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1. Overview

This guidance has been developed to support practitioners to practically ‘map’ children by understanding the relationships they have with others and/or locations. The process of mapping should enable clear understanding of levels of risk or harm for a child or group of children within a particular network, to ensure that there is an appropriate safeguarding response.

Please note: undertaking Peer Mapping work for the purposes of safeguarding children/violence reduction is covered by ISA Tier 2 agreements held within the council.

2. Context

Young people can encounter both risks and safety within their networks and locations outside of their home. Through peer mapping, practitioners can identify and understand the nature and extent of these. Peer mapping achieves this by:

- Providing a detailed picture of the roles and relationships between individuals, including the amount of influence and control individuals have within a network.
- Giving an understanding of the nature, scale and seriousness of the vulnerabilities posed by/to identified peer groups, individuals and locations.
- Supporting the identification of effective safeguarding interventions and other suitable multi-agency opportunities (e.g. disruption, environmental change).

- Focusing awareness on information gaps and how to inform these by information gathering.
- Providing a foundation to consider how to best manage the ongoing management of the peer group/location within a multi-agency partnership context.

There are a number of reasons that a peer mapping exercise may be beneficial:

- Most commonly you may choose to complete peer mapping to understand connections, including strengths and risks for a young person you are working with.
- A peer group not previously known to services may be referred into children's social care in the aftermath of a significant incident taking place.
- A group of young people, some or all, already open to children's services, are involved in an event that raises some worries about what or why this is happening.
- Emerging concerns that young people over a short period of time are attending a particular location and there may be concerns about alcohol or drug misuse.
- Children being located in a hotel where concerns are raised about possible risk outside the home (ROTH).

3. Pre-Mapping

Pre-mapping work is important to complete before any peer mapping meeting.

Things to consider at this point would be:

- Have you identified a list of people linked to the issue/peer group/location of concern?
- Are there any environmental contexts (e.g. school/neighbourhood locations) highlighted by the information?
- Have key contacts in relation to these young people and contexts (e.g. practitioners, youth workers, school safeguarding leads, police officers) been identified?
- Are there any contexts/young people identified who are already subject to or considered to be at risk outside the home (ROTH)?
- Have key questions been identified in relation to each young person/context/vulnerability as to how they relate to the network being mapped?

If possible, gather information from the young person you are working with. It is suggested that you do this as an ecomap – asking the child to put themselves in the centre of the 'map' and then talk to them about who they socialise with/where they hang out, asking them to put these places nearer or further away from them depending on their importance to them (see Appendix 1).

Questions to aid this pre-mapping could include:

- Who are you closest to? Who do you trust?
- Are you and your friends all the same ages?
- Who do you spend most time with?
- Who would you say is a positive influence on you?
- Are you a positive influence on someone?
- Out of all your friends, who would you trust to help you if you were in trouble?
- Out of this group, are there any friends that your parent/carer/teacher would say has a negative influence on you?

- Do you think you have influence over anyone?
- Are you friends' parents/carers happy for you to spend time together?
- Do your parents/carers know your friends or their parents/carers?
- Have you ever got into trouble (at school, with the police, at youth club etc) with any of your friends?

Undertaking this exercise may enable you to put in place some interim safety planning for a child who you feel may be at risk of harm.

4. Peer Mapping Meetings

Any practitioner in South Gloucestershire is able to call/hold a peer mapping meeting where relevant concerns have been identified. Within the Authority the Violence Reduction Partnership (VRP), representatives from the Exploitation Team or Practice Development Managers (PDMs) are willing and able to talk to/work with practitioners to help them think about any concerns they have and whether a peer mapping meeting would be beneficial.

The peer mapping meetings are not intended to replace strategy meetings or other planning meetings but should inform assessments and direct the safeguarding and planning processes in a more contextual way.

When holding a peer mapping meeting, it is important to remain focused on the original objectives of the process. A lot of information will be shared and obtained, particularly when discussing larger peer groups or thematic issues, and it is therefore important that the structure of the meetings enables reflection on which information should be included in the map. Focusing on the information relating to the issue being mapped will prevent tangents into unrelated areas of vulnerability and ensure interventions don't become too broad and ineffective as a result.

Whichever agency has cause for concern about a peer group should undertake their own internal mapping (pre-mapping work). What do they know that has caused them concern about this group? This will then identify any partners that need to be involved in a wider discussion and enable those partners to consider the information presented to them and collate any further information they have to bring to a meeting. It is always likely to be helpful to have a qualified social worker at any mapping meeting (this could be a representative from the Exploitation Team or a PDM) in order to help the group consider thresholds of intervention based on conversations regarding risk.

Once peer mapping has been completed, considerations should be made towards the identified risks or strengths of the group. Appropriate safeguarding measures should be followed to address any risks identified. This could mean (but is not limited to):

- Referring children into children's social care (CSC) for assessment.
- Referral for other relevant services such as Young Person's Drug and Alcohol Services (YPDAS) or Young People's Support (YPS)
- Referring children into the Partnership Intelligence Management Meeting (PIMM).
- Strategy meetings being requested.
- A Complex Extra Familial Harm meeting being convened.
- Disruption planning.

See Appendix 2 for a flow chart which illustrates the peer mapping process.

5. Peer Mapping Meeting – the practical steps

For the actual peer mapping exercise, it would be advisable to prepare yourself with flipchart paper, coloured pens/markers and Post-it notes (in case you need to stick these on top of names of locations or overlay information).

Ideally meetings will be held face to face. Ensure that all invited have been provided with the information about the group, the concerns and that they have had time to collate their own information. When mapping ensure:

- You test out the strength of relationships.
- Whether information is evidenced or if it is just anecdotal.
- How many times have the young people been seen together, where have they been sighted and by whom?
- When was this information captured – is it a recent or historic incident? Where does the information come from? Is it a reliable source of information?
- Who are followers/leaders in the group?
- Are there protective features about the group or are they solely negative/risky?
- What are the gaps in information?

Record the information – often this is best done visually as a map as long as it is legible and it can be photographed to be uploaded onto relevant case management systems. Any notes taken alongside the visual ‘map’ need to clearly identify individuals discussed using full names, not initials. See Appendix 3 for an example (and fictitious) ‘map’. The ‘map’ should be added to the ‘subject child/ren’ who the meeting was called about; it should only be added to other children’s records if it is to support a referral to children’s social care.

Once you have gathered all your information, as long as you have uploaded a copy to relevant systems (detailed above), you may wish to take time to ensure that the peer map is dated and that you build an appropriate review timeframe into the meeting process, if this is felt needed. This may be done through PIMM or through an Extra Familial Harm Safeguarding meeting if it is deemed the threshold is met for this following the peer mapping.

If preferred, you can also use PowerPoint to illustrate peer mappings – a proforma that may assist you with this can be found [here](#).

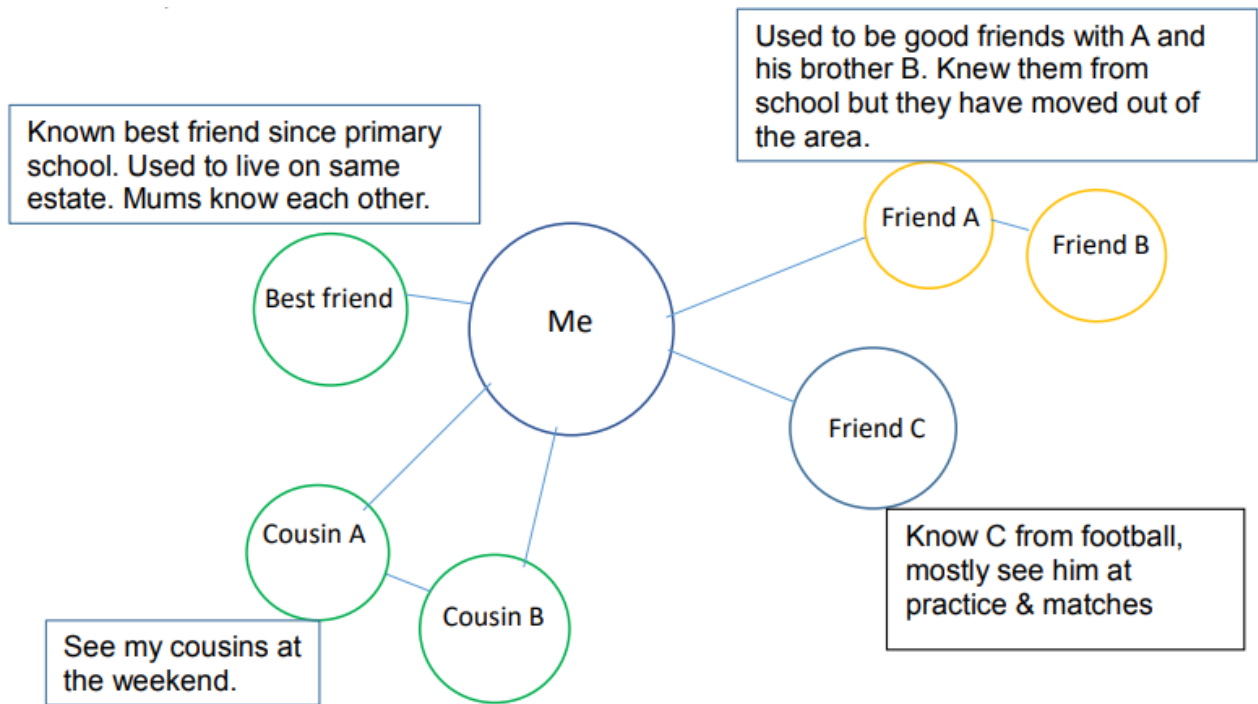
When drawing peer mappings consider the use of colour/shapes to highlight things like:

- Marking any adults in different colours.
- Shapes for different genders.
- Different kinds of lines to denote strength/tension/exploitation in relationships.
- Circles around people who frequent the same location or identify as a group.

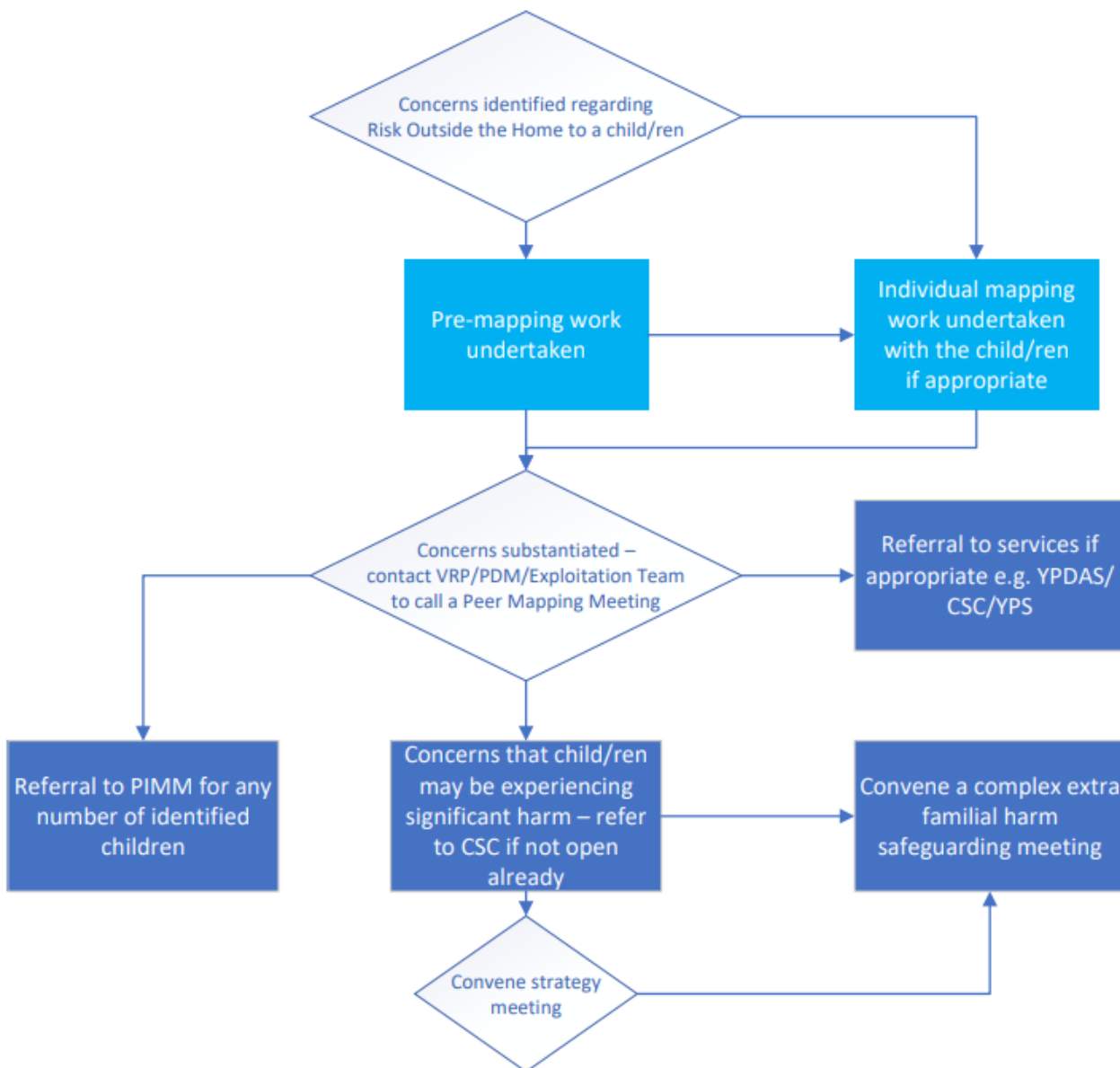
Ensure your ‘map’ has a key if relevant.

6. Appendices

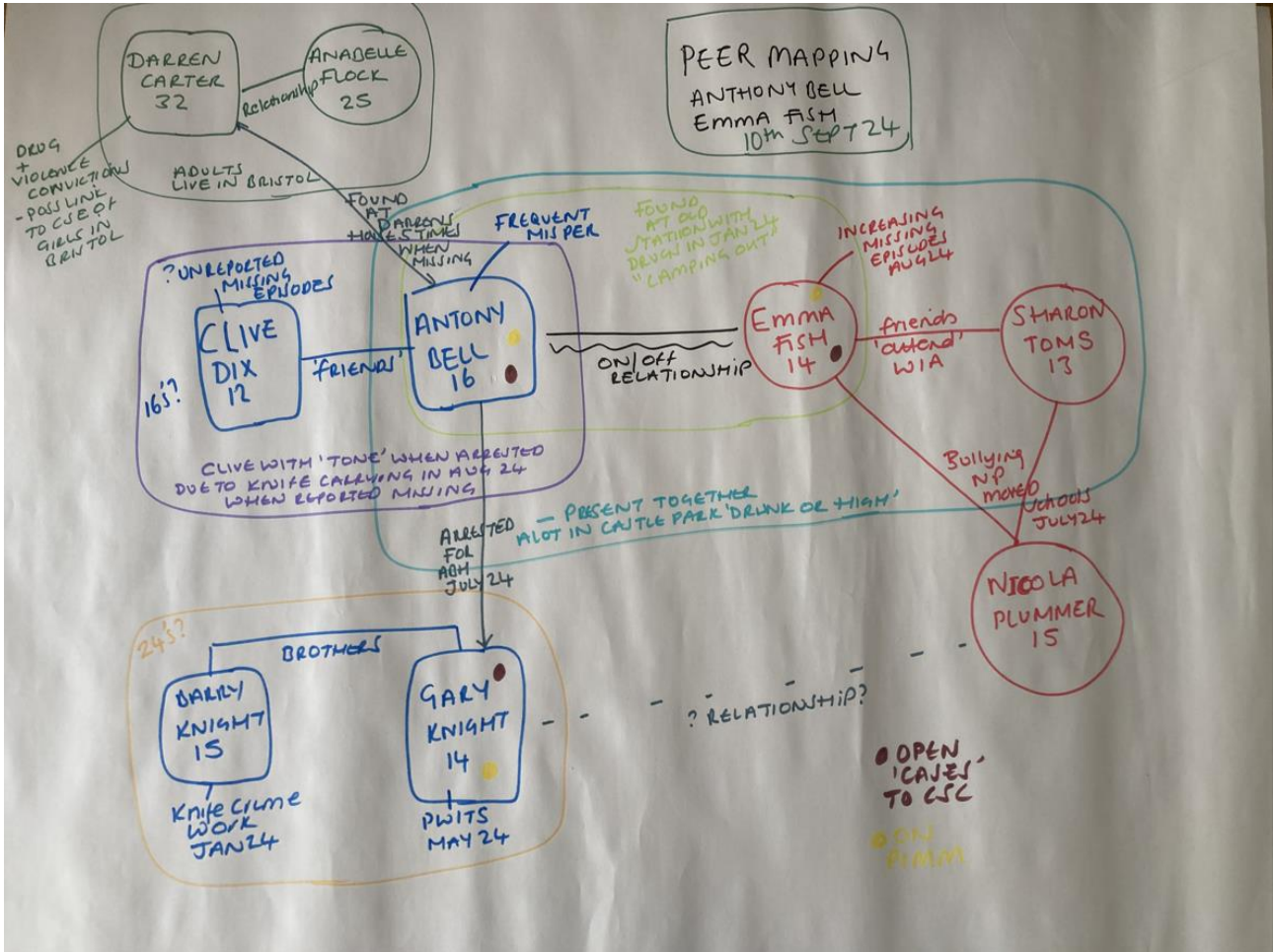
6.1 Appendix 1: Example ecomap



6.2 Appendix 2: Flow Chart – Peer Mapping Process



6.3 Appendix 3: Example 'map'



Guidance written by:	Helen Moore (Practice Development Manager)
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