

7 Minute Multi-Agency Briefing

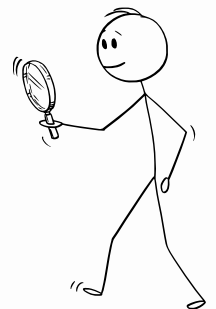
Under-18 Attendances at Hospital Involving Violence, Exploitation and Harm Outside the Home

1 | Purpose Of The Briefing?

This seven-minute briefing is intended to support reflective discussion across the safeguarding partnership. It summarises the key learning from the multi-agency review of under-18 attendances involving violence, suspected exploitation and harm outside the home. It is written to help practitioners and leaders think about what the review is telling us, what children may be trying to communicate through their presentations, and how partners can respond earlier and more confidently.

2 | What Did We Look At?

The review looked at a cohort of 64 children and young people under the age of 18 who attended University Hospitals of North Midlands NHS Trust following incidents involving violence, injury, exploitation indicators or possible harm outside the home. The cohort was then considered through a wider safeguarding lens, drawing on health information, children's social care matching and police review information. The aim was not to revisit single incidents in isolation, but to ask whether those incidents were part of a bigger picture of risk, vulnerability or unmet need.



3 | What Are The Headlines?

The review tells us that adolescent safeguarding risk can be easy to miss when we only look at the immediate reason for attendance. A child may present with an injury, an assault, a peer dispute or an account that appears straightforward. However, behind that presentation there may be repeat victimisation, coercion, exploitation, domestic abuse exposure, school-based harm, unsafe peer associations or escalating youth violence. The key message is simple: one incident may be the visible point of a much wider safeguarding picture.



4 | What Did We Learn About the Cohort?



The available data shows that the cohort is mainly concentrated in adolescence, especially children aged 13 to 17. Some children were already known to services, while others had limited or no current children's social care involvement or exploitation flags. Police review information identified themes of repeat victimisation, peer-related violence, domestic abuse exposure, school-based incidents, exploitation indicators, antisocial behaviour and frequent police contact. The review also reminded us that children may appear in both victim and suspect contexts, and that this should increase professional curiosity rather than reduce our concern for their safety.



5 | Why Does This Matter?

Children do not always describe exploitation, coercion, fear or unsafe relationships in direct language. They may minimise harm, decline support, refuse to share information or attend with adults who are not clearly explained. They may also have become used to violence or harm as part of daily life. A relational response means slowing down enough to ask: what has happened to this child, who is around them, what are they telling us through their behaviour, and who else needs to know so that we can help keep them safe?



6 | What Were The Missed Opportunities?

The review identified opportunities to strengthen professional curiosity, recording and information sharing. Relevant safeguarding information was not always captured consistently, including who accompanied the child, the relationship of that adult to the child, injury details, repeat attendance history, location of incident, peer associations and wider contextual concerns. There was also evidence that information sharing could be delayed or limited where consent was not provided, even where safeguarding concerns may have justified sharing information to protect a child from harm.

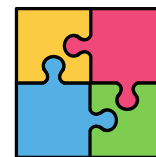


7 | What Should Practitioners Do Differently?

When a child presents with violence, injury, exploitation indicators or harm outside the home, practitioners should pause and think beyond the immediate incident. Ask who was there, where it happened, whether the account fits the injury, whether this has happened before, whether the child appears pressured or controlled, and whether there are links to peers, adults, places or patterns already known to other agencies. Where safeguarding concerns are present, information should be shared through the right pathway, with a clear rationale recorded if consent is not given or cannot be obtained.

8 | What Is The Partnership Response?

The partnership response is to strengthen how health, police, education and children's social care share and use information about adolescent risk. The report recommends a time-limited task and finish group to develop and test a structured health information-sharing route for under-18 presentations involving violence, exploitation or harm outside the home. This should include clearer prompts for practitioners, stronger guidance on information sharing without consent where safeguarding concerns are present, improved recording of accompanying adults and contextual information, and assurance testing through audit, case sampling and practitioner feedback.



Reflective Questions For Teams



- When a child presents with violence or injury, do we ask whether this could be part of a pattern rather than a one-off event?
- Do we understand who is accompanying the child, what their relationship is, and whether their presence increases or reduces safety?
- Are we confident about when and how to share information without consent where there is a safeguarding concern?
- Do we routinely consider locations, peer groups, repeat attendances and adult associations as part of our assessment?
- How do we make sure the child's voice is heard, especially when they minimise risk, decline support or find it hard to talk openly?



Closing Message



This review is a reminder that safeguarding adolescents requires curiosity, connection and confidence. Children experiencing harm outside the home may not always ask for help in obvious ways. Our role as a partnership is to notice the signs, share the right information, and respond in a way that is coordinated, compassionate and timely. Every attendance, conversation and piece of information may help us understand the bigger picture and create an earlier opportunity to protect a child from further harm.