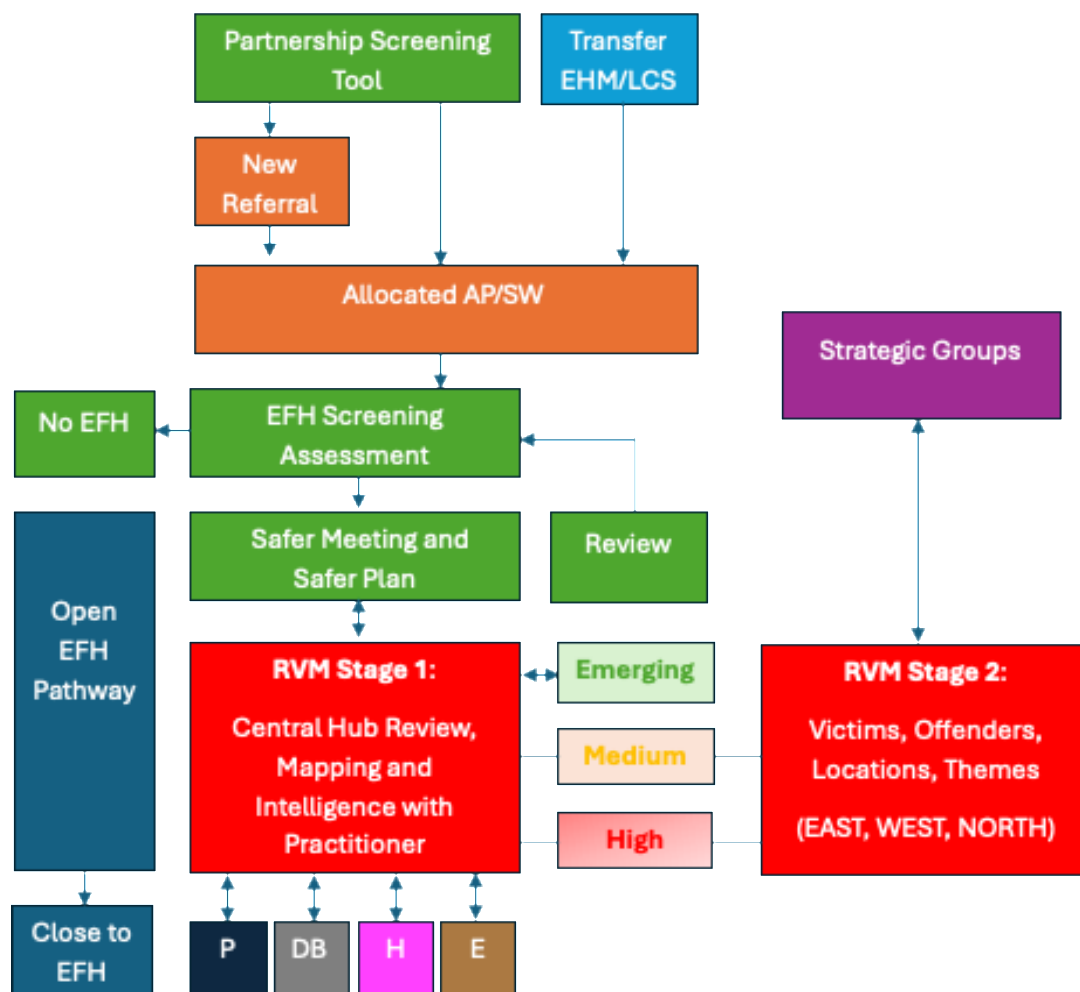
Children's Social Care including Youth Justice are the lead agency for assessing and coordinating the response to children who are at risk of or suffering extra-familial harm and abuse.

Extra Familial Risks and Harms are defined by Firmin et al., (2022) as:

- Sexual exploitation of children and young people by adults
- Criminal exploitation of children and young people, particularly for the purposes of cultivating, trafficking, distributing and/or selling illegal substances
- Serious physical violence between young people, including weapon enabled violence, some of which may be connected to organised criminal groups

- peer-to-peer sexual abuse and other forms of harmful (problematic or inappropriate) sexual behaviour displayed by young people towards their peers
- The radicalization of young people into political or religious ideologies that place them at risk of physical or emotional harm
- Physical, sexual or emotional abuse, and/or coercive control, young people may experience in their own romantic/intimate relationships
- Children who pose a Serious Risk of Harm to others

Extra Familial Harm Screening, Assessment, Planning and Review Workflow



For children not already known to services, the entry route is via the Children’s Single Point of Access (CSPA). An Extra-Familial Harm five-question tool and accompanying guidance (Appendix A) has been developed by Surrey Children’s Safeguarding Partnership to assist all professionals to identify extra-familial harm. Following referral into allocated services, the pathway ensures the universal Extra-Familial Harm Screening Assessment (Appendix B) is completed and where required a Safer Plan created (Appendix C). The Assessment and Plan

Risk and Vulnerability Management

are interventions that are quality assured by the Central Hub who retain oversight of all **Emerging** risk of harm, and schedule **Medium** and **High** for review via the Risk and Vulnerability Management area panels. Each assessment and plan is reviewed in accordance with the grading timeframes below, until such time that risk or harm has reduced to the point of closure to the pathway.

RVM Stage 1 involves multiagency information sharing and liaison across agencies with practitioners to ensure planning is as robust as possible. RVM Stage 2 brings together the overview of individual plans for children graded Medium and High, alongside the disruption of offenders and the increasing of safety in identified locations and contexts.

## Identification and Practice

The Extra-Familial Harm Screening Assessment replaces the Child Exploitation Risk Assessment Template (CERAT) as the universal tool that the lead professional completes if extra-familial harm is suspected or identified. It should be undertaken with the child, family and multiagency network to help identify the nature, severity, and frequency of harm and to support the creation of a Safer Plan. The Safer plan is designed to support the child, family, and network to increase safety around the child including the disruption of harm.

The information sharing, assessment and planning required to create robust plans that help and protect children, families and communities defines 'good practice'. Professionals must work together from day 1 to gather information and determine who is best placed to respond to the identified needs of the child and their family. The Safer Meeting (Appendix D) has been devised as a universal tool for partners to use to achieve this where extra-familial harm impacts a child. The format can operate as a stand-alone meeting or can be accommodated within a TAF, CIN or Core Group for example and has replaced intervention meetings. In practice this means that children, families, and professionals are held within one assessment, planning, review and governance framework.

This work should take place in advance of the RVM process, with the completed Assessment and Plan being the focus of discussion and review. It is the job of the Central Hub functions and RVM Stage 1 to provide additional, partnership oversight to ensure all elements necessary to increasing safety and disrupting harm are in place. RVM Stage 2 holds strategic oversight of children graded medium and high, the disruption of offenders, and any locality-based activity to increase safety/disrupt harm and the response to arising themes.

## Grading and Management

The grading of risk and harm should be based on the nature, severity and frequency of harm and its impact. For children who are assessed as **Medium** or **High** this should result in an enhanced or intensive response as outlined within our scaled approach.

<p>➤ <b>Emerging</b></p>	<p>The child is:</p> <ul style="list-style-type: none"> <li>at risk of suffering extra-familial harm and would benefit from additional support</li> </ul> <p>Context:</p> <ul style="list-style-type: none"> <li>there are indications or changes in context that could indicate a threat of harm</li> </ul> <p><i>EFH Assessment and Plan should be reviewed with the child and network bi-monthly by the Lead Professional and Central Hub RVM1</i></p>
<p>➤ <b>Medium</b></p>	<p>The child is or is likely to be:</p> <ul style="list-style-type: none"> <li>suffering <b>harm</b> and needs targeted intervention</li> <li>and/or causing or likely to cause <b>harm</b></li> </ul> <p>Context:</p> <ul style="list-style-type: none"> <li><b>harm</b> is taking place in context, or the threat is likely and will impact the child(ren) and/or the community</li> </ul> <p><i>EFH Assessment and Plan should be reviewed monthly by the Lead Professional and Central Hub RVM1, and bi-monthly by RVM2</i></p>
<p>➤ <b>High</b></p>	<p>The child is:</p> <ul style="list-style-type: none"> <li>suffering <b>abuse</b> and/or needs immediate or intensive work</li> <li>causing or likely to cause <b>serious</b> harm</li> </ul> <p>Context:</p> <ul style="list-style-type: none"> <li><b>abuse</b> is taking place in context. Further <b>abuse</b> is very likely and imminent, the consequences of which will be serious/severe.</li> </ul> <p><i>EFH Assessment and Plan should be reviewed fortnightly by the Lead Professional and a minimum of monthly by RVM2</i></p>
<p>➤ <b>Context</b></p>	<p><i>All locations should be reviewed at a minimum of every twelve-weeks</i></p>

**Emerging** need is managed at practice level with the Central Hub/RVM1 providing multiagency collaborative scrutiny of assessment, grading, and plan. The response and intervention arm of the Central Hub can assist in the planning and activity required to prevent and support children who are vulnerable to extra-familial harm. When an assessment and plan is received and the risk to the child is assessed as **Medium** or **High**, the child will be timetabled for discussion at the Bi-Weekly RVM Stage 2 area panel. If a child is identified as a frequent missing person; or intelligence is submitted; or the child is arrested for an offence linked to exploitation, modern slavery, or trafficking, the EFH Pathway will be initiated (if not already) and the child will be timetabled for discussion at the Bi-Weekly RVM Stage 2 area panel.



A **Location/Context** represents a group, place, or space where a child, or children, are suffering or likely to suffer extra-familial harm. This could be following a significant event (e.g., serious violent or sexual crime), or where a particular location or group repeatedly comes to notice. A context will be identified and held by the Central Hub who will liaise directly with District and Borough partners and schedule discussion at RVM area panel where required. Or information will be passed via the JAG Chair to the Central Hub via Children's Services representative. Tactical activity and multiagency operational management should be held within the Joint Action Group (JAG).

## Review of Assessments and Plans

All EFH Assessments and Safer Plans are reviewed by immediate line managers and work flowed on LCS/EHM for multiagency oversight and response via the Adolescent Service Central Hub/RVM1. Each Assessment and Plan is reviewed by dedicated Children's Services Team Managers, Missing and Exploitation Unit Detective Sergeants, and Mental Health Social Worker/Manager. The Safer Plan is an active document that should be shared by the Lead Professional with the relevant agencies to ensure the joint response to dynamic need, risk and vulnerability. Through the central review of all assessment and plans, intelligence is gathered that informs the divisional and countywide understanding of extra-familial harm in context, and the identification of emerging risk that feeds into RVM Stage 2.

### For individual children and adults of concern:

- In multiagency discussion, all information and intelligence, both current and historical that each agency holds relating to a child or adult should be available for discussion to establish harm and risk posed.
- The review of Assessments and Safer Plans must determine if sufficient safeguards including disruption are in place. Enquiries should be undertaken across the network with actions and recommendations made to increase safety where this is not evident.
- When information indicates immediate action is required, this should be escalated to operational leads with updating information, recommended action, and timescales.
- The review of Assessment and Plans by Line Managers, Central Hub and RVMs must document a clear rationale detailing the collective assessment of risk and vulnerability. Within the Central Hub and RVM Panels, Children's Services Business Support ensure this is added to an individual's record following discussion as a case note.
- To ensure critical information is available to services who may encounter the child, their *active* EFH Status and Safer Plan will be shared with partners, and police update the child's record. Where available a flag/marker will be placed on the young person's record to indicate EFH status.

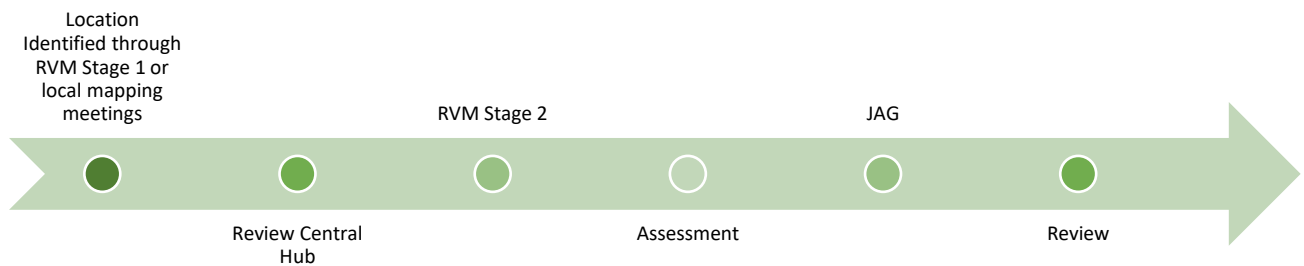
### For contexts (groups, spaces and places):

- For the partnership, District and Borough staff and Police are trained to ensure that where concerns are identified about a location, this should be referred to the relevant Joint Action Group (JAG). JAG Chairs are trained to ensure areas where children and young people are impacted by extra-familial risks and harms should be referred to the central hub. Within the central hub, patterns and trends are identified and scheduled for



discussion/review at the area based RVM2. The countywide picture is held within the monthly Risk and Mapping Meeting.

- Area based Children’s Services Team Managers who are District and Borough specific are standing members of each JAG and represent **all** of Children’s Services.
- For Extra-Familial Harm impacting children, the Central Hub will take the lead in liaising across the partnership and gathering the information when a context is referred or identified. Area RVM2 Panels will be sited, and any formal Contextual Assessment will be led by the Central Hub. While the Central Hub will take the initial lead, the tactical and operational response should be located within the Joint Action Group (JAG) Framework.
- The ‘Location’ and those impacted will be recorded on ECINS by Business Support alongside standalone minutes. This feeds into the central hub and will help to build understanding of where harm, risk and vulnerability is located which will inform onward decision making for those impacted or who come to future notice through association or presence in an identified context.
- For children identified through this process and suspected to be on the periphery of harm, a referral should be made via the CSPA, or information shared with the lead professional to ensure dynamic flow of information. If any agency raises a child for assessment via the RVM process, Social Care representatives should take the action to support the timely assessment of the child and resultant plans.



## Risk and Vulnerability Management (RVM Stage 1 and Stage 2)

### RVM Stage 1

Initial multiagency review takes place within the Central Hub led by CEMU Sergeants and Central Hub Team Managers, Health and Education partners and liaison with District and Borough Services. RVM Stage 1 aims to review and strengthen all assessments and plans that are due to be heard at Stage 2 with the practitioner. The outcome of review is to either progress to RVM Stage 2 or that further information is needed. At present Stage 1 is via scheduled meetings, however in time it is hoped that the Stage 1 of RVM becomes a business-as-usual function of our multidisciplinary response.

### RVM Stage 2

This is a bi-weekly multiagency panel that takes place across the three Surrey divisions, North, East and West. The panels are co-chaired by the area Adolescent Service Manager and CEMU Detective Inspector. Meetings follow a VOLT framework, focussing on Victims (Children), Offenders (Adults), Locations (Contexts) and Themes. Meetings need to be assured that plans

in place have recognised risks and harms, are proportionate and robust, and are delivering increased safety including the disruption of harm. This relates to a child, adults or an identified location.

- Children's Services Business Support schedule all individuals and locations for review and ensure lead professional(s) are invited and reminded to review/update assessment/plan.
- The RVM Pathway outlines Line Managers should review individual plans in accordance with the assessment of risk and vulnerability. It should be clearly recorded on the child's file that both the assessment and plan have been reviewed and the rationale for decision making clear.
- There may be occasions whereby the Safer Plan needs to be updated urgently in response to a notable change or incident, for example a placement move, injury or arrest. In such circumstances, the review assessment may take place subsequently to help inform trajectory and/or permanence planning.

#### Practitioner actions

RVM Stage 1 will consider the following questions and **agree risk rating, direct action in terms of work needed to complete the plan, or where risk is medium/high to review at RVM Stage 2:**

- *Does the plan include the necessary individuals and agencies required?*
- *Is the (suspected) harm or abuse being investigated appropriately?*
- *Is there one plan that outlines collective activity, future goals and all affected?*
- *Is the current activity sufficient to disrupt harm and increase safety?*

RVM Stage 2 focuses on Victims, Offenders, Location and Themes. They will review the Safer Plans for all young people who are at medium or high risk of EFH to ensure both action and progress. Review must determine if the necessary activity is in place and achieving sufficient progress. If a child is no longer deemed medium or high, the child no longer needs to be reviewed via RVM Stage 2 and can be managed by the team around the relationship and overseen by the Central Hub at Stage 1 as an Emerging Risk. If the panel believe specific action is required to ensure the necessary disruption or safeguarding of a child, they will direct action needed, the timescales and lead professional(s) tasked. This may include for example, the convening of an urgent Safer Meeting (Appendix D), or direct escalation to the responsible senior manager within an identified agency. RVM will assist practitioners where it is identified strategic support is required to progress the plan. RVM2 holds responsibility to track actions and impact, resolve strategic issues between partners and support action in identified locations.

## RVM Countywide Strategic Group

**Bi-monthly** the Central Hub and RVM Panel Chairs will bring together data, identify themes, trends, and the overview of risk and vulnerability across divisions and the county.

- The review of this information helps direct operational responses alongside providing a detailed overview to the strategic partnership groups including, Community Safety Partnerships, Surrey Youth Offending Board, Surrey Safeguarding Children Partnership and Surrey Health and Wellbeing Board. This provides a direct line of sight and overview of the problem profile. It assists in determining actions required including the development and commissioning of services.
- The multiagency group will set the practice review schedule with the Quality Assurance team to ensure dip practice reviews, and bi-annual multiagency practice review organised through RVM.

### \*Children placed in or out of Surrey

- *For children placed into Surrey by another Local Authority, we will request the Lead Professional complete a Surrey EFH Assessment and Safer Plan or provide their equivalent to include within RVM pathway.*
- *For all children we place in other Local Authorities, RVM will retain oversight of the child and up to date assessment and plans must be shared with the key agencies in the authority in which the child resides.*

## RVM Stage 2 Meeting Agenda

Panels follow a VOLT approach, considering Victims, Offenders, Locations and Themes. The Panels work to bridge operational and strategic action led decision making. They should deliver a robust, supportive, and collaborative approach to problem solving. The risk and vulnerability management structures should ensure there are strong links between forums; from the strategic function through the RVM Panels and into the regional JAG meetings. This will ensure that actions, thematic data and information sharing will be maintained and with the correct oversight.

Agency Role	Named Person	Details
<b>STANDING MEMBERS</b>		
Co-Chair DI CEMU/A-Service		
Co-Chair SM A-Service		
Youth Justice SM		
Central Hub SM/TM RVM		
Family First (D&B EH Hub(s))		
Area DS CEMU		
Mental Health Social Worker		
CAMHS		
Education & SEND Leads		
Conference and reviewing		
Designated Safeguarding Nurse		
Community Safety Leads		
Youth Offer		
Placement & Fostering Services		
<b>YOUNG PEOPLE SPECIFIC ATTENDEES</b>		

Risk and Vulnerability Management

Probation Services/VisOR	(Adult/Context specific)	
Drug and Alcohol Services?		
Schools (allocated)	(Child/Context specific)	
Community & Voluntary	(Location/Issue specific)	
Placement & Fostering Services		
British Transport Police	(Location/Issue specific)	
Adult/Transitional Services		
<b>Sponsors: Director Children's Services Matt Ansell and Chief Superintendent Gemma Morris</b>		

### 1. Incidents of Note (10 Minutes)

*Any significant incidents that have taken place across the county that has an impact on the hub area relating to extra-familial harm or abuse, the children, adults and contexts impacted.*

#### **Actions:**

e.g. a violent or sexual incident that has had an impact on children, schools, community both direct and ripple effect across contexts and groups

### 2. VICTIM(s) (60 Minutes)

#### a. Timetabled Children for Discussion

*Quality assurance of disruption and safeguarding activity*

#### b. Outcome of Discussion

*Agree, Direct Action, Escalate. (Identified Contexts, if relevant from discussion)*

Recording will provide the overview and rationale for grading and recommendations:

- Information from each agency concerning child(ren) and their family
- Adults, Locations, or Incidents of concern
- Grading and suggested outcome including roles and responsibilities across partners
- Patterns and Themes relevant to context (e.g., if a context is linked to harm)

#### c. NRM, Modern Slavery and Organised Immigration Crime Investigations; Sexual Harm/Abuse Offences; Youth Violence and other EFA related matters

### 3. OFFENDER(s) (20 Minutes) (Police Lead)

#### a. Adults of Concern (not already addressed within section 2 of agenda)

*Nature of risk, those impacted, risk management plan including ancillary Orders, Lead Agency responsible, those to be notified, and review timeframe*

#### b. Child or young person who may be linked to risk posed, or harm to others

### 4. LOCATION (20 Minutes)

#### a. Identified places, spaces or groups. (App partners to contribute)

#### b. Contextual Activity led by Central Hub (linked to JAG activity)

*Quality Assurance of disruption and safeguarding activity*

- c. Mapping/Organised Crime Groups
- d. Professionals to be informed of Contextual Information e.g., CSPA, DSLs,

**5. THEME (Data, Quality Assurance and Commissioning) (10 Minutes)**

- a. Overview of weekly Missing Children  
*tracking where they are located within the system and activity.*
- b. Overview of thematic information across area and consider activity.
- c. Learning from Case Reviews and Practice review Activity
- d. Planned Practice review activity.

*Dip Practice review and Bi-Annual Multiagency Practice review*

## Appendices:

### A – Surrey Safeguarding Partnership Extra Familial Harm Screening Tool

#### Surrey Safeguarding Children Partnership Extra-Familial Harm (including Missing, Child Sexual or Child Criminal Exploitation, Serious Violence Involving Children or Radicalisation) Screening Tool

##### Who should use this tool:

All public-facing teams with a responsibility for safeguarding who have ‘time limited’ contact with children to identify those who may be at risk of Extra Familial-Harm (harm outside the family home) linked to either a missing episode/s, child sexual or child criminal exploitation, serious violence involving children or radicalisation.

##### When should the tool be used:

Whenever there are concerns that a child might be at risk of or experiencing Extra Familial-Harm (including missing, child sexual or child criminal exploitation, serious violence involving children or radicalisation).

##### Completing the tool:

This tool should be completed in conjunction with the [Continuum of Support](#) on completion of the tool, if you feel that a child is at risk of Extra Familial Harm, please complete a [Request for Support](#) and send with the completed tool to the Children’s Single Point of Access (C-SPA) [CSPA@surreycc.gov.uk](mailto:CSPA@surreycc.gov.uk)

If you require further professional advice, please contact the CSPA Child Protection Consultation line on 0300 470 9100 and select option 3.

**If you think the child is in immediate danger you should report this to police immediately on 999.**

Questions for the child	Answers (use the child’s words)
Is there anything you are worried about that I may be able to help you with?	
Are you being asked to do something that you believe to be wrong or illegal? If yes what?	
Are you being asked to do something you don’t want to do? (i.e. have sex, take, carry, or deliver drugs/drink alcohol, steal?) If yes what?	

Have you ever been made to feel scared or frightened? If so who by and how do you know them? Is this face to face or on line ?	
Do you have anyone that you could contact if you were worried or could help make you feel safe?	

<b>As a professional consider these possible indicators that children are or may be suffering Extra Familial-Harm</b>	<b>Detail of your concerns - Please describe what you have seen and why you are concerned. Include voice of the child where possible.</b>
<p><b>Sexual Activity:</b>            Is sexual activity with adult(s) taking place?            Are they involved in sexual activity with peers or intimate partners that may lead to an increased risk of harm or abuse including: miscarriage or termination/presenting for pregnancy or sexually transmitted infection (STI) testing, or frequent use of emergency contraception, peer-to-peer sexual abuse and other forms of harmful (problematic or inappropriate) sexual behaviour displayed by young people towards their peers?            Is there a concerning age gap?            Do they understand consent?</p>	
<p><b>Drugs and Alcohol</b></p> <ul style="list-style-type: none"> <li>• Are they being forced to take drugs or drink alcohol?</li> <li>• Are they using drug (s) and/or alcohol to excess?</li> <li>• Are they distributing and or selling illegal substances</li> </ul>	
<p><b>Injury</b>            Do they have injuries which have been inflicted deliberately i.e. stab wounds, head injury, bruising, fractures, burns?            Do they have injuries that are not fully explained?</p>	



Are they seeking multiple medical attention?	
<b>Presentation</b> Are they repeatedly going missing? Are they talking as if from a scripted speech? Do they express extreme views or beliefs that would incite violence i.e religious, far right? Are they accessing inappropriate websites and social media platforms? Do they have unaccounted for money, goods or items including multiple mobile phones, clothes, drugs, and alcohol? Are they self-harming or showing other indicators of distress, do they look scared, nervous, or worried? Are the people they are with or asking for, appropriate given the circumstances? Do they pose a Serious Risk of Harm to others Is there indication of physical, sexual or emotional abuse, and/or coercive control (young people may experience in their own romantic/intimate relationships)	
<b>Are the parents/carers aware of your concerns? YES/NO</b> <b>What are their views?</b>	
<b>Name and Role of person completing form:</b>	
<b>Email address:</b>	
<b>Name of child/family:</b>	
<b>Date form completed:</b>	
<b>What action have you taken:</b>	

**Reminder:** This checklist is a tool to consider possible indicators of Extra Familial-Harm; it is not a definitive list and does not replace your own safeguarding procedures where you are concerned that a child/young person is or has been at immediate risk of harm.

**B – Children’s Services Extra Familial Harm Screening Assessment and Safer Plan**

**Extra Familial Harm Assessment and Planning Tool**

**What are our worries**

**Missing from home or care**

Status	
Time Frame	

**Concern re: online activity**

Status	
Time Frame	

**Being targeted or harmed (online) by an adult, group or organised criminal group**

Status	
Time Frame	

**Being targeted or harmed (offline) by an adult, group or organised criminal group**

Status	
Time Frame	

**Change of contact with family and friends and other support networks**

Status	
Time Frame	

**Drug(s) and/or alcohol use linked to extra-familial harm**

Status	
Time Frame	

**Noticeable change of self-image/appearance or dress**

Status	
Time Frame	

**Gang, group or OCG member or association with gangs or extremist thinking including ‘normalisation’ of gang violence and criminality**

Status	
Time Frame	

**Peer on peer related harm**

Status	
Time Frame	

**Movement e.g., in cars with adult(s)**

Status	
Time Frame	

**Knowledge of, or attendance at other locations with no legitimate reason or links to that area**

Status	
Time Frame	

**Detailed knowledge of concerning behaviours, activities and/or circumstances**

Status	
Time Frame	

**Sexual activity that may lead to, or increase risk to, extra-familial risk, harm or abuse**

Status	
Time Frame	

**Miscarriages or terminations/presenting for pregnancy or sexually transmitted infection (STI) testing**

Status	
Time Frame	
<b>Unexplained injuries and infections</b>	
Status	
Time Frame	
<b>Making and then withdrawing a complaint/s or expressing a fear then withdrawing</b>	
Status	
Time Frame	
<b>Detailed knowledge of extra-familial risk, harm and abuse</b>	
Status	
Time Frame	
<b>(Unaccounted for) Money, goods or items including mobile phones, clothes, drugs and alcohol</b>	
Status	
Time Frame	
<b>Increased interest in making money or need for money</b>	
Status	
Time Frame	
<b>Self-harming or other indicators of distress</b>	
Status	
Time Frame	
<b>Involvement in the commission and/or facilitation of criminal and/or anti-social behaviour</b>	
Status	
Time Frame	
<b>Victim of exploitation, trafficking or modern slavery</b>	
Status	
Time Frame	
<b>Carrying weapons/feeling the need for protection</b>	
Status	
Time Frame	
<b>Child and/or family shows interest in any form of extremist or radical ideology or behaviour(s)</b>	
Status	
Time Frame	
<b>Analysis</b>	
Please expand on key harms indicated above to provide an overall picture of your worries	
<b>Views</b>	
Child	
Family	
Children Service	
Police	
Health, Education, and any other agency	
District/Borough Info inc. Housing and Comm. Safety	

Harm Type					
Extra Familial Harm Type					
Type of Harm	In-Surrey	Out-Surrey	NRM	CRIME	Comments
CSE/A – Adult/Organised Network					
CSE/A – Peer / ‘Intimate Partner’					
CSE – Other (Online/Media/Grooming)					
CCE – Drug Supply/County Lines					
CCE – Other Organised criminality					
Serious Violence (inc. weapons)					
Serious Violence linked to OCG					
Radicalisation – Ideology					
Radicalisation – Extremism					
Missing					
Management Oversight					
Grading					
Date	Grade (Emerging/Medium/High)				

Safer Plan: Information	
Child	
My Parent/Carer	
My Address	
My Description (e.g., eye colour, hair, ethnicity, glasses, clothing*, distinguishing marks, height, build) *favourite trainers, jacket, hat they typically wear	
Personal Information Age, vulnerability, emotional/mental health information, gender/pronouns, disability, learning, trauma/abuse, medical conditions/prescribed medication, allergies, drug use, communication needs.	
Important information Access to mobile phone, what type of phone, IMEI number, telephone number. Social Media accounts (account names and on which SM platforms), Street Names, Gang/OCG Access to Funds, do they receive cash or money into debit/bank card account, paid in by who.	
My Support	
Key professionals (teachers, social workers or others who are helping me)	Name
	Contact Details

What we know	
<b>Harms</b> <ul style="list-style-type: none"> <li>• Exploitation (example, being exploited sexually or criminally by individual or group)</li> <li>• Violence (example, carrying a weapon and may cause serious harm to self, another individual or group. Has anyone in the network suffered/caused serious injury? Is there a problem between individuals or groups?)</li> <li>• Missing (example, the period when whereabouts are unknown)</li> <li>• Deliberate Self-Harm (example, what has happened, the risk and impact)</li> </ul>	
<b>Worry</b>	We are worried X and Y will happen and Z will be the consequence. This will lead to A, B and C.
Patterns	
Is there a pattern of missing episodes/ incidents that indicate either the nature of harm, specific activity or locations?	<i>I/Name has gone missing 6 times, 4 of which on a Tuesday evening with Child B who is a victim of CCE and has been found in possession of a knife previously. On 2 occasions you/they have been found in Location C. Location C is a cuckooed address and Adult 1 is known to be involved in county line drug supply"</i>
Network	
Who are your family, friends, peers and associates who are safe? (a protective factor)	<i>Names, numbers and addresses</i>
Is there anyone in your network who is not safe? (including family, friends, peers and associates – any known names, young people and/or adults who may be in contact, that present a risk of harm)	
Who have you been missing with before?	
How do you travel	
What means of travel (foot, bike, car, bus, train, boat)	<i>NAME travels by train to X Station NAME uses public transport, Oyster card details. NAME has access to a moped index AB23CDE</i>
How has this been facilitated?	<i>NAME was collected in a prepaid taxi (include firm e.g., Uber) and travelled to Town W and tracked to Town Y Child B said NAME was picked up by an 'Adult Unknown' in a white Kia Sportage and phone data showed them in Town W and Borough P.</i>
Any key routes?	
Where you go	

Any known places/location/spaces you travel to or are likely to visit, hang out, any known addresses of friends/family. <b>Indicate if unsafe</b>	<i>Location C, 2 x (serious violence) and a sexual assault have taken place here Travelling from Town W to Train Station F at 6am Located in address 7, believed to be cuckooed/trap house Alleged assault when in Town Y I feel safe in Park X</i>
<b>'Name Young Person's' Safer Plan</b>	
<b>What steps can be taken to increase safety, reduce the likelihood of going missing and/or coming to any or harming others? Considers the specific stressors/situations where risk/vulnerability increases (example new relationships, substance misuse, peer influence, adult network).</b>	
Expectations and agreement of Young Person	<i>I will... I can... I might... I need...</i>
What to do in an emergency?	<i>I will... (safe word) If I am not safe or want help I will...</i>
Young Person's Emergency Contacts	
If located when missing – where should the child be taken?	
Who has parental responsibly/can make decisions for the child?	
<b>Expectations and agreement of Parent Carer/Placement</b>	
Comments	<i>Will ensure e.g., when NAME returns home I will...by/at Will make...by/at Will do...by/at</i>
For a child who is looked after has a Philomena Protocol been completed. <a href="#">Philomena Protocol   Surrey Police</a>	<i>Yes/No</i>
<b>Expectations and actions of Agencies</b>	
<b>Actions to increase safety</b> (including Police Trigger Plan)	
<b>Actions to prevent or disrupt exploitative or harmful activity</b> (including any live investigations, actions or applications)	
<b>When will publicity be sought for a missing child?</b>	
When is publicity required? (If the child is Looked After by the Local Authority, this should be agreed by the Assistant Director and in consultation with family).  Will an image be shared? If so, to whom and	

when?	
Who will tell (NAME) that this is happening, their network and others impacted?	
<b>Date plan agreed/reviewed</b>	
<b>Management Oversight</b>	



## D – Safer Meeting

### **Purpose:**

The Safer Meeting brings together the network around the child to think about what needs to change for and around the child to increase safety. The format supports the assessment and planning for children who are vulnerable to, or impacted by, extra-familial harm including exploitation, trafficking and serious violence alongside other risks and vulnerabilities that require a coordinated, multiagency response. Children, their families and networks, should be integral to discussion with the aim of them having ownership and driving plans and agreements. The process should detail the goals of intervention, and document how and who will do what to achieve them.

### **When:**

If a child is at risk of, or suffering, extra familial harm, the Safer Meeting framework can operate as a standalone meeting or be integrated into the agenda for a TAF, CIN, Core Group or Looked After meeting. For all children subject to the Extra-Familial Harm Pathway, the Safer Meeting should form the basis of multiagency discussion with the child and their family to agree change for and around the child.

### **Who:**

All individuals who have a role in helping or protecting the child or victim(s) should actively work to identify what needs to be different to increase safety and disrupt harm. There may be individuals within a child's family or network who may be considered vulnerable or to pose a risk. Careful consideration must be given as to whether it is possible to work with the assessed risk, and if so, what mechanisms can be adopted to increase safety within relationships that may also be considered harmful.

### **Principles:**

- Ensure children and parents are welcome and can speak first
- Be clear about what are the actual needs, risks and harms
- Understand the child's needs and how they are met/not met in context(s)?
- Identify where is harm taking place and what can reduce the impact
- Agree what 'safer' looks like and how you will recognise success
- Commit to undertaking the work to achieve the identified aims, how and when

### **Grading and Management**

The grading of risk and harm should be based on the nature, severity and frequency of harm and the impact. For children who are assessed as **Medium** or **High** this should result in an enhanced or intensive response as outlined within our **scaled approach**.

## **Agenda**

The structure below is designed to offer questions that help steer and focus discussion to achieve a clear, collaborative Safer Plan.

### **1. Introductions and Purpose**

- a. The Chair outlines the purpose of the Safer Meeting (as described above)
- b. Each individual states who they are, why they are here and what they hope to get from the meeting based on the purpose

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## 2. Key professionals (teachers, social workers or others who are helping the child)?

## 3. What we know?

The focus of discussion is to hear from each person present their description of what is currently happening. Some key questions:

- a. What is happening? (**The Harm**)
- b. What is the impact? (**The Worry**)

## 4. Patterns

- a. Are there any patterns that help us better understand the nature of the harm or any specific activity or locations? *(for example, specific days, times or locations, indication of specific harm e.g., drug paraphernalia or missing episodes/self-harm after a negative peer or family interaction)*
- b. Is this directly linked to, or causal to safety or harm? *(for example, the child goes missing and is vulnerable to grooming after exclusion from school, argument with parents, acceptance/understanding from others)*

## 5. Network

- a. Who is in the child and family's network and what is their involvement? *(think about where is safe, where is not safe, where could be safe)*
- b. Is there anyone or anything else around the child or family that can support?

## 6. Travel and Places

Any known places/location/spaces you travel to or are likely to visit, hang out, any known addresses of friends/family.

Indicate if unsafe

- a. If the child is travelling or missing, what means of transport do they use, how has this been facilitated/paid for and what specific routes are used?
- b. Where is harm taking place? *(for example, in a specific address/place, within a specific relationship, or within a group dynamic)*

## 7. Are there any different views so far?

- a. How can we work through the difference?

Consider what needs are being met or remain unmet? *(for example, the need for belonging, care, acceptance, love, excitement, power, safety, achievement, capability, reward, connection, exchange)*

This is an important conversation to best understand what is taking place. If we can better understand what needs are being met, or not being met elsewhere, this will inform the plan required. For example:

- Is the missing episode to draw people closer as that is when people are worried and pay attention, or is it to create distance and space, or is it forced?
- Does the relationship(s) described provide care, love, belonging, positive sense of self, material gifts, excitement? Are these things missing elsewhere?
- Does the activity include shared beliefs, a sense of purpose, a feeling of power or being successful and capable? Are there opportunities elsewhere?
- Does the activity create a sense of safety for the child, the group, or family?
- Is there a pattern that we can help the child, family or network to recognise?

b. What needs to change?

- What has worked before? (*for example, when relationships were good or when things weren't so stressful, what was helping?*) Can this be replicated/repaired/disrupted, and if so by whom and when?
- What can be done by the child, parents/carers and the professional network to increase safety including the disruption of harm
- Does the child's overall plan need to be updated?

## 8. SAFER PLAN:

What steps can be taken to increase safety, reduce the likelihood of going missing and/or coming to any or harming others? Considers the specific stressors/situations where risk/vulnerability increases (example new relationships, substance misuse, peer influence, adult network).

Expectations and Agreements should be recorded in order of priority:  
'A' will do (ACTION) to achieve (AIM) which will be shown by (SUCCESS)

### CHILD

Expectations and agreement of Young Person

- *I will...*
- *I can...*
- *I might...*
- *I need...*

What to do in an emergency?

- *I will, I can, I might, I need*
- *Safe word*

Young Person's Emergency Contacts

If located when missing – where should the child be taken?

Who has parental responsibly/can make decisions for the child?

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## **PARENT/CARER**

- Will ensure e.g., *when NAME returns home I will...by/at*
- Will make...by/at
- Will do...by/at

## **Expectations and actions of Agencies**

Actions to increase safety (including Police Trigger Plan)

- **Agency 1 will...by/at...**
- **Agency 2 will...by/at...**
- **Agency 3 will...by/at...**
- **Agency 4 will...by/at...**

Actions to prevent or disrupt exploitative or harmful activity (including any live investigations, actions or applications)

- **Agency 1 will...by/at...**
- **Agency 2 will...by/at...**
- **Agency 3 will...by/at...**
- **Agency 4 will...by/at...**

## **Other Considerations**

### **A. Do we need a contingency plan?**

- a. What steps can be taken if things don't go to plan?
- b. Who can help if one professional or network member is not available?

### **B. Are any onward actions required?**

- a. Does information need to be passed to the Central Hub for consideration of context-based responses, e.g., a peer group, a place or space
- b. Is there indication of complex or complicated abuse? (Link to Procedures)

### **C. When will we review the Plan?**

- a. When will this plan be reviewed? (*for example, at a set date or if a significant incident occurs*)
- b. What if something happens in the meantime?

**AGREED BY.... DATE.... SHARED WITH....**

## *E – Terms of Reference RVM1 and RVM2*

### **Risk Vulnerability Management Meetings**

#### **Terms of Reference**

In order for RVM Stage 1 and Stage 2 to operate effectively it is vital that attendees clearly understand the purpose of the meeting and their role within the panel. This will enable effective meetings to take place that are timely and produce good outcomes for children.

#### **RVM Stage 1**

##### **RVM Chair:**

The meeting will be co-chaired by a Detective Inspector and Service Manager from Adolescent Services. The meeting Chair will:

- Confirm that any new panel members have signed the confidentiality statement.
- Ensure that the discussion at the meeting remains focused, that the business of the meeting is achieved and that it is conducted within the time allocated.
- Ensure that members are offered equity about opportunities to contribute to the meeting.
- Both chairs will review and agree the information collated from the meeting, the risk level of cases discussed; and the record of actions arising from the discussion and check actions from the previous panels are completed, before distribution to Panel members.

##### **b) RVM Panel Members:**

Standing members of the Panel will:

- Attend the meetings regularly and on any occasion when they are unable to attend, they should identify an appropriate representative from their agency to attend in their place; or submit any information to the Central Hub Missing and Intelligence Team Manager prior to commencement of the panel.
- Come prepared to share any new or additional information over and above that already shared at the case management meetings that relates to their agencies actions and whether these have been completed and if they are confident in the measures that their agency is putting in place or if not what is being done to escalate concerns.
- Contribute to the information sharing which enables the meetings to fulfil their purpose and to assist with informed disruption decision making.

- Contribute to the actions agreed during the meetings and provide timely reports on progress and outcomes. This includes considering how their agency can contribute to wider disruption activity.

### **Education representatives (SEND and Inclusion)**

- Education representative will provide an update on the education provision for that young person.
- Where they are missing education they will confirm the plans that are in place to return the young person to education and the time frame for this work to happen.
- Where actions are not being progressed they will confirm what is preventing this from happening and if escalation is required.
- Confirmation to the panel that everything is being reasonably done to get the young person back into education.

### **Health**

#### **c) Central Hub Risk and Intelligence Service:**

The Central Hub Risk and Intelligence Service will:

- Review panel attendance collections returns from all Children Service Teams and will liaise with practitioners as appropriate.
- Link with other local authorities who have children placed in Surrey as necessary.
- Support Mapping of associations/links/risks/themes for each of the panels.
- Have oversight of the agenda for the individual case discussions and invite the practitioners to allocated time slots for case discussion
- Have oversight of the agenda and any associated papers to Panel members one week in advance of the Panel meetings to allow sufficient time for checks to be completed for panel so that appropriate information sharing of those checks can be shared at the panel.
- Attend all the Hub Panel meetings both to contribute to the discussion and to collate information provided at the meetings.
- Obtain agreement from Panel chair prior to profile information and actions agreed at the meetings being distributed to Panel members.

- Identify and report on any inconsistencies between, and best practice, from the 3 Hub Panels.
- Aggregate findings from the Hub Panels and submit information to the senior managers as part of the Contextual Safeguarding Action Plan.

**d) Panel Attendees:**

Professionals will:

- Attend Panel at time invited and ensure all involved agencies are aware of attendance.
- Complete EFH risk assessment and Safer Plan prior to the panel and ensure these are sent within a timely manner to inform mapping.
- Come prepared to the Panel to present information about the child exploitation concerns, people and places of concern, actions completed / not completed, engagement with the plan / support services in place in an attempt to reduce the risk and provide a better outcome.
- Follow up on any actions agreed prior to the next meeting.



## Risk Vulnerability Management Confidentiality Statement

This statement must be signed by all RVM panel members as a part of the terms of reference.

Risk Vulnerability Management (RVM) meetings are a forum for multi-agency information sharing and discussion but do not replace the need for wider information sharing which should also take place between relevant practitioners outside the meeting. Likewise, they are not a replacement for good case management. The RVM will however be the decision-making forum in respect of the overall risk rating and shall endorse any safety and disruption planning. This decision making will be based on information provided in advance, information shared in the meeting and the ensuing discussion.

### PURPOSE

To share information between relevant agencies in respect of all children who are considered to be at **risk of child exploitation or where the child is a high-risk missing person**. The meeting will identify the specific risk to each child, ensuring that a multi-agency safety and disruption plan is put in place with immediate effect.

Members of the group will be expected to comply with the Multi Agency Information Sharing Protocol ([Surrey Multi-Agency Information Sharing Protocol - Surrey County Council \(surreycc.gov.uk\)](http://surreycc.gov.uk)) and will have due regard to the handling and management of the personal data provided to the group regarding perpetrators & victims.

**Suspected Perpetrators:** - The attending agencies have a statutory duty to work together to prevent and detect crime and disorder and prevent reoffending. This duty is set out in Section 17 of the Crime and Disorder Act 1998 and it requires agencies to share information in relation to offenders for this lawful purpose (Section 115 refers).

Under the Common Law Duty of Confidence, the Data Protection Act 1998 and the Human Rights Act 1998 it is possible to disclose information without consent in the cases of serious public interest or in the best interests of an individual. Decisions regarding the disclosure of information without consent must be made on a case-by-case basis. Any disclosure must always be proportionate and the minimum necessary to achieve the necessary objective.

**Children:** - Information will be shared under the current guidelines for Safeguarding Children.

The SSCP shared procedures for Information Sharing stipulate that in no case will any team member disclose any information regarding team discussion outside the meeting other than pursuant to the mandated responsibilities of that individual. Any information obtained or recommendations or decisions made by the RVM shall be treated as confidential by the undersigned. Public statements about the general purpose of the Risk Management process may be made, as long as they are not identified with any specific case.

Panel members who receive information but do not attend the meeting undertake to destroy or securely return papers to panel.

The undersigned agrees to abide by the terms of this confidentiality policy.

Name	
------	--

Role	
Organisation	
Signature	
Date	
Email	

## G – Glossary of Terms

Glossary Of Terms	
ACES	Adverse Childhood Experiences
Adolescent Practitioner (AP)	Former TYS and Youth Support Practitioners
Adolescent Service	Amalgamation of former SAT and TYS services
Adolescent Social Worker (ASW)	Formerly SAT Social Workers
Building Safety	Term used to reframe the idea of 'reducing' or 'removing' the risk of harm
CCE	Child Criminal Exploitation
CEMU	Child Exploitation Management Unit
Central Hub	Adolescent Services with specialist practices, centrally based to support the regional hubs
CHaRMM	Community Harm and Risk Management Meeting
Child First	Youth Justice approach to practice which responds to children who commit offences as children, not offenders
Child(ren)	Term used to reframe the view of adolescents in order to ensure they are not adultified and over-responsibilised
CiN	Child in Need
CLA	Child Looked After
Context	Circumstances / Location in which a child may experience harm
Contextual Safeguarding	An approach to responding to the harm children experience in contexts outside of the home environment, such as school, the community, their peer groups and online
County Lines	Distribution of drugs with the use of a 'deal line' phone
CP	Child Protection
CSE	Child Sexual Exploitation
Culturally Aware	Having an awareness of the importance and impact of culture on children and families
Culturally Competent	Practice systems designed to take account of and respond to the unique cultural characteristics of children and families
Disruption / Disrupting Harm	Measures designed to interrupt, mitigate or remove factors which impact negatively on the safety or a child or which cause direct harm
DRB	Daily Risk Briefing - meeting about all children arrested in the previous 24 hours
Edge of Care	Formerly No Wrong Door, service responding to crises where children are at risk of entering the care system
EDT	Emergency Duty Team
EFA/H	Extra-Familial Abuse/Harm
EFH Pathway	Extra-Familial Harm Pathway
EHA	Early Help Assessment
Exploitation	The coercion and control of others to commit criminal, sexual or other acts
HSB	Harmful Sexual Behaviour
JAG	Joint Action Group
Location	A place or space identified as a context in which harm may occur

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NRM	National Referral Mechanism
NVR	Non-Violent Resistance
Peer Group	A group of individuals with a common purpose or identity, a context in which harm may occur
Regional Hubs	Adolescent Services practicing in the East, West and North of the county
Risk	level of concern about a child experiencing harm, inclusive of their potential for causing harm to others
RVM	Risk and vulnerability management
S.47	Investigation under Section 47 of the Children Act
Serious Youth Violence	The commission of violent crime of a serious and specified nature between children
SM	Service Manager
Social GRACES	refers to aspects of social and personal identity such as race, gender, religion and age that have an effect on an individual's privilege and power in society.
TM	Team Manager
Trauma Aware	Having an awareness of the traumatic experiences of children and families
Trauma Informed	Practice systems designed in a way to acknowledge and respond to the traumatic experiences of children and families
YJS	Youth Justice System
Youth Offer	Wide ranging Youth Services operational across the county utilising youth centres and supporting YJS reparation delivery