



**Hillingdon Safeguarding
Partnership**



Learning from Practice: Serious Youth Violence

Executive Summary

February 2023

1. Local Context

Identifying, minimising, and mitigating the risk to children suffering extrafamilial harm has been a stated priority for Hillingdon Safeguarding Partnership since September 2019. We recognise that this is a complex issue, and one which requires a multi-layered approach and the cooperation of all stakeholders including communities and families. To understand the context of services in Hillingdon it is helpful to have knowledge of the framework of support that exists.

Universal Services are those that provide support to every child irrespective of need. These services work to promote wellbeing, providing a safety net of support to children and their families. Hillingdon GPs, health providers, and education professionals can all access training provided by the Safeguarding Partnership, with research briefings, practice guidance and webinars available to promote best practice.

In 2021 Central and North West London NHS Trust undertook a small research project to consider the health needs of children accessing alternative educational provision. Many of the children had previously unidentified, and therefore unmet, health needs that had contributed to the difficulties they had experienced in accessing mainstream education. This led to the development of Hillingdon's **Education Inclusion Toolkit for Schools**, a partnership document that provides schools with information about signs and indicators of underlying need, and detail of available supports and strategies.

In August 2021, the London Borough of Hillingdon launched the **Stronger Families** approach to early help services within the Borough. This is a locality-based model, designed to ensure that the services in each of the three localities reflect and respond to need in that area. The Stronger Families Localities are well positioned to assist in the implementation of a contextual safeguarding approach to extrafamilial harm.

The **Adolescent Development Service** launched in 2018 and provides a diverse offer of support to children and young people in Hillingdon. This includes group-based sessions, one to one support and a variety of focussed programmes including those addressing substance use and misuse, sexual health and wellbeing, gender-based group work and support for children transitioning from primary to secondary school. Where required children can also access intensive one to one support and counselling services. The service is delivered in partnership with a range of local stakeholders and organisations. This promotes accessibility, and community-based opportunities for engagement, with sessions provided in schools, community centres, libraries, outdoor spaces and with the support of local businesses.

The **AXIS Service** collates and analyses hard and soft information about child criminal exploitation, child sexual exploitation and serious youth violence. This information is gathered from a range of sources, including return home interviews, children, and professionals. Information is then analysed to aid in the identification of new and emerging themes, for example increased risk in a particular area, or frequent mention of a particular child. AXIS provides early intervention support to children identified as being vulnerable to exploitation, this includes direct work to increase awareness of risks, and engagement in prosocial activities. The service produces a widely distributed monthly newsletter highlighting key findings and information about exploitation within the Borough. Where required, AXIS also provide information about individual children, including information around known associates, any risks and significant locations within the Borough affected by exploitation.

Our acute health trust, the **Hillingdon Hospital** have developed and implemented a tool for health professionals to assist in identifying children who may be at increased risk of extrafamilial harm. This broadly reflects the content of the Local Authority Vulnerability Risk Assessment.

The welfare and wellbeing of children who are reported missing is monitored closely. **Return Home Interviews** are provided for each child, with the option of completion by their allocated worker, or independently by the AXIS Service. Patterns and themes are analysed collated and shared by the AXIS team.

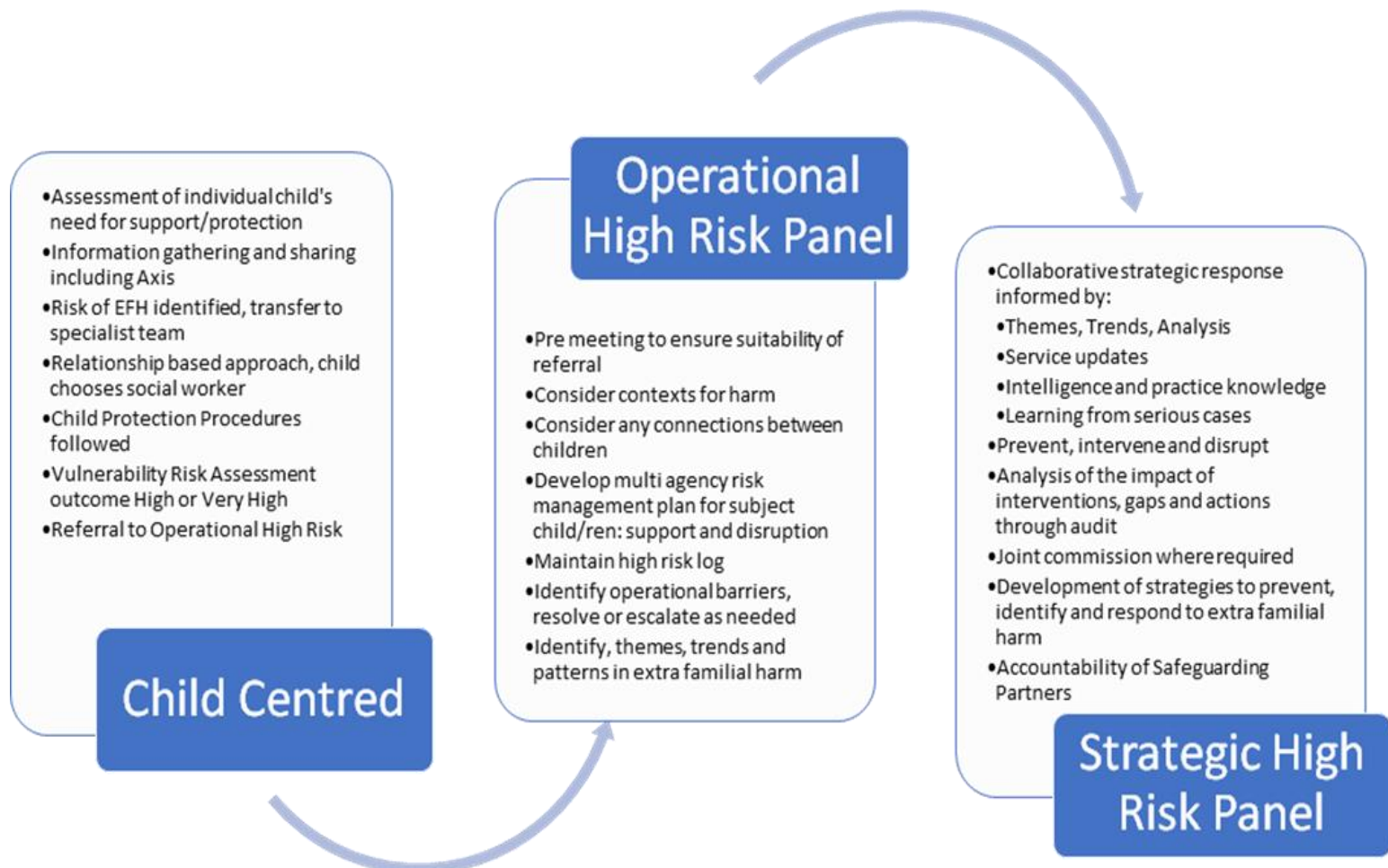
In 2018, Hillingdon Children and Young People's Services developed the social care response to safeguarding children from extrafamilial harm. **The Adolescent's Team** works with children who are the subject of child in need or child protection plans and those who are in Local Authority Care. Children choose their social worker using profiles providing a foundation for a social work approach that is relationship based and coproduced with children and their families. Where it is identified that a child may be at risk of extrafamilial harm, a **Risk and Vulnerability Assessment** is completed. This tool provides a framework to assist assessment of the risks and protective factors for children. Where a child is assessed as being at high, or very high, risk a referral is made to the **Operational High-Risk Panel**.

The **Youth Justice Service (YJS)** is a multi-disciplinary service that has a range of professionals from different agencies that work together to prevent children aged between 10 – 18 years old from offending and entering the criminal justice system. The professionals that work with the YJS are from a range of agencies including the National Probation Service, Education, Children and Young People's Services, Child and Adolescent Mental Health Services, and the Police. The YJS works directly with children, their families and any other professionals that are involved to understand the reasons why children have committed an offence and understand and reduce the risks that they may pose to

others. They also attempt to understand if the child is at risk of being harmed from others and identify welfare concerns that may have influenced the child’s behaviour. The YJS will also contact the victim of the offence, where appropriate, to understand how the crime has impacted their life and to identify whether the child can repair harm caused to the victim and/or the community.

The **Operational High-Risk Panel** is led by Children and Young People’s Services and the Metropolitan Police Service. The panel is multiagency with representatives from health, education, AXIS, community safety and a range of other partners in attendance. The remit of the panel is to consider any themes, identify links between children, and to develop multiagency risk management plans that detail supportive and disruptive actions that will be taken.

The Safeguarding Partnership maintains oversight, vision, and a drive for continuous improvement in practice in extrafamilial harm through a dedicated subgroup, the **Strategic High-Risk Panel**. The Panel is cochaired by the Local Authority Director of Safeguarding, and a senior police officer, with representatives from all partner agencies in routine attendance. Quarterly updates are provided by the Operational High-Risk Panel, AXIS and the Health network, with links maintained across related strategic workstreams including those led by the Youth Justice Board and the Safer Hillingdon Partnership (Community Safety).



2. Methodology

The purpose of our review was to explore the circumstances of a cohort of 11 children that had been involved in, or affected by, incidents of serious youth violence. We sought to identify themes and commonalities in the children's experience, and that of the practitioners working directly with them, and to use this information to identify opportunities for practice development that intervenes early and reduces risk.

The challenge of safeguarding children from extrafamilial harm is the subject of ongoing conversation and research locally and nationally. Our review built on the findings and recommendations of the following publications:

1. [‘It was hard to escape’](#) (2020) A qualitative study of 21 cases from 17 local areas regarding children who died or experienced serious harm where criminal exploitation was a factor.
2. [‘Home Office Research Report 110’](#) This study systematically reviews factors linked to more serious types of violence like weapons carrying or use and gang conflict, following a large cohort of young people over several years.
3. [‘Punishing Abuse’](#) (2021): Children in the West Midlands Criminal Justice System, West Midlands Combined Authority and the West Midlands Police and Crime Commissioner. This study identifies risk factors, vulnerabilities and adverse experiences in the backgrounds of 80 young people well known to Youth Justice and other services.
4. [‘Islington Youth Safety Strategy’](#) (2022) A summary of research focusing on common features and contact with services for 25 of the most prolific young offenders.

We also incorporated the practice principles developed by sector leading organisations including the Contextual Safeguarding Network, Tackling Child Exploitation and ListenUp!

A standardised review tool was developed to highlight evidence-based factors that can increase a child's vulnerability to extrafamilial harm and involvement in serious youth violence. The tool was separated into areas of specialisation to promote analysis of themes across safeguarding practice. The perspective of frontline practitioners was sought through roundtable discussions for three children in the cohort.

3. Findings:

Unidentified and unmet health and developmental needs were prevalent. When additional needs are not recognised, support is not provided, and children are less able to understand and engage with the world around them. Inevitably this impacts relationships with peers and families and increases the risk of social isolation and difficulties in school. Children may be labelled as ‘disruptive’ or express their frustration through behaviour. This increases the risk of **school exclusion** and further isolates the child increasing their vulnerability to exploitation and risk of involvement in serious youth violence.

Almost all the children had experienced some form of **maltreatment in their earlier childhood** with exposure to **domestic abuse** affecting 9 of the 11 children. As might be expected there is a high prevalence of emotional and mental health symptoms, including those that can be linked to **trauma and/or attachment difficulties**. This increases the potential for children to seek emotional validation through unhealthy sources. The review highlighted the significance of children not being brought to health appointments, both in terms of access to services they may need, and in relation to the capacity of parents to meet need.

Several of the children have a **close relative with a history of criminality**, including gang-related offences. There is a theme of parents as sole carers, and an absence of positive male role models. Families are further impacted by **poverty and insecure housing**, or instability in living arrangements. A significant percentage of **parents have English as an additional language**, likely impacting their access to services and support.

The location of the children’s homes also appears significant, with **Hayes** being the most common area. Hayes is an area known to be impacted by gang activity. It seems logical that the combination of the children’s particular circumstances and vulnerabilities in the wider context of a community impacted by gang activity would increase the risk of exploitation.

This review has also captured information about the support and intervention provided to children, and their families, highlighting the need for a **culture of professional curiosity, early intervention, and diversion**. Practitioners need to be supported to hold the child in mind whilst recognising and responding to any risk they pose. This approach is supported by appropriate challenge and reflection within, and between, agencies.

Professional recognition of a child’s high levels of vulnerability does not mitigate the risk that the child might pose to others. There is a need for practitioners to adopt a dichotomous approach that

works to **increase a child's resilience, reduce their vulnerability, and explicitly acknowledge and address risks that the child may pose to others.**

4. What Next:

Early help is essential where vulnerabilities are identified, the learning from this review could be used to support targeted interventions where similar circumstances are present. Where a need is identified professionals must retain 'ownership' and be curious about the meaning of missed appointments or unwillingness to engage with a service.

Services need to act quickly where necessary, to focus on **meaningful intervention at critical moments** for children thereby ensuring that reachable and teachable moments are not lost. Where a vulnerability to exploitation is identified, there is a need to adopt a child-focussed approach to eligibility for support from specialist services.

Safeguarding Partners should reiterate the **centrality of equality, diversity, and inclusion** to practice. This is to ensure parity of access to support and protection for children and to **reduce the impact of structural inequality and adversity.**

To develop a shared understanding of **trauma informed practice** in application, rather than as a conceptual model.

To undertake a **focussed launch of the Contextual Safeguarding Approach in Hayes**, in conjunction with an exploration of the effectiveness and impact of disruptive activity.

To promote a **hopeful and strengths-based approach** to practice. There is opportunity for meaningful intervention that **builds relationships, social capital, and aspiration to reduce vulnerability.**