



Child Sexual Exploitation – Diagnostic February 2015

Introduction

A number of well publicised criminal court cases, Serious Case Reviews, inspections and independent reports into Child Sexual Exploitation (CSE) have resulted in the issue receiving a high profile across all areas, LSCBs and agencies.

CSE is not new and has been given priority in Lancashire for a number of years. The Multi-agency Strategy for responding to CSE covers the Lancashire County Council Area, Blackpool and Blackburn with Darwen (BwD), and services at a local level have been delivered by multi-agency teams for a number of years. Regular reports have been submitted to the Lancashire Safeguarding Children Board (LSCB) which have provided assurance but there is never any room for complacency as to the quality of services and practice models, hence the decision made by the LSCB to undertake a diagnostic exercise to inform future development. The aim of the exercise has been to take stock of current arrangements and compare the response to children who live in Lancashire LSCB Area with what we understand to be good practice.

Process

The LSCB established a short-life task and finish group to undertake this exercise and we have used a template provided as part of the NW Performance Framework to assist with this exercise. We have sought information from all the statutory agencies involved in the work but have not had the capacity to engage in any detailed way with the voluntary sector. We have considered who is and who needs to be involved in reducing the prevalence and impact of CSE, what activities we would expect them to be engaged in to achieve this outcome and the context within which this work is carried out. We have also considered what we might expect to find if our services are good and effective and what the published reports and research tell us about what constitutes good practice. We have looked at what data we collect in order to measure the quality of services and outcomes for children and young people and what gaps there are. We have considered the findings of local audits and quality assurance activity and what we have learnt from children and young people themselves. The Chair of the group has also had access to staff in the multi-agency teams.

What have we found?

Strategic approaches:

The multi-agency strategy for CSE is supported by the three Safeguarding Children Boards; Lancashire, Blackpool and Blackburn with Darwen; and delivered via the Pan-Lancashire CSE Strategy Group. The aim of the Strategy is to safeguard and protect children and young people across the geographical county area by providing a single and coordinated strategic response. The well established Strategy, adopted in 2011, has recently been reviewed and updated and will be presented to the Lancashire Safeguarding Children Board's meeting in March 2015 and also to the other LSCBs at their next meetings. There is evidence of the CSE Strategy Group being well-attended, with commitment from all relevant agencies. The group has routinely discussed all relevant national publications and reviews re CSE and monitored both the strategy and the local action plan to ensure that all recommendations are considered and inform the Pan-Lancashire strategy and plan.

Strategic priorities have been reviewed and are proposed for the period 2015-18 as follows:

1. Prevent: Public Confidence, and Awareness;
2. Protect: Protection, support and safeguarding victims and manage risk;
3. Pursue: Partnership: Co-location and co-working of CSE services;
4. Intelligence and Performance Monitoring;
5. Leadership;
6. Learning and Development.



Strategy, Revised
(DRAFT)

The action plan has also been updated with actions identified under each strategic priority. Completion of actions is monitored through regular meetings.



Action Plan, Revised
(DRAFT)

A single Standard Operating Protocol is also in place together with a single set of policies and procedures. These are held on-line to enable easy access for the workforce across the county.



Operating Protocol

Recent changes to the make-up, location and structure of the specialist CSE teams, and the importance of direct accountability to the individual Safeguarding Boards, has resulted in the recent decision to establish of 3 operational Steering Groups covering areas reflecting the Safeguarding Board footprints, which report both directly to the relevant Safeguarding Children Board on local delivery and to the CSE Strategy Group.

Following rationalisation in 2014-15 of the structures for coordinating the general planning of children's services, the District Children's Partnership Boards in the LCC footprint are accountable at a local level for ensuring local components of the CSE Action Plans are completed and will provide feedback to the CSE Strategy Group on a regular basis.

Assessment:

A comprehensive CSE strategy is in place, supported by an appropriate action plan. Arrangements to monitor delivery of the strategy and plan are robust. The collaborative nature of strategic arrangements pan-Lancashire is positive, as is access on-line to a single operational protocol and a single set of policies and procedures.

Prevent: Public Confidence, and Awareness

The strategy recognises that engagement with children, young people and their families is essential in developing awareness of the risk of CSE and ensuring support is accessed early where risks exist. Engaging with the community in an area the size of Lancashire and across the diversity of groups making up the population is a significant challenge. To date good use has been made of events such as the CSE Week of Action in November 2014 alongside a range of more locally based activities. This has included theatre groups being engaged and work commissioned to support the development of the PHSE curriculum in schools. The former Children's District Trusts completed awareness raising activity at a local level and this is now being continued by the District Children's Partnership Boards.

A wide range of initiatives and activities are in evidence across all 12 District areas delivered by the voluntary sector and the Young People's Service (YPS) and CSE features heavily in the YPS "issue based" work alongside other key safeguarding concerns. YPS actively profiles CSE issues on its facebook sites, website and walls in YouthZones and Young People's centres. The service is clear about its role in supporting prevention and early help and includes CSE issues in its mainstream activities so as to reach the widest numbers of young people.



YPS Activity

Schools play an important part in ensuring children and young people are aware of CSE risks and recognise the warning signs. CSE has been discussed at senior head teacher's groups across county to ensure CSE features within the curriculum as appropriate and schools staff are trained appropriately. A full curriculum programme on Healthy Relationships has been developed and Schools Advisors are looking at how CSE can be included in the wider safeguarding remit as appropriate. Support is available for schools in respect of the inclusion of safeguarding issues, including CSE, in the PHSE curriculum. Every school has a designated safeguarding lead and training and support to these staff members is provided by the LA and through the LSCB multi-agency training programme. The LSCB has an e-safety sub-group and provides resources, an annual conference, and advice to schools and to children, young people and families, about the risks which can develop as a result of online activities.

In 2014 the NSPCC offered safeguarding session in all Lancashire schools for Year 6 pupils on safeguarding issues.

The Strategy also covers awareness-raising with specific groups and with staff across the variety of agencies. While specific training is provided to those working directly with children, young people and their families (covered later in this report), there is a need for basic awareness-raising more widely. With an estimate of more than 30,000 (and possibly as many as 60,000) professionals in this category the challenge is significant. However in December 2014 both the Children's Trust and the LSCB made a request to all agencies who are involved with children and families to ensure staff, as a minimum, access the Board's on-line basic CSE e-learning package. Evidence to date indicates good take up in response to these requests. Clear policies and procedures also support preventative work.

In November 2014 the LSCB held a half-day conference with children home providers. This was well attended by the private and voluntary sector and enabled the Board and its partners to ensure those attending had up-to-date information about CSE, their responsibilities and local policies and procedures.

Two CSE conferences, one for professionals and one for young people were held in the Autumn on the same day and same site. The young people joined the professionals in the afternoon and were able to share the outcome of the work they had done in the morning. The young people presented a list of actions they felt would make a difference and these are being built into the CSE Action Plan. There is evidence of good practice across the county in direct engagement with young people.

In several of the national reports risk in relation to "hidden harm" within minority communities is raised. Language barriers, social isolation, cultural sensitivities and social norms can all impact on the success of communication and engagement. As part of the 2015-18 CSE Strategy a multi-faith group is being established to improve

engagement with faith communities. Further work needs to be done to ensure full engagement with all communities.

Further work is also planned in order to provide training to businesses across the county who may be in a position to identify risk such as taxi drivers, hotels and licensed premises.

The CSE strategy is also being considered alongside other strategies to support vulnerable groups such as children who go missing from home and children in residential care – particularly those placed a long way from home.

Assessment:

There is evidence of good practice and a great deal of appropriate activity to prevent CSE through raising public and professional awareness. However the scale of the challenge in ensuring community (both public and professional) awareness of CSE and recognition of the associated risks should not be under-estimated. With a diverse population, a wide geography, more than 800 schools and local services delivered via the County Council and 12 District Councils and a variety of health care providers, it is difficult to accurately record what is being delivered where and to ensure comprehensive coverage. Although recommended practice, there has not been the appointment of a CSE coordinator to support delivery of the Strategy. This is currently a significant gap. If plans to develop an integrated business unit to support both the LSCB and the Lancashire Safeguarding Adults Boards (LSAB) then one post in the unit will be designated to undertake this role.

Protect: Protection, supporting and safeguarding victims and managing risk;

Specialist multi-agency teams are in place across the county; while the size of the teams varies, all include police and Children's Social Care personnel but the health care input is not consistent. All work to the same policies and procedures but the direct responses to children identified as being at risk does vary.

During 2014 the configuration of the teams reduced from six to three to continue an alignment with the new police divisions. This resulted in two of the previous four teams serving children and young people in the Lancashire LSCB area being amalgamated to form the a single team in the centre and South of the county, one amalgamating with the Blackpool team to serve the North of the County and one amalgamating with the Blackburn with Darwen team to serve the east of the county.

The "Engage" team covers the east of Lancashire and all of Blackburn with Darwen. And is based just off the M⁶ outside BwD. The team make-up is as follows:

1 police sergeant; 8 detective constables; 1 police Missing from Home coordinator;

2 nurses;

1 Voluntary sector representative from Parents Against Child Sexual Exploitation (PACE);

The above listed staff all work across the whole area. In addition there are:

1 Senior Social Worker from BwD; 1 Support worker from BwD; 2 Barnardo's workers

(The above staff cover only BwD.)

1 Social worker based in the Hyndburn/Ribble Valley LCC locality; 1 part-time LCC support worker for Hyndburn/Ribble Valley locality;

1 Children Society worker covering Hyndburn and Ribble Valley locality;

1 LCC social worker covering Burnley and Pendle; 1 LCC Support worker covering Burnley and Pendle.

The "Deter" team covers the central and south areas of Lancashire and is based in Preston. The team make-up is as follows:

2 police sergeants (one focussing on Preston and the other on the south of the area); 3 detective constables; 2 police Missing from Home Coordinators;

2 Children's Society staff;

1 part-time Young Addaction worker;

1 part-time PACE worker;

No specialist nursing – referred to local services as appropriate;

1 LCC Social worker; 2 attached LCC support workers;

The "Awaken" team covers the Blackpool and the north of Lancashire and is based in Blackpool. The team make-up is as follows:

1 police sergeant; 6 detective constables;

1 full-time Specialist Nurse 1 Support worker full time (Children Society)

1 full time LCC Social Worker

1 full time LCC Support Worker

The importance of getting the health care component of the teams and support for those young people at medium and low risk and managed out-with the specialist teams has been recognised. Discussions are underway between the Clinical Commissioning Groups and Public Health who have given a commitment to finding appropriate funding to ensure there is a health care component in all the teams. More work needs to be done on the service model, and the nature of the health-care offer being made. The role of the school nurse in supporting those at risk is also under review.

The extent to which members of the specialist teams work on awareness- raising activities varies but is significant. This potentially undermines their ability to offer direct services to CSE victims and to progress investigations.

Statistics collected over more than three years show a similar rate of referrals to the teams over that time. However those directly involved in the teams believe the previous arrangements resulted in the referrals levels from the LCC areas being an under-representation of need and more recent data supports this hypothesis as numbers are growing.

Data is routinely analysed and presented to the LSCB. Figures contained in the 2013-14 show that there were 1430 referrals across the county as compare with 1307 and 1491 in the two previous years. These figures include Blackpool and Blackburn with Darwen. 40% of referrals were identified as potentially high risk and 49% medium (this is the risk as assessed on referral prior to the completion of a specific detailed risk assessment by the specialist team). 62% of the young people were between 13 and 15 years old and the majority were female. However in the last 6 months of the period there was a significant increase in male referrals from 8% in the previous period to 22%.

Pre-existing vulnerability is a key element in the young person's likely involvement in CSE, and while it cannot be assumed that all those who go missing from home are at risk, a third of referrals did involve a young person who had gone missing. Looked After children are also over-represented in both CSE referrals and those who go missing from home.

Internet based offences are the most prevalent and generally take place in the young person's own home.

90% of suspected offenders were male and 93% white.

Assessment:

The establishment of multi-agency specialist teams is positive. Two of the Lancashire teams are better established than the third which has only recently had a specialist LCC CSC input and specific focus on the North of the county. The size of the teams and the management arrangements need to be kept under review as the service develops further.

The extent and nature of health care involvement in the teams needs to be determined and resourced.

Community based social care and health care services to support those at medium and low risk need to be robust and pathways for the delivery of services identified more clearly. Competent CSE risk assessments should be part of the process resulting in access to early help to avoid the risk of loss of intelligence. The engagement by the voluntary sector in the specialist teams is positive.

Pursue: Identifying and Bringing Offenders to Justice

Referrals can arise via the CSC Contact and Referral Team (CART), the Multi-agency Safeguarding Hub (MASH) or direct to the specialist teams. Good practice would be that all cases are screened and all those where a CSE risk is identified referred in to the specialist teams to assess the level of risk. It is not possible to confirm that this always happens and an audit of cases needs to be conducted to consider this in more detail. It appears that in some parts of the county non-specialist staff will identify risk and make the risk assessment themselves. Where this is considered to be low or medium they refer directly to early help and community based services. It may well be that such staff have had appropriate training and their managers can offer the right level of support and challenge but if these cases by-pass the specialist teams completely then there is the risk that the cases do not progress from a screening level to a more comprehensive risk assessment and certainly any opportunity to collect and collate intelligence is lost.

All referrals to the specialist teams are risk assessed by appropriately trained staff. Those young people identified as at high risk receive a specific service which is planned and coordinated.

While immediate protection is of the highest priority, prosecution is also a goal wherever possible. Investigation of CSE is a complex and time consuming activity requiring specialist skills and the nature of the offences often means that forensic evidence is not always available.

The teams refer cases to the Crown Prosecution Service as early as possible but do not have the benefit of access to specialist CPS staff. Anecdotally staff report mixed experiences which suggest that some of the lessons learnt elsewhere may not yet have been embedded in local CPS practice. The character and previous history of the victim is seen by the teams as still assuming too much prominence in the decisions about prosecution. However there is a good record in terms of successful prosecutions and convictions.

In 2013-14, 192 perpetrators were prosecuted for CSE related offences which is similar to the figure for previous years which ranges from 183-197.

Where prosecution is not possible, but concern that offences may be being committed remains, there is evidence that action is taken to disrupt the opportunity for CSE. Examples of disruption activity may include:

- Targeted policing of 'hotspot' locations identified through debriefing missing children, patrolling officers or other intelligence
- The use of licensing laws/powers including licensing of private hire vehicles
- Sharing of information/intelligence regarding perpetrators and suspected perpetrators with schools, children's homes and other partner agencies
- Targeted awareness raising with local hotels and B&Bs where victims may be brought by perpetrators

The police have been proactive in using the range of new safeguards such as Risk of Sexual Harm Orders, Child Abduction Warning Notices, Civil Injunctions and Sexual Offence Prevention Orders. In addition The Anti-social Behaviour, Crime and Policing Act 2014 allows officers to issue a notice requiring the owner, operator or manager of relevant accommodation to disclose information where intelligence indicates the premises are being or have been used for the purpose of child sexual exploitation.

Initiatives which are already planned will engage more actively with the business and night-time economy to better support disruption.

In response to the growing number of on-line risks a new approach has been adopted through the establishment within the police force of a specialist Online Child Abuse Investigation Team.

Assessment:

There is clear evidence of a pro-active response to referrals in respect of CSE to protect and prosecute. However there is no evidence of consistency re referral thresholds and significant risks that intelligence is not effectively passed to the specialist teams. In the two teams which cover more than one local authority area the management of referrals varies considerably depending on the local authority area and differs for LCC staff according to which social work team the social care staff are linked with. In the East there are also said to be variations between the two LCC localities with team boundaries described as being rigid. There is no single management chain supporting the LCC specialist staff.

The service delivered via the police component of the teams is generally consistent. Changes to the operational arrangements within the police during 2014 located the specialist teams with management from HQ. Previously the Lancashire components of the service had been managed alongside the Public Protection Units where their core business often demanded priority. The separation was seen as positive but the system has not delivered the flexibility

that is seen as desirable in meeting the demands on the teams. Plans for the future are for the management of the service to transfer to the Divisional Command but with resources still ring-fenced.

Arrangements need to be kept under review to ensure the multi-agency teams are able to offer a comprehensive response at a local level and that the quality of service is consistent across the county. The variability of the health care component of the teams is unacceptable – good practice needs to be identified and replicated across the county.

Partnerships: co-location/co-working:

The LSCB oversees partnership activity and the level of commitment by agencies. It provides a forum for review and challenge. Local strategies and policies are regularly updated.

Responses to cases assessed as medium and low risk are coordinated through partnerships across local services. Coordination at this level needs to be further developed through the District Children's Partnership Boards which are still in their infancy. Responses need to be built into local Early Help Offers and to services for Children in Need. Support staff in schools, and the voluntary and community sector have a significant role to play here.

The three specialist teams, are largely co-located (see above). The exception is with the LCC social care staff - some are based full-time in the specialist teams and others are not. The move to three locations has been seen as problematic in some areas and, with the distances involved, the teams may need to develop "satellite" sites to enable work closer to the communities served. Partnerships with some community based staff professionals also need formalising e.g. with school nurses.

The involvement of the voluntary sector within the specialist teams is positive and the presence of the Missing from Home coordinators within the teams reflects good practice as is the role played by the voluntary sector particularly in providing support for parents.

Assessment:

Strong partnerships are in evidence across the county and are now overseen at a local level through the District Children's Partnership Board. The Partnership Boards need to review these local arrangements and ensure an appropriate range of services is available and delivery is coordinated.

Inconsistencies in partnership arrangements within the specialist teams need to be resolved – particularly in respect of the role of health care services –

alongside the role of the school nurse in respect of young people at medium or low risk.

Intelligence and Performance Monitoring;

Currently the only performance data reported to the LSCB comes via the Constabularies 'Problem Profile' which provides an analysis of the number of referrals received by the Constabulary across the divisional footprints on a quarterly basis. The most recent data (Q3) is shown below for illustrative purposes:

CSE	East	South	West	Total
CSE Referrals	169	85	135	389
CSE Crimes (all)	40	48	57	145

There were 1225 referrals in 2012/13 and 1248 in 2013/14 which represents a fairly steady rate when viewed on a quarterly basis also.

Competent systems to manage intelligence are essential to effective CSE response both in order to pursue prosecutions but also to understand risk and protect potential future victims. Where core staff in the specialist teams are actively working with high risk cases exchange of information and intelligence is good and is a dynamic process. Systems are in place to manage intelligence but analysts are not based with the teams and it is likely this results in lost opportunities. The fear expressed in the teams is that connections between victims, and the existence of victim networks as well as perpetrator networks, will not be sufficiently well identified.

Police members of the team log all information on the Protecting Vulnerable Persons (PVP) system which makes the information available to all police personnel and ensures regular updates. LCC staff do not have access to directly input into this system (though BwD staff do). LCC internal recording systems are not consistent; best practice is that an LCC record holds the same information as that entered on the PVP system but this is not the case in all the teams.

It is recognised that the way in which management information is collected does not currently easily support performance monitoring as it is highly reliant on police information and does not capture multi-agency data. Police data collection processes were reviewed and improved during 2012-13 and the data set in place reflects acknowledged national good practice standards (the Bedfordshire Tool). Data entered on the police system informs a force wide Scoping Report. This report is considered at the force Strategic Tasking and Coordinating Group, the Divisional Public Protection Units and the CSE Strategy Group.

The LSCB collects data from the CSE teams but still needs to develop better systems in respect of multi-agency data e.g. data re sexual health services and needs to promote better use of intelligence and information from vulnerable groups such as children missing from home.

The separation of recording systems results in difficulties in easily pulling of outcome reports particularly for cases assessed at medium and low risk.

Health care and Public Health data, and data in respect of children missing from home, from care and from schools needs to be set alongside the CSE to enable performance monitoring. There are currently detailed datasets for these related issues (sexual health, terminations, MFH) but data cannot be broken down by risk of CSE to look at wider patterns and trends. A wealth of information exists but is not currently subject of coordinated and intelligent interpretation. We know, for example that in the Engage Team formal holistic health assessments are completed by a nurse member of the team. In the last year this showed that 42% of the young people had emotional/mental health needs, 48% had sexual health needs and 32% had issues requiring support around drugs, alcohol and diet. A more systematic approach needs to ensure that such information informs the needs analysis that contributes to the commissioning plan for services.

In July 2014 under the auspices of community safety - "Together safer Lancashire" work was commissioned to provide a detailed analysis of the threat from CSE across Pan-Lancashire. A project initiation document was agreed but work is yet to commence. This has the potential to enrich the police scoping data by the inclusion of multi-agency data to better inform prevention and protection.

Assessment

Appropriate police data is collected and informs strategic planning. The capture of multiagency data is less consistent and less reliable. The integration of the workers re Missing from Home in the teams promotes good information sharing.

The data collected is more about volume (prevalence) and less about outcome – this is a weakness.

Leadership

Politically and across the agencies, leadership on the CSE agenda is strong. LCC elected members and senior officers have sought to be well-informed and there is no evidence that the issues that were present in Rotherham are a feature in Lancashire. Members have had regular briefings and exercise appropriate scrutiny. The lead Member for children sits on the LSCB and the Leader of the council met with the

LSCB Chair in November 2014 to discuss CSE and request additional member briefings.

Agencies are represented on the LSCB at an appropriately senior level and all relevant agencies support the work of the CSE Strategy group. The Police and Crime Commissioner met with the LSCB Chair in November 2014 to discuss CSE and gave an assurance of its continuing as a policing priority. The LCC Chief executive meets regularly with the LSCB Chair to receive safeguarding updates and ensures the effectiveness of the LSCB as does the LCC Director of Children's Services.

The complementary responsibilities of the LSCB and the "Together safer Lancashire" (community safety) in respect of CSE need to be clarified to avoid duplication and to ensure collaboration where appropriate. To date this has not been clear.

The role of the Children's Trust and the District Children's Partnership are clearly set out and CSE is a regular agenda item.

Assessment

Leadership on the CSE agenda is a strong. Clarification of the complementary and different roles of the LSCB and community safety forums would be beneficial.

Learning and Development

All agencies are responsible for ensuring staff are appropriately trained. The LSCB offers a specialist multi-agency course to all member agencies and has recently developed a basic e-learning CSE course which is free to access for all practitioners. All agencies have been asked to ensure staff who have contact with children and families complete the e-learning programme by the end of March and the rise in recorded numbers accessing the site suggests there is widespread compliance with this request.

To date a total of 2962 people have completed the e-learning and 957 have completed the multi-agency course. Take up of the e-learning is expected to increase rapidly over the coming months in light of LSCB agencies pledging to make it mandatory for all appropriate staff.

Assessment

CSE awareness raising and training are key components of the existing LSCB Learning and Development programme. A significant amount of training has been delivered in recent years. It remains the case however that the current capacity to ensure widespread CSE awareness and deliver appropriate training is not sufficient. A project approach is required to fully assess the training requirement and additional capacity needs to be developed via training of trainers to ensure an increased reach.