Contextual Safeguarding Risk Assessment/Intervention (guidance and tips)

Risk Assessment Model for Contextual Safeguarding

1. Introduction

The purpose of this framework is to provide some tips and guidance on assessing risk in **contextual safeguarding** scenarios – where significant harm or exploitation threatens a child outside their family home.

Traditional child protection focuses on risks from parents or caregivers, but **extra-familial harm** (from peers, gangs, criminals, or the community) can be equally dangerous . In these cases, young people may be coerced into drug trafficking (county lines), criminal activities, sexual exploitation, serious violence or other abuse in the community rather than by family members .

This model **integrates contextual safeguarding principles**, ensuring identification and response to risks beyond the home.

This framework is grounded in law and statutory guidance. Under the **Children Act 1989**, local authorities must safeguard any child likely to suffer significant harm, whatever the source of that harm.

Section 17 (Child in Need) and Section 47 (Child Protection enquiries) apply equally when dangers stem from outside the family. The **Children Act 2004** (Section 11) further obliges all agencies to **promote children's welfare** and cooperate to protect them – which includes threats like exploitation by criminal gangs or abuse by peers. **Working Together to Safeguard Children 2023** emphasizes that practitioners should consider **all the child's needs and vulnerabilities** when extra-familial harm is suspected .

In fact, Working Together now explicitly recognizes forms of harm **outside the home** – such as criminal exploitation, serious youth violence, modern slavery, trafficking, online grooming, sexual exploitation, teen relationship abuse, and exposure to extremism . These threats often intersect, placing children in complex danger networks beyond parental sight.

Contextual safeguarding is the approach underpinning this model. It "recognises that as young people grow, they are influenced by a range of environments and people outside of their family" . Schools, peer groups, neighborhoods, parks, streets, and online spaces can all be settings where abuse or exploitation occurs.

Unlike traditional assessments that focus on the home, contextual safeguarding widens our lens to **assess risks in the contexts** where harm occurs – and to engage those environments in solutions. This model can help to understand these extra-familial risks, identify the signs of harm in those contexts, and involve all relevant partners (police, schools, youth services, etc.) in protecting the child.

The ultimate aim is to **reduce risk and harm outside the home while empowering the young person and their family** in safety planning . This model can help ensure your risk assessments are comprehensive, **legally defensible**, and effective in guiding interventions for threats like county lines, exploitation and youth violence.

2. All Assessments are Assessments of Risk

All assessments of children – regardless of context – are fundamentally **assessments of risk**. Whether a case begins as a family support referral or a concern about peer group activity, social workers must continually ask: *What is the likelihood of harm to this child, how severe could it be, and what needs to be done to prevent it?* .

Risk is the possibility that an event will occur with harmful consequences .

Risk factors are elements in the child's life or environment that increase the chance of harm (for example, association with exploitative adults, substance misuse, or frequent missing episodes), whereas **protective factors** reduce or buffer those risks (supportive relationships, pro-social activities, etc.).

The greater the number or severity of risk factors present, the higher the likelihood of harm .

Crucially, this principle applies not only to abuse *within* a family, but also to **extra-familial threats** – for instance, a gang's coercion or an online predator's grooming can pose extreme risks even when home life is stable.

You should approach every case holistically, recognizing that **multiple domains of a child's life interconnect**.

In contextual safeguarding cases, a narrow focus on parenting alone would miss critical information – we must also consider **peer relationships, school environment, neighborhood safety, online behavior**, and other external contexts .

For example, a teenager's unexplained injuries or sudden wealth might not implicate their parents at all, but could indicate criminal exploitation by a drug network. Likewise, a normally well-behaved student might engage in violence *outside* of school due to gang pressure, requiring

us to assess risks in that peer group or location.

Every assessment should therefore be a risk assessment across all contexts of the child's life . This aligns with Working Together 2023's call for awareness of **"new and emerging threats"** like grooming, exploitation and radicalisation, even in cases that don't initially appear to be child protection .

It is important to acknowledge that **risk cannot be eliminated entirely**, especially in adolescence, but it can be **managed and reduced** .

Young people will inevitably take risks as they seek independence; our role is to make those risks *manageable* and prevent serious harm. We achieve this by balancing identified risk factors against strengths and protective elements in the child's life, and by taking action to bolster protections where possible.

All professionals must use their judgment to analyze how likely a harmful event is, how serious it could be, and what can be done about it .

In contextual cases, this often means innovating responses beyond the family – e.g. improving safety in a location, disrupting a perpetrator's activities, or strengthening a youth's resilience and support network.

Practitioners should remain mindful of their **biases** when assessing risk (for instance, avoiding "adultification" bias that might incorrectly treat a 15-year-old as an adult making free choices).

By consciously checking assumptions – about culture, gender, behavior, or culpability – we ensure a fair, evidence-based appraisal of danger that sees the child *as a child*, even if they are involved in concerning activities.

In sum, whether a young person is at risk from a parent or from a street gang, the core questions of risk assessment remain: *What has happened? What is happening now? What might happen? How likely is it, and how severe could it be?* . Every assessment continuously evaluates these questions to inform sound decision-making.

3. Framework for Risk Assessment

This model outlines a structured, five-stage **Framework for Risk Assessment** that is holistic and dynamic. It ensures that your risk assessment is based on clear evidence, consider the child's whole world (family and context), and lead to informed action.

The five stages – **Gather Information, Assess Harm and Risk, Decide the Response, Decide the Outcome, and Review** – provide a logical flow to guide practitioners through the risk assessment and intervention process . Each stage is rooted in both **theoretical principles** (such as child development, trauma, and resilience) and **statutory requirements** (such as information-sharing duties and child protection decision-making criteria).

Key principles of this framework include:

- **Holistic perspective**:

Assessment must encompass all domains of a child's life. The original model emphasized understanding the "whole child and family"; here we extend that to **whole child, family and environment** .

We examine how risks in one domain (e.g. a violent incident in the community) intersect with others (e.g. the child's emotional well-being, or the family's capacity to protect). By integrating information across domains, we avoid siloed thinking. For instance, noticing a link between school exclusion and increased association with a gang can be vital in analysis. This ecological approach is in line with contextual safeguarding theory, which views the child as embedded in interrelated environments .

- **Balanced focus on risk and protection**:

The framework requires assessing not just threats but also strengths. Each assessment weighs **risk factors vs. protective factors**, as well as **vulnerabilities vs. resilience** . For example, a risk factor might be "unsupervised free time in a high-crime area", whereas a protective factor could be "strong relationship with a mentor or parent". By identifying these, practitioners can plan to reduce risks (increase supervision or safety in that area) and strengthen protections (support the mentor relationship). This balance helps ensure interventions are not solely deficit-based but also build on what's **working well** for the child and family.

- **Evidence-based analysis and professional judgment**:

While the model provides structure (and may be accompanied by tools or checklists), it does **not** replace professional judgment. You are encouraged to critically analyze the information gathered – sorting it, weighing its significance, and considering its reliability.

You should draw on research and theory (e.g. knowledge of grooming processes, trauma symptoms, adolescent behavior) to interpret the data. For instance, understanding that a sudden change in attire or slang could indicate gang association might come from professional knowledge.

The framework prompts you to make an **"overall judgment of risk"** by combining the severity of potential harm with its likelihood . This is similar to formal risk matrices (likelihood x impact), but done with nuance.

Defensible decision-making is key – every conclusion about risk level should be backed by evidence or clear rationale, which is critical if decisions are later challenged in court or reviews .

- **Multi-agency collaboration**: Contextual risks often span multiple agencies' remits (police for criminal activity, schools for attendance and behavior, health for physical/mental harm, youth services for diversion, etc.).

This framework assumes that a robust risk assessment **cannot be done by social care alone** – it requires gathering and analyzing information in partnership with other professionals .

Effective information sharing (consistent with Data Protection law and Working Together guidance) is essential at Stage 1, and joint planning is essential by Stage 3. The new **Serious Violence Duty** under the Police, Crime, Sentencing and Courts Act 2022 reinforces this approach, requiring councils, police, health, and others to **work together to share information and target interventions to prevent and reduce serious violence** .

Thus, this model embeds multi-agency checkpoints (strategy discussions, multi-agency meetings, parallel assessments like the National Referral Mechanism for trafficking) to ensure all partners contribute to and agree on the risk assessment. A shared understanding of risk enables a coordinated and effective response.

- **Dynamic and ongoing assessment**:

Risk is **not static**. Especially in adolescence, a child's circumstances can change rapidly – for better or worse – and so must the assessment.

This framework views assessment as a **continuous process**, revisited and revised at

regular intervals or when new information arises.

By including Stage 5 (Review), it makes clear that initial conclusions about risk should be updated as situations evolve. For example, if a perpetrator targeting the child is arrested, the risk may decrease (though new risks might emerge, like retaliation). Or if the child forms new risky associations, the likelihood of harm might spike.

The model's structure can be cycled through repeatedly: gathering new info, re-evaluating harm, adjusting responses, etc., as part of the case management cycle. This aligns with statutory expectations (e.g. **Core Groups** and **Child Protection Reviews** must reassess risk and progress on plans regularly) and ensures that interventions remain proportionate to the current level of risk.

With this model, you can feel more confident and clear about you role in assessing and analyzing risk in contextual safeguarding cases .

It provides a logical roadmap that prompts thorough exploration of the child's situation, supports analytical thinking, and leads to concrete action.

Ultimately, it helps achieve the twin aims of **protecting children from harm and empowering families/communities to keep children safe** , even when threats come from outside the home.

4. Application of the Risk Assessment Model

4.1 Stage 1 – Gather Information

Purpose:

Build a comprehensive picture of the child's circumstances across all relevant contexts. In extra-familial harm cases, information must be gathered not only about the child and family, but also about **peer groups, associates, locations, and patterns of behavior** outside the home.

At this stage, you (lead professional) should **collect information from multiple sources** – effectively, **"mapping" the child's world** to identify what is happening.

Key activities in Stage 1 include:

- **Engage the child or young person:**

Wherever possible, speak with the young person to understand their views, experiences, and worries. Use a trauma-informed and youth-friendly approach to build trust so they feel safe sharing (recognizing that exploited children may be fearful or mistrustful of authorities). Explain that your role is to keep them safe, not to punish.

Be mindful that they may not disclose exploitation directly due to fear or manipulation by perpetrators. Even so, listen for indirect signs (e.g. the child talks about new "friends" you haven't met, or uses language/slang from a known gang). Respect the child's voice – their insights can reveal dangers (such as naming a place they feel unsafe) that others haven't noticed.

- **Involve parents/carers:**

In contextual safeguarding, **parents are often allies** in protecting the child, since they are usually *not* the source of harm. Engage the parents to gather their perspective: Have they observed changes in the child's behavior, new belongings, periods of missing from home, or concerning contacts? How have they been trying to respond?

Parents can provide valuable info on the child's history, personality, and any previous issues (like earlier friendships or internet use) that might be relevant. It's critical to approach parents in a non-judgmental way, acknowledging that they may feel overwhelmed or blamed for things beyond their control.

Research shows **parental engagement is nearly always a protective factor** in exploitation cases – parents who are informed and involved can help monitor the child's safety, implement agreed strategies at home (e.g. curfews or supervised phone use), and support the young person's recovery. Thus, even while gathering info, begin forming a partnership with the family.

- **Check records and with professionals for background:**

Review all available case notes and available information for the child. This includes children's social care records (any prior referrals or assessments), education records (attendance, exclusions, performance, notes of concern), and health records (injuries, sexual health clinic visits, mental health notes). If the child has a youth justice history or police contacts, obtain those details (previous offenses, contexts of arrests, known associations).

Check if the child has been referred to the **National Referral Mechanism (NRM)** before as a potential trafficking victim, or if they have any markers for exploitation in police systems. Engage other professionals who know the child: for example, talk to their teacher or school safeguarding lead, who might report the child has been truanting or coming to school with expensive items or unusually tired. School staff can also note peer issues like bullying or new friend groups. Similarly, a school nurse or GP might have noted physical signs (unexplained bruises, signs of self-harm, or sexual health concerns). Youth workers or mentors (if involved) might have direct observations of the child in the community. Each agency may hold a **piece of the puzzle**, so cast a wide net.

- **Gather intelligence on peer and community context:**

A unique aspect of contextual risk assessment is collecting information about influences **beyond** the family. This could involve:

- **Peer mapping:**

Identify who the young person spends time with. Are there known older youths or adults they meet? Do friends' parents or other professionals have concerns about those peers?

Sometimes multiple children are being exploited by the same group; linking these cases can reveal a wider network. Multi-agency exploitation meetings (**MACE)** or police intelligence may help map out peer connections.

- **Locations and "hotspots":**

Determine where the child goes (besides home and school). Common locations tied to extra-familial harm include certain parks, fast-food outlets, arcades, bus or train stations, abandoned buildings, known gang territories, or specific neighbourhoods . For example, is the child frequenting a local (drug den) or traveling to another town on weekends (possibly for county lines drug runs)?

Community policing teams or local residents might have insight on these locations. Also consider **online spaces** – which apps, games, or social media is the child using? Online grooming or recruitment is common; gather info on any concerning online contacts or activities (this may require specialist police units if serious).

- **Historical context:**

Are there community factors that raise risk? E.g., has there been a recent surge in youth stabbings or drug activity in the area? Is there an active gang known to recruit kids from this child's school?

Local authority community safety or gang units can often provide area profiles. Knowing the macro-picture (like a county lines route that runs through the town) can help interpret this child's situation in context.

- **Identify risk factors and red flags:**

As information becomes substantial , start building a picture (hypothesis) noting specific **warning signs of exploitation or harm**.

Common red flags for extra-familial exploitation and abuse include:

- Frequent **missing episodes** or returning home late, with vague or implausible explanations.
- **Unexplained money or gifts** (new clothes, phones, jewelry) that the child cannot afford, possibly payment from exploiters.
- Changes in **behavior or demeanor** – e.g. becoming secretive, withdrawn, aggressive, or showing signs of trauma (nightmares, hyper-vigilance).
- **Physical injuries** (bruises, burns) or deteriorating health (signs of drug use, sexually transmitted infections, extreme tiredness) with unlikely explanations.
- **Associating with new peers or adults** who are older or known to be involved in crime; suddenly distancing from old friends.
- **School issues** – declining grades, truancy, or **exclusion from school** (exclusion is a known trigger point that often leaves a child more vulnerable to gang recruitment) .
- **Police involvements** – like being found in a car far from home, caught with weapons/drugs (even if child claims they are "holding for a friend"), or

presence at locations of police concern.

- **Intimidation or fear** – child appears fearful of certain individuals or refuses to talk about certain locations or friends; family might report suspicious people hanging around or strange calls/texts to the child.

- **Online indicators** – multiple social media accounts, sudden secrecy about online activity, or use of sexual/ gang-related imagery in posts.

These indicators should be documented. No single sign confirms exploitation, but a **cluster of indicators** should heighten concern and be explored further in Stage 2.

Use available **screening tools or checklists** to ensure you cover all domains (for example, many local authorities have a Child Exploitation Risk Indicator tool that lists typical signs of CSE or CCE). Such tools can help structure information gathering and ensure consistency across cases.

- **Consider protective factors and resources:**

Concurrently, identify positives. Does the child have a good relationship with any pro-social adult (a teacher, a relative, a coach)? Are they involved in any activities that keep them safe or build esteem (sports, clubs, faith groups)? Is the family stable and supportive overall? Even small strengths, like the child expressing ambition for the future or having a safe space they like (e.g. a youth center), are important to record.

These will be vital when devising interventions to pull the child away from harm.

Also consider the **wider family network** – are there extended family members or family friends who could play a role in safety planning? In contextual cases, a grandmother, uncle, or family friend might be someone the youth listens to if not the parent. List these potential supports for later use.

Throughout Stage 1, **document everything clearly and objectively**.

Good record-keeping is essential: it creates a factual basis for risk analysis and provides evidence should legal action be needed. Include dates, sources of info, and even direct quotes if relevant (especially the child's own words).

If any agency is reluctant to share information, remind them of the **legal mandate to safeguard children** – information sharing is permitted and encouraged under Working Together and Data Protection Act Schedule 8 for safeguarding purposes.

Also be aware of **NRM first responder duties**: since social services are "first responders" under the Modern Slavery Act 2015, if you suspect the child is a victim of trafficking or modern slavery (which includes forced criminality), you should gather the necessary details to make an NRM referral at the appropriate time.

Early information gathering should thus also consider evidence needed for that process (e.g. dates/locations of exploitation, identity of suspects, etc.).

By the end of Stage 1, you should have as full a picture as possible of the child's situation – spanning **family, peers, school, online, and community contexts**.

This forms the foundation for a meaningful risk assessment. Before moving to Stage 2, double-check if any critical information is missing or any agency has been overlooked.

Given the urgency often present in exploitation cases, Stage 1 may be relatively swift (in crisis scenarios, much info gathering happens in a strategy meeting within 24 hours). In other cases, it might unfold over days or weeks of careful engagement.

Use **professional judgment** to balance thoroughness with timeliness. Once sufficient information is compiled to identify the nature and magnitude of risks, proceed to the analytical stage.

5.2 Stage 2 – Assess Harm and Risk of Harm

Purpose:

Analyze the information to determine the **extent of harm already suffered, the current level of risk, and the likelihood and severity of future harm** to the young person. In this stage, you should synthesize all data, identify what forms of harm the child is facing, evaluatee how serious the situation is, and what factors mitigate or exacerbate the risk.

Risk assessment in contextual safeguarding requires examining harm across a timeline – **past, present, and future** – and across the various contexts of the child's life.

Key components of Stage 2 include:

- **Assess Past Harm**:

Consider any harm or significant events the child has already experienced due to extra-familial factors.

Past harm might include incidents like: physical assaults (e.g. the child was previously stabbed or beaten by a gang), sexual abuse episodes (e.g. exploitation at a party), episodes of going missing overnight (with unknown but likely harmful experiences), being arrested for offenses (which could indicate coercion), or severe emotional harm (e.g. threats made against them or their family by perpetrators).

Each incident of past harm should be detailed.

Evaluate the impact of this past harm on the child's wellbeing. For instance, does the child show signs of trauma from these events (anxiety, PTSD symptoms, injuries, substance use to cope)?

Past harm is critical because it often has an **ongoing cumulative impact** and can be a strong predictor of future risk if the patterns continue . For example, a history of repeated exploitation likely means the child is entrenched in that situation, raising the risk of continued harm.

However, also note if any past harm has since been **addressed or resolved**, as that might reduce current risk (e.g. if a perpetrator was jailed, that specific harm may not be ongoing, though others might replace it).

- **Assess Current Harm**:

Evaluate the **immediate level of harm or danger** the child is in at present. This is essentially a safety assessment: is the child safe *today/tonight/this week*, or in acute danger? Consider what the information from Stage 1 tells you about the current situation:

  - Is the child presently under the control or influence of exploiters? (For example, are they currently being made to deal drugs, or sexually exploited by a gang, or pressured to carry weapons?).

  - Are there immediate threats against them? (E.g. a gang has threatened to hurt them or their family if they don't comply, or an online predator is

arranging to meet them imminently).

- Check if the child is currently missing or frequently away from safe environments – a child "on road" or out of contact for days is in a high-risk state at present.

- Determine the child's **current state of mind (mental and emotional health) and physical health** – are they fearful and trying to escape the situation (which could actually increase danger if they are harmed for trying to exit), or are they perhaps somewhat unaware of the risk (which can also be dangerous because they may not self-protect)? Are they injured or in need of medical attention right now?

- For a young person displaying aggressive or violent behavior toward others, assess if their behavior currently poses harm (or **risk of harm**) to others *and* themselves.

A youth carrying a knife, for example, is at risk of both using it (harming someone else) and of violent retaliation or legal consequences (harming themselves).

Determine if the **child's basic safety is compromised** at this moment. If, for instance, a child is effectively "under duress" from a criminal group, you would likely rate current harm as high. If they are at home and relatively safe right now, but risks are looming externally, current harm might be moderate – but remember that the absence of immediate injury doesn't mean the situation isn't urgent. At this stage, also consider the **child's own perception** of safety – do they feel in danger? Sometimes children don't recognize the peril they are in, but if a child *does* voice feeling unsafe or terrified, take that extremely seriously.

- **Identify Forms of Extra-Familial Harm**:

Based on the above, clearly delineate **what types of harm** the child is exposed to or at risk of, in the extra-familial context. This model requires naming the categories of harm to ensure none are overlooked.

Pertinent risk categories for extra-familial harm include:

- **Child Criminal Exploitation (CCE)** – e.g. being coerced into selling drugs (county lines), shoplifting or theft, carrying weapons, or other criminal acts under manipulation or force .

- **Child Sexual Exploitation (CSE)** – e.g. being groomed into sexual activity in exchange for something (money, drugs, affection) or under threat; could occur in person or through online arrangements.

- **Serious Youth Violence / Gang involvement** – e.g. participation in or victimization from gang-related fights, stabbings, shootings, or assaults; could also include the child perpetrating violence under a gang's influence.

- **Modern Slavery and Trafficking** – e.g. the child being moved, transported or controlled for exploitation (recognizing that CCE/CSE often fall under modern slavery). Legally, **child exploitation is a form of modern slavery** and perpetrators holding a child in servitude or forced labor are committing an offense under the Modern Slavery Act 2015 .

- **Online Harm** – e.g. online grooming, sextortion (coercing sexual images then blackmailing the child) , or recruitment into dangerous activities via social media or messaging. Even if harm manifests offline, the online element can amplify risk (recruiters using apps to ensnare kids, etc.).

- **Peer-on-Peer Abuse (outside of family)** – e.g. a peer sexually assaulting or exploiting the child, or violent bullying/assault by peers. This includes **harmful sexual behavior** by other youth, sometimes in group settings (as seen in some CSE rings or youth parties).

- **Teenage Relationship Abuse** – e.g. the child is in an abusive intimate relationship with a boyfriend/girlfriend who exerts coercive control, violence, or sexual pressure (sometimes overlapping with exploitation).

- **Extremism/Radicalisation** – e.g. exposure to extremist ideologies (online or in community) leading to risk the child could be groomed into terrorism or extremist violence. (While less common than CCE/CSE, it is a recognized extra-familial risk in some cases, covered by the Prevent Duty).

Examples: In our case scenario, suppose we find the child has been going missing and found carrying drugs under an older youth's direction – this clearly falls under **Child Criminal Exploitation**, specifically county lines drug trafficking. Perhaps there are also indications of

Serious Youth Violence if weapons are involved or rival gangs pose a threat.

It's important to list each applicable category because the response might differ slightly for each (though they often intertwine). Document: "Child is at risk of CCE (county lines) and associated serious violence; no indicators of CSE or radicalisation noted at this time," for example. Being explicit also helps when communicating with other agencies ("this is a CCE case" alerts police to apply relevant tactics, etc.).

Note: The forms of harm above are often interrelated – a child might be sexually exploited *and* criminally exploited by the same gang, or a girl might be used to lure others into county lines (both CCE and peer-on-peer abuse).

Make sure to capture the **full complexity**. National guidance confirms that extra-familial harm can involve multiple, concurrent forms of abuse .

Evaluate Severity and Impact:

For each identified form of harm, assess how **severe** it is or could be. Severity includes both the **nature of the harm** (e.g. physical injury, psychological trauma, criminalization) and its **magnitude/frequency** (one-off incident vs. repeated abuse, low-level pressure vs. life-threatening violence).

Questions to guide severity assessment:

- What is the worst credible outcome if this continues? (Death or serious injury from violence? Profound trauma from sexual exploitation? Long-term criminal involvement and prison? etc.)

- What harm has already occurred (and how bad was it)?

- How is the child coping? (Some children are extremely distressed – e.g. self-harming due to exploitation – indicating the current impact is very high; others appear numb or compliant, which might mask harm but also indicates deep grooming).

- Are there developmental or health effects observable? (Such as sexually transmitted infections, pregnancy, trauma responses, school dropout – these demonstrate significant impact on the child's well-being and future.)

- For harm the child is causing (aggressive or violent behavior), consider severity from a public safety perspective too (could they seriously hurt

someone if not addressed?).

Also realize a child perpetrating harm is often *also* a victim (of trauma or external influences), so their own level of jeopardy (e.g. retaliation from others, arrest record ruining future) is part of severity.

Use available frameworks to gauge levels – for example, some areas define **risk levels (High, Medium, Low)** for exploitation.

A High risk CCE case might be one where a child is entrenched in a gang, has been violently assaulted, is carrying weapons, and is under strict control (indicators of immediate danger of serious harm or death) .

Medium risk might involve some exploitation indicators without immediate life-threatening situations. Document the reasoning for your severity rating in clear terms (e.g. "High risk of serious harm: X has been stabbed before and threats on his life have been made; weapons present; psychological coercion is strong.").

- **Evaluate Likelihood (Future Risk)**: Next, analyze the **probability** that harm will occur (or recur) in the future if nothing changes. Factors affecting likelihood include:
  - **Patterns and trajectory:**

Is the harm escalating? (e.g. incidents becoming more frequent or severe). If yes, future harm is very likely. If the situation seems stable but harmful, it may continue at the same level (still likely, unless interrupted).

  - **Perpetrators' behavior:**

Are those exploiting/abusing the child likely to persist or intensify their abuse? Many exploiters will **escalate control** over time (e.g. giving the child larger drug quantities, increasing threats), which means without intervention the risk doesn't just continue – it worsens.

  - **Child's behavior and circumstances:**

Is the child becoming more embedded in the harmful context (e.g. loyalty to the gang, deeper drug dependency, running away more often)? If the child is currently resistant or trying to avoid the exploiters, that might reduce

likelihood slightly *if* they get help – but note, children rarely can escape these situations alone. If the child is about to undergo a big change (like moving school or area), that could alter likelihood (positively or negatively depending on where they move).

- **Protective factors' influence:**

Consider what protective factors are in place and whether they are sufficient to counter the risk. A strong protective factor (like an intensely supportive caregiver, or the child re-engaging in school with specialist support) can reduce the likelihood of harm materializing. However, if those protections are weak compared to the risk factors, the likelihood remains high.

In essence, ask: *if we do nothing, how likely is it that this child will be seriously harmed in the coming days/weeks/months?*

Given the evidence, is it almost certain, quite possible, or fairly unlikely?

Most contextual safeguarding cases that reach social care have at least a **medium to high likelihood** of harm absent intervention, because they've triggered significant concern already.

Still, articulate it: e.g. "Risk of future harm is **highly likely**, as the exploiters have a hold on the child and incidents have been increasing in frequency." Or, "Risk is **moderate**; the situation is dangerous but the family's vigilant supervision has so far prevented further incidents, though this could change quickly if not supported."

- **Assess Protective Factors & Mitigating Circumstances**:

Deliberately shift focus to **what might mitigate or reduce the risk**. Identify any factors that currently protect the child or could be bolstered to protect them. Protective factors might be:

- A **supportive parent or family** who is actively trying to safeguard the child (monitoring their whereabouts, communicating openly, contacting authorities when the child is missing). Even if the parent hasn't been able to stop the harm, their commitment and positive relationship with the child is a

strength.

- The child's **own strengths** – does the child have insight into their situation? (Some do realize "I'm in over my head" which can help in engaging them). Are they resilient or resourceful in any way that's kept them safer than otherwise? Do they have a desire to change ("I want to quit the gang but I'm scared") that can be worked with?

- **Safe spaces or people:**

Identify if there is any environment where the child is safe and doing well – perhaps a youth club, alternative education program, or a relative's house out of the area. Similarly, a key trusted professional (mentor, coach) who has a good rapport could be a linchpin for intervention.

- **Community resources:** Is there a local support that has already connected with the child (youth justice, victim support service, CAMHS for trauma therapy)? If so, that's a positive factor to integrate.

- **Legal or systemic factors:**

For example, if a perpetrator has just been arrested and remanded, the child might have a temporary reprieve (though watch out for others taking the perpetrator's place).

Or if the child is about to turn 18 and transition out of children's services, note that (as it could either increase vulnerability or change available supports).

For each protective factor, assess **how strong** it is and whether it's likely to persist. This will inform later planning (Stage 3 and 4) on how to leverage these factors.

For instance, a very strong protective factor (like an intensely supportive extended family willing to have the child live with them in a safer area) could significantly alter the risk equation if utilized. Make note if protective factors are currently insufficient so that you'll remember to reinforce them.

Overall Risk Judgment (Risk Level):

Finally, combine the analysis of severity and likelihood (considering protective factors as well) to arrive at an overall risk level for the child.

Many agencies use categories like **High / Medium / Low** or a RAG rating (Red/Amber/Green). Provide an overall statement: e.g. "Overall, [Child's Name] is at **High Risk** of significant harm due to extra-familial exploitation."

This overall risk judgment should be clearly justified by reference to the evidence: for example, "This assessment concludes High Risk because [Child] is currently being violently controlled by a gang (severe harm) and is likely to be further harmed or even killed if not protected (very likely future harm). Protective factors, while present (loving parents), are not currently able to counter the organized criminal threat."

Stating it this way is **legally defensible** – it shows a logical connection between facts and conclusion, which is important if, say, you are recommending court action to safeguard the child.

Additionally, consider **category of planning needed**:

Does the risk level meet the threshold for a **Child Protection Plan**? (Usually if significant harm is ongoing or likely, yes – in contextual cases, even though parents are not perpetrators, a CP Plan under category "Abuse – outside family" or similar can be made to mobilize multi-agency protection). Or is a **Child in Need plan** (services without CP registration) sufficient for now because risk, while present, is lower and family can safeguard with support?

Make a tentative call on this, to be confirmed with managers and multi-agency partners.

Remember that **extrafamilial significant harm still counts as significant harm** – some practitioners err by thinking "parents are supportive, so no CP Plan needed," but serious risk from outside *is* a child protection matter.

Serious Case Reviews have highlighted cases where lack of formal child protection processes for exploited adolescents left them inadequately protected.

So, align your risk judgment with the appropriate level of response (we will articulate the response in Stage 3).

- **Analytical considerations (Pitfalls to avoid):** Ensure that in your analysis,

you have not fallen into common pitfalls:

- Don't **blame the child** or write risk as if it's the child's choice. E.g. phrase "child is at high risk *of being harmed by others*" rather than "child is a high risk youth" – clarity that the source of harm is external helps avoid bias.

Children who have been criminally exploited **must be recognised as victims, not perpetrators** . For instance, if the child committed offenses under duress, that context must frame the risk (risk of continued exploitation leading to further offending *and* harm to them) rather than labeling them simply as a delinquent.

- Consider any **cultural or identity factors**: is the child's ethnicity, gender, disability, or sexual orientation relevant to how they are perceived or how they experience harm?

For example, research shows **"adultification" bias often affects Black boys – professionals may see them as older/more streetwise than they are, thus underestimating their vulnerability.

Check yourself for this: ensure your assessment reflects the child's actual age and maturity. Similarly, girls who are exploited by gangs may be mis-seen as making "choices" when in fact they're groomed; and boys can be victims of sexual exploitation too, though stereotypes might obscure it. Aim for an unbiased analysis.

Remember, whether unborn or 17 years and 364 days old, your duty is to the child.

- **Holistic but prioritized:**

It's possible the child has experienced multiple issues (e.g. minor shoplifting separate from exploitation, or family arguments at home *in addition* to extrafamilial risk).

Distinguish which risks are *primary*. The model encourages seeing the whole picture, but also not diluting focus. If the extrafamilial harm is potentially lethal and the family issue is, say, somewhat lack of supervision, clearly the external harm is the priority risk to address (though the lack of supervision might be a contributing factor). Make sure your risk assessment highlights the most pressing dangers so that the subsequent plan tackles those first.

- **Cumulative harm:**

Remember that **cumulative harm** (repeated or multiple lower-level harms) can be as damaging as a single incident of serious harm.

If this child hasn't had a "big" incident yet (like a hospitalization), but has endured a persistent pattern (like dozens of missing episodes, ongoing intimidation), treat that cumulative trauma with the seriousness it deserves. It can lead to complex trauma, affecting brain development, attachment, behavior, etc.. So don't let the lack of a headline event downplay your risk level if the pattern is clear.

In summary, Stage 2 is where all the information is **analyzed to paint a coherent picture of risk**:

What harm has occurred, what is happening now, what could happen next, and how likely is it — tempered by what supports exist.

The output of this stage is a well-reasoned risk assessment that will inform decisions and actions.

It should be recorded in the case file, often as part of a formal risk assessment document or report (for example, an exploitation risk assessment form or a section of the Social Work Assessment). Ensure it is written in clear language, distinguishing facts from professional opinions, and citing evidence (even within internal recording) for key assertions.

A good risk assessment at Stage 2 provides the **justification for whatever comes next** – whether that's stepping up intervention, calling a multi-agency meeting, or, conversely, possibly de-escalating if risks are lower than thought. In contextual safeguarding,

Stage 2 often reveals serious threats that necessitate a proactive, urgent response; thus, a thorough assessment here is vital to get everyone on the same page about the gravity of the situation.

5.3 Stage 3 – Decide the Response

Purpose:

Determine the **level of intervention and immediate actions** required to address the identified risks and protect the young person.

Stage 3 is about translating the risk assessment into a clear plan of **"Who needs to do what, and how urgently?"** It involves multi-agency decision-making to select the appropriate safeguarding

response given the risk level (e.g. early help, Child in Need, Child Protection, emergency action) and to put in place immediate protective measures.

Key considerations and tasks in Stage 3 include:

- **Threshold Decision – Statutory Intervention or Not:** Based on the Stage 2 analysis of significant harm, decide whether the case meets the threshold for a **Child Protection** response under the Children Act 1989.

  If the assessment found that the child is suffering or likely to suffer significant harm due to extra-familial abuse, then a **Section 47 child protection enquiry** should either continue (if already initiated) or be commenced.

  In practice, by Stage 3, you may have already be in Section 47 mode since the strategy meeting.

  Here, confirm and formalize: *Should this child be subject to an Initial Child Protection Conference (ICPC)?*

  Many contextual safeguarding cases **will** warrant an ICPC, even though the parents are not perpetrators, because a multi-agency **Child Protection Plan (CPP)** can be a powerful mechanism to coordinate intensive support and protection.

  However, in some scenarios, you might conclude that while there is serious risk, the family (and involved agencies) can manage it through a **Child in Need (CIN) plan** without the need for CPP (this might be if, for example, the risk is currently moderate and the family is very proactive in safeguarding with agency support).

  Use your agency's thresholds guidance (often a **threshold document** that includes extra-familial harm criteria) to guide this decision.

  Remember, **the absence of parental culpability does not bar a CP** plan– significant harm is about the child's condition, not who caused it.

  Some areas have developed specific Child Protection Plan categories or Conferences like "Risk outside the home" to cover these cases. If in doubt, lean towards a safeguarding (CP) framework when risk is high, as it triggers higher oversight and resources.

- **Emergency Action (if needed):**

Determine if any **immediate protective action** is required *before* longer-term plans kick in. If the risk is critical and immediate (e.g. intelligence that the child is going to be targeted or harmed in the next 24 hours, or the child is currently in a crack house in danger), consider emergency interventions such as:

- **Police protection**:

The police can remove a child for up to 72 hours to a place of safety under Police Protection Powers if they believe the child is at immediate risk. This might be used if, say, the child is found during a police raid on a gang hideout – police might keep them safe while social care finds a solution.

- **Emergency Protection Order (EPO)**:

Children's Services can apply to court (usually out of hours if urgent) for an EPO to remove the child to safety for up to 8 days (with possible extension). This might happen if a child needs to be removed from their community urgently to protect them – e.g. placing them with foster carers in a different area that the gang can't easily reach, at least short-term.

Removing a child from their home in contextual cases is complicated (as parents haven't caused harm), but in extreme cases, it may be the only way to break the hold exploiters have.

The family would ideally agree (perhaps on a temporary move), but if not, an EPO could be sought if risk of death or serious harm is imminent.

- **Safety Planning with family**:

If removal or police action is not warranted, devise a safety plan for the *very short term*. For example, maybe the parent agrees to send the child to stay with a trusted relative out of town for a week while agencies intervene.

Or the child surrenders their phone (if grooming is via phone) for a few days to disrupt contact. Or maybe police can place a patrol by the home if a threat was made to snatch the child. These are situational – the point is to **immediately reduce risk of imminent harm**.

- **Medical assessment**:

  If the child has injuries or health issues, ensure they get medical care (which also provides documentation of harm).

- **Legal guidance on criminal liability**:

  If the young person has been arrested or may be soon (due to coerced criminal acts), at this stage social workers should liaise with youth justice colleagues or legal advisors to ensure the child's status as a potential **victim of trafficking/exploitation is communicated**.

  Under Section 45 of the Modern Slavery Act 2015, a child cannot be guilty of crimes they were forced to commit as part of exploitation.

  For example, if the child was found transporting drugs under duress, part of the immediate response should be advocating that law enforcement treat them as a victim.

  This might involve submitting an NRM referral *quickly* (because a positive NRM decision formally recognizes the child as a victim of modern slavery, which can lead to charges being dropped).

  Stage 3 isn't when *you* make that final legal determination, but when you ensure the right steps (NRM referral, informing police/ identify exploitation evidence) are triggered so the child is not inappropriately criminalized.

  This is vital: one response goal is **"shield the child from criminalisation"**, aligning with the Youth Justice Board's Child-First principle and modern slavery guidance .

- **Multi-Agency Strategy Meeting / Discussion:**

In deciding the response, it's often necessary to convene or continue a **strategy discussion/meeting** (if not already done) under child protection procedures.

In exploitation cases, this can involve a broad set of agencies: children's social care, police (both child protection and possibly gang crime units or exploitation units), education, health, youth offending team, and any specialist exploitation practitioners (like an exploitation coordinator or Lead).

The risk assessment from Stage 2 should be shared and discussed to reach a common view of risk level. Then, collaboratively decide on actions. Key decisions at this junction:

- Is a section 47 needed? ? If yes, the strategy meeting sets that in motion.

- If the child is already on a plan or open case, do we **escalate** (CIN to CP) or **de-escalate** based on new info?

- Assign roles for immediate actions (police to do A, social worker to do B, etc. – see below).

- Consider **specialist assessments or referrals** needed. For example, refer to a **Trauma-informed mental health assessment** for the child (many exploited young people benefit from a psychological assessment to gauge trauma needs), or a **specialist risk assessment** if harmful sexual behavior is involved).

  Also, agree on who will make the NRM referral (likely the social worker, as a first responder agency).

- If the child is over 10 and involved in offending, coordinate with the **Youth Offending Team (YOT)**.

  The YOT will conduct their own assessment if the justice system is involved, but we need to ensure they have our exploitation info, so their assessment is informed and aligned .

  A plan might be to divert the child from prosecution using the info (for instance, YOT and police may decide on an out-of-court disposal in light of exploitation evidence).

- **Develop an Initial Protection Plan:**

Create a set of immediate and short-term actions to protect the child. This is the “safety plan” that bridges now and the full plan (which will be Stage 4). It often includes:

- **Measures to disrupt exploitation**:

The police to complete welfare checks or also increase patrols or surveillance on hotspots. If there are specific perpetrators, police can target them for investigation (sometimes the best way to protect the child is to remove the perpetrator through arrest/charges).

- **Safety planning with the child and family**:

Agree on steps like – the child will not go to certain areas; the parents will supervise handovers to school; perhaps installing a door alarm if the child sneaks out at night; sharing code words or emergency phone numbers the child can use if in danger.

All parties should know what to do if the child goes missing or if an exploiter contacts them (e.g. parent will immediately inform police and social worker).

- **Services and support**: Engage any **immediate support services**.

For example, assign a **intensive family support worker** or mentor to start meeting the child right away (someone skilled in CCE engagement who can do prevention work on the street level).

In a CSE case, ensure the child has access to a **sexual health clinic** for screening and contraception, and a crisis counselling if needed. If the child is using drugs (maybe introduced by exploiters), a referral to substance misuse services would be urgent.

- **Supervision and monitoring**:

Decide how frequently professionals will have eyes on the child. High-risk cases may warrant daily check-ins. Perhaps a police school liaison will check in at school, and the social worker or support worker will visit the home multiple times a week initially. The plan might include unannounced visits if needed.

- **Contingency plans**: "If X happens, we will do Y."

For instance, if the child goes missing again, the plan might be to invoke the local **missing protocol** (police to treat as high risk missing, trigger search,

etc.) and possibly consider a secure accommodation order if the pattern continues and risk remains extreme (as a last resort, courts can authorize placing a child in a secure unit for their protection from exploitation).

If parents are struggling to enforce boundaries, maybe contingency is that the child might be moved to a safer placement if they abscond again despite all efforts.

All these actions should be clearly assigned to individuals with timeframes.

For example, "Police (DC X) will do this by Friday"; "Social worker to make NRM referral by tomorrow"; "School to provide one-to-one support daily and report attendance to social worker weekly"; "Parent will call police if child absent after 9pm," etc.

Essentially, **Stage 3's output is an agreed protection strategy.**

- **Special considerations – working with the child during the response:**

It's critical at this stage to approach the young person in a **trauma-informed, child-centered** way.

They may not understand or agree with all protective measures (for instance, they may be upset if we suggest moving them or limiting their phone).

Use **engagement skills** to explain the concern and involve them in the safety planning as much as possible.

Emphasize you are **not there to punish or control them, but to protect**. For youths who are aggressive or violent, balance accountability with understanding – make sure they know you take any harm they do seriously, but you also recognize the reasons (trauma, exploitation, etc.) and will help them address those.

Often, building a **trusted relationship** with the professional team is itself a protective factor.

One of the findings from serious cases is that "**building trusted relationships between children and practitioners is essential**" for success

. So, part of the immediate response is identifying who in the professional forum might best connect with the child and ensuring that person has time to do so.

- **Document and obtain management approval:**

Given the seriousness of many contextual safeguarding interventions, record the response plan in detail and get any necessary approvals (e.g. manager sign-off for legal actions or funding for services).

This documentation will likely feed into the Initial Child Protection Conference report or similar.

Ensure the rationale for chosen actions is linked back to the risk assessment (for defensibility).

For example, if deciding *not* to pursue removal of the child from home, explicitly note why (perhaps because the family home is actually a protective factor and the plan is to strengthen safety in the community instead) – this guards against later criticism that "why wasn't the child moved if so dangerous?".

Conversely, if you are removing or recommending care proceedings, detail why lesser interventions are insufficient (e.g. "We considered maintaining at home under CPP, but the gang's reach and the child's level of control by them is such that the parents cannot keep him safe despite best efforts, hence we seek a care order").

- **National Referral Mechanism and victim support:**

As part of the response, if exploitation (CCE/CSE) is confirmed or highly suspected, **make a referral to the National Referral Mechanism (NRM)** for child victims of modern slavery.

This is a critical action (and a legal duty for councils as first responders). The NRM identification can unlock specialist support for the child (like an Independent Child Trafficking Guardian in some cases) and also helps ensure any criminal justice processes treat them as a victim.

The strategy meeting should decide who will complete this (usually the social worker) and ensure it's done swiftly with all necessary evidence attached. Also consider victim support services: e.g., Victim Support charity, or local support youth services that support trafficking victims or sexually exploited children – involve them early so the child has advocacy and emotional support separate from statutory

agencies.

In summary, Stage 3 sets the protective intervention in motion.

It's about **choosing the path** (early help vs CIN vs CP vs legal action) and **activating immediate safeguards**.

In contextual cases, it often leads to a coordinated multi-agency plan akin to a child protection plan, even if not officially under that banner.

The decisions here must be **timely** – days or even hours can be critical when dealing with live exploitation or violence risks.

By the end of Stage 3, everyone involved should be **clear on the course of action**: what will be done, who will do it, and how it addresses the identified risks.

The child and family should also be as clear as possible on what the plan is (transparency helps build trust, unless sharing certain details would jeopardize safety – e.g., you might not tell family all police tactics planned, but generally they should know you're working to stop the perpetrators and keep the child safe).

This sets the stage for implementing and formalizing the plan in Stage 4.

5.4 Stage 4 – Decide the Outcome

Purpose:

Determine and implement the longer-term **outcome plan** for the case, based on the response actions. Stage 4 is about formalizing the intervention that will address the risks moving forward – e.g., establishing a Child Protection Plan, a Child in Need Plan, or, in extreme cases, initiating court proceedings for the child's welfare. It also involves defining what "success" will look like (outcomes for safety) and ensuring the chosen plan is appropriate to achieve that.

Key elements of Stage 4 include:

- **Formalizing the Plan Type:**

At this stage, the immediate protective actions from Stage 3 transition into a structured **intervention plan**. This usually means:

- If proceeding under child protection: convene the **Initial Child**

Protection Conference (ICPC) (if not already done) with multi-agency attendance including family.

Present the assessment and recommended plan. If the conference concurs the child is at risk of significant harm, they will formulate a **Child Protection Plan (CP plan)**.

The CP plan should explicitly cover the contextual risks – often, the category might be recorded as "Emotional Abuse" or "Neglect" because those are traditional labels, but the plan details should state the risk is extrafamilial (some areas now have a category for "Exploitation" or similar).

Ensure the plan's focus is clear that the **aim is to protect from extra-familial harm**. The CP plan will list tasks for core group members (similar to what was outlined in Stage 3, but now more detailed and over a 3-6 month outlook before review conferences).

For instance: social worker to conduct direct work with the child around exploitation and staying safe, police to continue disruption of perpetrators, parents to supervise and implement safety measures, etc., with review points.

- If on **Child in Need** track: develop a CIN plan with the family and partner agencies.

This is less formal than a CP plan but should still be written and agreed in a multi-agency meeting. It might be appropriate if risk was judged lower or has reduced due to initial actions, and the family is managing.

The CIN plan would outline services and support to continue (e.g. youth club, family therapy if needed for any familial strains, continued monitoring by a lead professional, etc.).

- In some cases, especially where parents are truly unable to keep the child safe despite no fault of their own, or the child's own behavior puts them beyond parental control, consider whether the outcome needs to be the child **entering care** (either voluntarily under Section 20 CA1989 or via a court order).

For example, if a 16-year-old is so entrenched in a gang locally that every night he runs off and returns injured, the parents might actually want him in a

safe placement out of area.

An outcome option could be a **planned relocation**: moving the child to live with a relative in another city, or fostering/residential care far from the exploiters. This is a serious step – the national panel noted that simply moving a child is *not* a fully effective long-term strategy on its own (because the underlying issues and the gang's reach may persist), but it can be part of a solution if combined with other supports.

If such a move is done, the plan must include intensive support in the new location to prevent exploitation resuming. Any decision for care or secure placement should be made with legal advice and, ideally, the child's agreement (though not always forthcoming).

The outcome in these cases might involve initiating **care proceedings** for a Care Order if parents disagree or if it's needed past 72 hours/EPO.

Ensure all legal tests (threshold criteria for suffering/likely significant harm) are clearly evidenced in your documents, which they should be from Stage 2 .

In summary, decide: *Will the child be safeguarded at home with a multi-agency plan, or do conditions require removal from home or other legal actions?* This is the crux of outcome decision.

Make this decision collaboratively with your manager, legal team, and multi-agency partners, and, as much as possible, with the family's understanding.

- **Goals and Outcomes Setting:**

Establish clear **goals** for the chosen plan. What outcomes are we seeking for the child? Some likely goals in contextual safeguarding cases:

- The child is no longer being exploited or harmed outside the home (i.e., removed from immediate danger and free from coercion).

- The perpetrators have been dealt with (arrested or otherwise no contact) or the exploitative context has been disrupted.

- The child has re-engaged with positive structures (returned to school or training, engaging in pro-social activities, etc.).

- Any criminal issues for the child have been resolved in a child-friendly manner (e.g., charges dropped due to NRM status, or appropriate youth justice interventions in place focusing on rehabilitation).

- The child's emotional and physical health has improved (trauma being addressed in therapy, no new injuries, perhaps reduction in harmful behavior like substance abuse or aggression).

- The family (or caregivers) feel more confident and equipped to protect the child and have a stronger relationship with them.

These outcomes can be broken into shorter-term and longer-term.

For instance, a short-term outcome might be "Child is safely attending school every day for the next month" whereas a long-term outcome might be "Child achieves GCSEs and has stable accommodation away from criminal influences." Clarity on goals will guide the interventions – for example, if a goal is to get the child out of the gang, one intervention might be referral to a specialized exit program or involving a mentor who was ex-gang member to counsel them.

Intervention Services and Actions (Longer Term):

Outline the services and actions to achieve the above goals, building upon what started in Stage 3:

For the young person:

Ongoing **specialist support** such as exploitation-focused mentoring, therapeutic services (trauma-focused cognitive-behavioral therapy or other trauma-informed counseling) , education support (maybe enrolment in an alternative provision if they can't return to mainstream due to safety), positive activities (sports, arts, whatever engages them in a healthy peer group).

If appropriate, involve them in **victim advocacy groups** (sometimes meeting other survivors of exploitation can empower). If the youth has also been violent, include **behavioral programs** (anger management, restorative justice if they harmed others, etc.), but delivered in a trauma-informed way that also addresses their victimization.

The **Youth Justice Board** promotes a 'Child First' approach focusing on diversion and support rather than punitive measures for exploited children – ensure any youth justice orders align with the safeguarding plan (e.g., if on probation, the YOT worker should be in the core group and tailor the intervention to include exploitation awareness).

For the family: provide any needed support or services to parents.

Many families dealing with extra-familial harm feel terrified, isolated, and guilty. They may benefit from peer support (there are parent support groups for parents of exploited teens), family therapy to improve communication with the adolescent, or practical help (e.g., a community safety team checking the home security, or relocation if they all need to move for safety, which is extreme but possible).

If the parents were found to have any contributory issues (like lack of supervision due to working long hours or mild neglect), address those through parenting support or in-home services.

The plan should treat parents with respect as partners in protection, not as adversaries – unless evidence showed parental collusion or extreme negligence in the context, which can happen but is relatively rare. More often, parents are doing their best and need help to do more. Engaging them fully can improve outcomes .

- **Multi-agency coordination:**

Continue regular **core group meetings** (if CP Plan) or CIN review meetings to ensure agencies follow through. The **Serious Violence Duty** and other frameworks mean resources might be available (some areas have Violence Reduction Units or extra funding for youth violence prevention – tap into those).

Make sure agencies like education follow any special arrangements (maybe this child needs door-to-door transport to school for a while, funded by the local authority, to prevent intercept by gang on way)

- **Legal/justice follow-up:** Track the progress of any criminal investigations against perpetrators. Social care often needs to liaise with police detectives to know if/when offenders will be charged, as that affects safety planning.

Also maintain contact with the **NRM process** – a "reasonable grounds" decision should come quickly, and later a "conclusive grounds" decision. Support the child through that (NRM interviews, etc.). If the child might testify against abusers, witness protection or special measures in court would be needed – advocate for that as part of outcome planning.

- **Contingency planning:**

Good plans have contingencies. "If risk increases despite plan, we will… (e.g. consider secure accommodation; call a legal planning meeting for care proceedings; involve a higher level of police intervention, etc.). If the situation improves dramatically, how will we safely step down

(e.g. from CP Plan to CIN to case closure) without leaving the child vulnerable again?" These should be sketched out.

- **Child and Family Agreement:**

The outcome plan should be explained clearly to the child (in an age-appropriate way) and the family. Get their views and ideally their agreement.

There may be elements they dislike (such as social care oversight or police involvement), but through building trust you hope to gain cooperation.

Where possible, **coproduce the plan** – e.g., ask the child what might help them stay away from X friend or leave X gang; their ideas could be included, which invests them in success. Also clarify responsibilities: "We will do these things, and we need you to do these things." For a youth who's been lured by a sense of "loyalty" or "protection" in a gang, framing the plan as *giving them a better alternative and real safety* might resonate over time, especially as the trauma bond to exploiters is gradually broken by consistent care and proof of trustworthiness from professionals.

- **Implement and Monitor:**

Once decided, immediately implement the plan. Ensure everyone has the plan in writing. At this stage, if a CP Plan, core group meetings (often within 10 days of ICPC, then monthly) will drive implementation.

If CIN, regular reviews (perhaps 6-week intervals) should be set. Make sure **review points** are scheduled (we will cover formal review in Stage 5, but here at outcome stage we plan when and how to review progress).

There should be clarity on how to measure if the plan is working – e.g., decreased missing episodes, improved school attendance, child reporting feeling safer, etc., by the next review.

- **Legally Defensible Decisions:**

All outcome decisions – whether to remove a child, to keep them at home on a plan, to close a case at CIN level, etc. – must be clearly justified in case records and (if applicable) conference minutes or court documents.

The rationale ties back to the risk assessment. For instance, if some might question "Why not make this a CP case?", you should have documented, "Decision: Child in Need plan sufficient because parents are protective, and risk is now managed via [specific steps]; will escalate if any increase in risk."

Conversely, if making it CP with supportive parents, note that it's because the level of external risk (e.g. from a violent gang) is so high that it meets significant harm criteria, and the formal status brings multi-agency accountability.

Legal robustness also comes from referencing the **law and guidance**: e.g., cite that under Working Together and the Children Act, you are required to act where a child is in danger, thus the chosen outcome is proportionate. If going to court for an order, you'll prepare statements that show how the threshold is met ("likely to suffer significant harm" due to exploitation, and parents despite best efforts cannot protect without court's help).

- **Balance Rights and Safety:**

Keep in mind the child's **rights** throughout. Removing a child's liberty (even for their protection) engages human rights considerations – it must be necessary and last resort. Similarly, imposing restrictions (like intensive surveillance or limitations on movement) should be justified and reviewed.

The plan should strive to be the **least intrusive intervention** needed to keep the child safe, in line with the principle of proportionality.

For example, secure accommodation (locking a child up for safety) is drastic and only for when all else fails. Always ask: could we achieve safety in a less invasive way? If not, have that clearly reasoned.

Also respect the child's **wishes and feelings** as much as possible; even if they want something unsafe (like to continue seeing a dangerous peer), acknowledge their feelings in the plan ("we understand you care about X, but right now being around X is causing you harm, so this plan will help you stay away from harm while we help X get help too maybe").

Sometimes involving the child in positive activities is an alternative way to meet the need that dangerous situation was filling (e.g., if they sought a "family" in a gang, maybe a mentorship program can simulate belonging).

In essence, Stage 4 is about setting the **course of long-term action**: it translates the assessment and initial response into a concrete plan with clear goals, agreed interventions, and legal standing. By deciding the outcome in a structured way, social workers provide the young person with a path out of harm and toward recovery and stability.

This stage is also about ensuring **accountability** – once a plan is in place, everyone knows what

is expected, and the case is not allowed to drift.

Keep in mind that extrafamilial cases may require **persistent effort and time**; success might not be immediate. The outcome plan should be prepared for setbacks (e.g., child might return to the exploiters once or twice – rather than deeming the plan a failure, adjust and keep at it).

Many youths exit exploitation only after multiple interventions, so perseverance is key. The outcome stage sets up that persistent, structured approach to gradually reduce risk and build the child's resilience and protective network, until we can confidently say they are safe from those external harms.

5.5 Stage 5 – Review Risk Assessments During Ongoing Intervention

Purpose:

Continuously monitor and review the child's situation and the effectiveness of the intervention plan, updating the risk assessment and plan as circumstances change.

Stage 5 emphasizes that risk assessment is **not a one-time event** – especially in contextual safeguarding, where dynamics can shift rapidly, regular review is critical. It corresponds to the case management cycle of **assessment, planning, intervention, review** that repeats as needed .

Key activities in Stage 5 include:

- **Regular Review Meetings:** Establish a schedule for formal reviews of the plan:

- For a Child Protection Plan, the first **Review Child Protection Conference** will typically be at 3 months, then every 6 months (unless circumstances warrant earlier). Core group meetings (monthly or more) serve as mini-reviews in between .

- For a Child in Need plan, set a review meeting perhaps every 6-8 weeks with the family and involved professionals.

- For a looked-after child (if the child came into care), there will be **Looked After Reviews** initially at 1 month, then 3 months, then every 6 months, chaired by an Independent Reviewing Officer – those are opportunities to review the risk and plan too.

- Additionally, if the child's case is under the purview of a specialist panel (like MACE or a Complex Safeguarding panel), those will review the case at set intervals (some panels review monthly or bi-monthly high-risk exploitation cases)

In each review, revisit the **risk assessment** from Stage 2 and the goals/plan from Stage 4:

- **Has the risk level changed?**

Discuss updates: e.g., "Since our last meeting, there have been no missing episodes and the child cut off contact with X gang member – risk of CCE has decreased from High to Medium." Or conversely, "Child was found again in [town] with drugs; risk remains High, possibly increased in violence."

- **Is the child safer now than before?**

Use evidence: any new incidents or their absence, the child's own report of feeling more/less safe, feedback from services (school says attendance up and child more engaged, or maybe school says child still seems very tired and disengaged).

- **Progress on outcomes:**

Have some goals been met? ("He returned to education as planned and is doing okay there.") Which are not met? ("The gang members haven't been charged yet and one is still hanging around – big concern.")

- **Effectiveness of interventions:**

Evaluate each element of the plan: what's working, what's not? For example, maybe the mentor is really helping (child opens up to them), but the child refuses therapy – so maybe try a different approach for therapy, like a less formal therapeutic activity. Or parents might be struggling to enforce boundaries still – perhaps additional support or even considering if the child needs a different living arrangement is necessary

Importantly, **update the risk assessment** after each review with new information.

Many agencies keep a running exploitation risk assessment – continue scoring or narrative updating to reflect current status. This ensures everyone has an up-to-date understanding and can spot trends (improving or deteriorating).

- **Adapt the Plan as Needed:** Based on review findings, modify the plan:

- If risk has **reduced**, consider scaling down some intensive measures – *gradually and safely*.

For instance, if after 6 months the youth is out of the gang and stable, you might reduce police patrols or begin to allow the child a bit more freedom that was previously restricted, to test stability.

Possibly step down from CP Plan to CIN if appropriate, or CIN to targeted early help.

However, be cautious – premature withdrawal of support can lead to relapse. Many case reviews show that when agencies close a case too soon, the young person can fall back into exploitation. So, decisions to step down should be made only when protective factors are clearly outweighing risk factors and a sustained period of stability is evidenced.

- If risk remains **high or has increased**, escalate the response. Perhaps despite a CP Plan at home, the situation isn't improving – you might need to convene a legal planning meeting to consider court action for care, or try a new tactic like a **secure accommodation** order (if the child's life is in immediate danger each time they abscond, a short period in secure care could break the cycle while finding other solutions).

Or bring in additional agencies – maybe now is the time to involve a more specialized service (e.g., a charity that does intensive work with gang-affected youth if not involved yet).

- Incorporate any **new risk factors** that have emerged. For example, maybe initially it was all about CCE, but now the child started a risky relationship (introducing teen relationship abuse risk) – the plan should now add actions to address that (like educating the teen on healthy relationships, involving domestic abuse specialists). Update goals if needed.

- Also, if **new protective opportunities** arise, use them. E.g., a space opens in a coveted program (like a live-in wilderness therapy program or a vocational training far from home), consider adjusting plan to include that as a new intervention.

Always do plan changes in consultation with the family and agencies – have a review meeting or core group to agree changes, rather than unilateral changes.

- **Ongoing Multi-Agency Communication:**

Maintain frequent communication between all professionals between formal reviews.

Contextual cases can have sudden developments (a violent incident, an arrest, a trigger event like a friend being killed). Don't wait for the next meeting if something urgent happens – call an earlier review or at least share information and adjust safety measures immediately.

For instance, if the police warn that the gang has issued a death threat against the child, convene an emergency strategy discussion to update the plan (maybe now the child must be moved that night). This responsiveness is critical.

The safety plan should have a section on **"Emerging Risks – actions"** so everyone knows how to flag issues and who to call.

- **Recording and Evaluation:**

Each review should be recorded with updated risk ratings and rationales. Supervisors or child protection chairs should oversee that the case is progressing.

If after a certain time (say a year) the risk remains high despite all efforts, it's important to have a frank evaluation: are we missing something? Do we need a fresh perspective (maybe auditing or a peer review by another team)?

In such complex cases, sometimes an internal **case review** or escalation to senior management can generate new ideas or resources.

The ultimate goal is positive change; if it's not happening, acknowledge that and seek solutions rather than letting a situation stagnate.

- **Case Closure or Step-Down:** Eventually, if the plan succeeds, consider when it's safe to **close the case** or step it down to universal services. This should only happen when:

- All or most goals have been met.

- The risk factors have significantly diminished or been eliminated (e.g., perpetrators are gone, child has new peer group, is older/more mature and able to self-protect, etc.).

- Protective factors are strong and sustainable without intensive professional input.

- The child and family are in agreement that support can be reduced, and they know how to seek help again if needed.

When closing, ensure a **contingency plan** is communicated – like "if any concerns of [exploitation/violence] resurface, refer to Children's Services or the police immediately." It might be useful to keep some lower-level support in place (e.g., a mentor from a voluntary service) for

a transitional period so it's not an abrupt withdrawal.

Also, **celebrate success** with the young person and family when milestones are reached – acknowledge the progress they've made in very difficult circumstances. This helps empower them and reinforces the positive path.

- **Learning from the Case:** Finally, Stage 5 is an opportunity for agencies to learn from what worked or didn't, to apply to future contextual safeguarding practice.

Debrief within the team: were there any "near misses" or mistakes? Many serious case reviews have shown that common pitfalls in contextual cases include agencies not sharing information timely, underestimating risks, or not engaging the young person effectively. If luckily this case improved, reflect on why – was it the strong relationship built, the persistence of a particular worker, a creative intervention?

Document those insights. If the case had bad outcomes (e.g., youth got harmed despite efforts), it may even go to a formal Safeguarding Practice Review; regardless, internally analyze what could be done differently next time. This continuous learning will refine the risk assessment model for others.

During the ongoing intervention, always remember that **risks can change as circumstances change and should be reviewed on a regular basis** .

The contextual world of a young person is often fluid – new people enter, environments shift (a new gang in town, changes in school year group, etc.), and the child grows older (their own abilities and views evolve). Our safeguarding approach must be just as dynamic.

Regular reviews ensure that the **intervention remains aligned with the reality of the young person's life**, and that we remain proactive rather than reactive. In practice, a good review process can mean the difference between catching a resurgence of risk early versus being blindsided by a crisis.

In conclusion, Stage 5 closes the loop of the model by ensuring that **assessment and action are iterative**. It reinforces that protecting a young person from contextual harm is not a one-off task but an ongoing process requiring vigilance, adaptation, and sustained multi-agency effort.

By following through each stage and looping back through Stage 5, you can continuously **improve safety outcomes** for the child until such time as the risks are acceptably managed and the case can safely be closed.

6. Useful Tools and Pitfalls of Risk Assessment

In implementing this contextual safeguarding risk assessment model, practitioners have access to various tools and should be wary of common pitfalls. Being aware of these can enhance the quality of assessment and decision-making:

Useful Tools and Frameworks:

- **Structured Risk Assessment Tools:**

Many localities or national bodies have developed specific tools for assessing exploitation and extra-familial risk. For example, the **Child Exploitation Risk Assessment Matrix** (often a checklist of indicators for CSE and CCE with a scoring system) can help quantify risk levels (low/medium/high) based on the presence of indicators like those discussed earlier.

These tools provide a consistent method to flag concerns and are useful in reviews to gauge if risk is trending down or up. However, use them as a guide, not gospel – they support but do not replace professional judgment .

- **Trauma-Informed Assessment Frameworks:**

Since many victims of extra-familial harm have trauma, using trauma screening or assessment can inform your understanding. Some agencies integrate **trauma checklists** or the **Adverse Childhood Experiences (ACE) questionnaire** to contextualize the child's behavior.

The **Youth Justice Board's AssetPlus** assessment, for instance, incorporates sections on exploitation and trauma to ensure a holistic view .

Additionally, tools like the **"Working with Exploited Children: Risk and Resilience Matrix"** (if available) can map both risks and strengths graphically. Always approach assessment with the trauma lens: recognize that what might appear as "difficult" behavior could be a symptom of trauma (fight/flight response), and use tools that encourage exploring that.

- **Context Mapping Tools:**

Developed by the Contextual Safeguarding Network, these help in **mapping peer networks and locations**.

A simple version is drawing the young person in the middle and mapping connections (people, places) around them, annotating with positives and negatives. There are also more formal tools – for example, some areas use a **"Peer Group Assessment"** form or a **"Location Assessment"** (to assess a hotspot like a park: who goes there, what times, what controls exist, etc.). These tools

help extend the assessment beyond the individual to their social environment, aligning with contextual safeguarding principles

- **Multi-Agency Assessment Forums:** Tools are not just paper – processes are tools too.

The **Multi-Agency Child Exploitation (MACE) meeting framework** itself is a tool to pool information and analysis from various agencies .

Practitioners should utilize these forums; bring the risk assessment to MACE and use the collective knowledge to refine it. Similarly, **information-sharing systems** (like a multi-agency data sharing platform, or police intelligence dissemination) are tools to ensure no one works with partial info.

Effective risk assessment often hinges on whether you have that one piece of intel from police about a new recruiter in the area, etc., so making full use of multi-agency databases or meetings is crucial.

- **National Referral Mechanism (NRM) & Statutory Guidance:**

The NRM process itself can be seen as a tool to formalize recognition of risk from exploitation. The **Modern Slavery Act 2015 Statutory Guidance** (updated 2023) includes extensive indicators of child trafficking and exploitation – referring to those indicators can enhance your risk assessment.

Also, submitting an NRM referral triggers a parallel risk assessment by the **Home Office "Single Competent Authority"**, which sometimes can provide additional perspective (they may request more info or give feedback that helps you refine understanding).

Moreover, the mere act of gathering info for the NRM (detailing exploiters' control methods, movements, etc.) can systematize your assessment. Ensure you are familiar with this guidance and the NRM digital referral system – it's both a legal requirement and a helpful framework.

- **Guidance and Checklists from Serious Case Reviews:**

There are **practice guides** distilled from SCRs and research. For instance, the Tackling Child Exploitation (TCE) program and Research in Practice publish **principles for responding to extra-familial harm** .

These often include practical checklists (e.g., "Have you considered the child's digital life? Involvement of community guardians? Cultural considerations?"). Using these as a reference can ensure you don't miss an aspect.

NSPCC and others provide **case review briefing** summaries highlighting lessons; reading those can sensitize you to pitfalls to avoid (like failing to convene a strategy meeting early enough or not seeing the signs of exploitation because the child was viewed as an offender).

- **Supervision and Consultation:**

One of the best "tools" is good reflective **supervision**. Discussing a contextual case with a supervisor or in group supervision can surface biases and blind spots. A manager might ask, "Have we checked for any online enticement angle?" or "What about the younger sibling, are they at risk too from the same gang?" (Siblings can sometimes become targets or be used as leverage).

Additionally, **consult specialist practitioners**: many areas have an **Exploitation Coordinator** or can access an educational psychologist or a context safeguarding expert for consultation.

They can provide advanced risk analysis or suggest creative interventions (like target-hardening a location or using specific referral routes). Don't hesitate to use these human resources.

Common Pitfalls to Avoid:

- **Victim-Blaming Language or Attitudes:** Be extremely cautious not to frame the assessment in a way that blames the child for their exploitation or portrays risky behaviors as solely "bad choices." Phrases like "she continues to place herself at risk" or "he refuses to stay away from trouble" can creep in, especially in frustration.

This can lead to less empathy and weaker interventions. A trauma-informed approach reminds us that the child's behaviors are often **symptoms of trauma or coercion** .

Professionals should check each other on this – for instance, in a meeting, if someone says "He's just non-compliant," refocus on *why* – perhaps fear or grooming. Using appropriate language (e.g., "He is being *drawn back* into the exploitative situation, indicating the strong hold the perpetrators have on him" instead of "He went back to them") shifts perspective. Remember, **the onus is on professionals to find strategies to engage the child**, not on the child to simply accept help.

- **"Adultification" and Bias:**

As noted earlier, adultification bias (viewing minors, particularly black or minority youth, as older/more culpable) is a documented pitfall . This can result in downplaying risk ("he's streetwise, he can handle himself") or misinterpreting trauma responses as delinquency.

Also, biases regarding gender ("boys don't get sexually exploited" or "girls aren't involved in gangs") can blind you to certain harms. Another bias is assuming parental culpability in every case – in contextual harm, parents often are not to blame, but if one holds a bias that poor parenting must be at fault, one might mis-prioritize a response (like sending parents on generic parenting courses while missing the real threat from outside).

Awareness training and supervision can mitigate these biases, but actively challenge yourself: Have I unconsciously treated this 15-year-old as if they were an adult by expecting them to "just say no" to a gang? Am I taking their disclosure less seriously because they speak confidently? Challenge any narrative that doesn't square with the reality that a child is a victim in need of protection.

- **Over-reliance on any one source of information:**

If a particular agency's voice dominates (e.g., police intelligence says one thing and everyone runs with that as the whole truth, or conversely, the child's account alone without corroboration is taken as complete), you might miss nuance. Triangulate info.

Also, avoid silo mentality: *e.g.*, the YOT might assess risk to others and social care assesses risk to child – but these should be merged for a full picture. **Share and cross-verify**. A pitfall noted in cases is when agencies don't pool their knowledge, each might think risk is moderate, not realizing that put together it's high.

- **Not involving the child/young person in the process:**

It's a pitfall to exclude the young person "for their own good" or because they're challenging. While you might have to have professionals-only segments (like strategy meetings), overall the child should as much as feasible know what's going on and have their say.

If we plan in a vacuum, we risk doing things *to* the child rather than *with* them, which can lead to distrust and non-cooperation.

Even aggressive or resistant youth usually have underlying needs/wishes – find ways to hear those (through an advocate, written statements, or during direct work).

Also ensure they understand why certain decisions (like restricted contact) are made – lack of explanation can breed resentment or further trauma.

- **Failure to record rationale (“decision drift”):**

In fast-moving contexts, decisions might be made on the fly or incrementally, and later no one is sure why a certain approach was taken. This is risky legally and for continuity.

For example, if a decision was made not to accommodate the child, but it isn’t documented, later if harm comes, the question will be “why was the child not removed from danger?” You need the rationale on record (“on date X, multi-agency decision was to keep at home due to factors A, B, C, with plan to mitigate risk through measures Y, Z”).

Lack of documentation is a pitfall that can undermine an otherwise sound process. It also helps if staff change – new workers can understand why certain steps were taken or not taken.

- **Lack of clarity on agency roles and local processes:**

As found in the national exploitation review, “many practitioners lack knowledge or confidence about local processes and what they can do to help exploited young people” . This pitfall can lead to inaction or missteps.

For instance, not knowing how to refer to the NRM or assuming someone else did it, or not being aware of the local police exploitation team so you only ever call the generic line.

To avoid this, ensure you know your local pathways: have flowcharts for CSE/CCE processes, know the points of contact (like who chairs MACE, who is the missing persons liaison, etc.). If you don’t know, ask a manager or look up your Local Safeguarding Children Partnership’s guidance on exploitation .

It’s better to ask than operate in ignorance. You can be as good as your knowledge is, so invest time in **training and familiarization** with procedures.

- **Not disrupting perpetrators or wider contexts:**

Sometimes we focus so much on the child that we forget to address the source of harm. One pitfall is to work in isolation on victim support and not push law enforcement to go after the criminals, or not involve community safety to fix environmental issues (like poor lighting in a park where assaults happen).

The child can’t be fully safe if the environment remains dangerous.

Effective risk management often means managing the source of risk as well.

Encourage police action – if you feel not enough is being done to catch offenders, escalate that in safeguarding forums.

Similarly, if a takeaway shop is known for harboring exploitation, get licensing or community safety teams to intervene (they can shut down or sanction establishments enabling harm).

Contextual safeguarding is about changing those harmful contexts, not just moving kids around them. Don't let the plan forget that side.

- **Short-term focus (safety now, but no long-term plan):**

Conversely, sometimes there's a flurry of immediate activity which then fades without a sustained plan, and the child slips back into harm after initial vigilance wanes.

Ensure that after crisis mitigation, there's a long-term strategy. It's a pitfall to close a case as "safe" right after one success (e.g., the child had 3 good months) without considering the long view – adolescence can have relapses. Things don't always go as predicted or hoped for.

- **Burnout and empathy fatigue:**

These cases can be very challenging and long-running. Workers might become cynical ("nothing works for this child") or simply emotionally exhausted, leading to a lax in following the model (e.g., not updating assessments, accepting a lower standard of engagement).

Supervision and possibly rotating workers (with continuity planning) might be needed to keep perspective fresh. Recognize if you're hitting a wall and seek support rather than unconsciously disengaging, which is a pitfall that leaves the child effectively without a champion.

In practice, addressing pitfalls often comes down to maintaining a **reflective, multi-agency, and child-centered approach**, and never getting complacent about risk.

Use **"Top Tips"** from research: for example, one serious case review recommended identifying **"reachable moments"** when a child might be most open to help (like after a scary incident or when hospitalized) and capitalizing on them.

Ensure the plan is ready to seize those moments (have a trusted person visit them in hospital, etc.). Also remember that **consistency** and **relationship-building** are themselves tools – often one stable, caring professional over time is what eventually helps a youth exit a harmful situation.

To conclude, by utilizing the available tools (risk checklists, mapping, NRM, multi-agency forums, etc.) and staying vigilant about common pitfalls (bias, poor info-sharing, etc.), you can greatly enhance the effectiveness of your work.

The goal is to provide a structured yet flexible approach that is both **evidence-informed and responsive to the real-world complexity** of extra-familial harm. Tools and vigilance help ensure our assessments are robust and our interventions truly protect and empower the young people we serve.

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