



Sandwell Multi-Agency Child Sexual Exploitation Strategy

2015 – 17

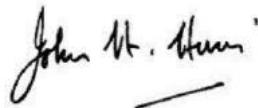
Foreword

Unlike recognised child abuse, which evidence suggests in the majority of cases is perpetrated by members of the family or perpetrators who have a relationship with the family, child sexual exploitation (CSE) is recognised to be more of a societal issue, with significantly fewer instances where families do play an active role in the child's abuse. This phenomenon creates a new set of challenges for which established arrangements in traditional children's services and partner agencies are less well-equipped to respond. The particular nature of child sexual exploitation suggests the need for a new way of thinking and a broader multi agency response to effectively eradicate CSE from our communities, and to protect and safeguard our children.

Lessons from Rotherham show that this issue is complex, multi-faceted in nature, and requires a fully committed partnership using all its intelligence and powers to prevent, disrupt and prosecute those who exploit and abuse children in this way.

Working within the West Midlands Metropolitan CSE Regional Framework, partner agencies in Sandwell are committed to working together to identify children that are vulnerable to sexual exploitation, and to build the borough's resilience against CSE. The partnership has a responsibility to safeguard children and young people from all forms of sexual exploitation. We will work collectively to bring perpetrators to justice, support victims of exploitation and actively engage education, community and faith groups and all partnership organisations in preventing CSE.

John Harris



Independent Chair SSCB

Matthew Sampson



Director of Children's Services

1 Introduction

- 1.1 This strategy reflects the key learning from the national, regional and local experience of child sexual exploitation and sets out Sandwell's multi-agency response to tackling this agenda. It works within the West Midlands Metropolitan CSE Regional Framework ('the regional framework'), in which Sandwell is a key partner, and sets out the fundamental steps we will be taking as a partnership to raise awareness of the issues, to protect and support victims and those at risk of CSE, and to pursue and prosecute those who would seek to exploit, in any form, children in the borough. As an ending gangs and serious youth violence priority area, we will also seek to identify any local relationship between gangs and CSE to ensure the appropriate linkages are made.
- 1.2 The strategy explicitly addresses key weaknesses in the local response to CSE identified by OFSTED in its inspection of services for children in need of help and protection, children looked after, and care leavers which was undertaken in parallel with the review of the effectiveness of Sandwell Safeguarding Children Board (SSCB) and published in June 2015.

2 National, Regional and Local Context

National

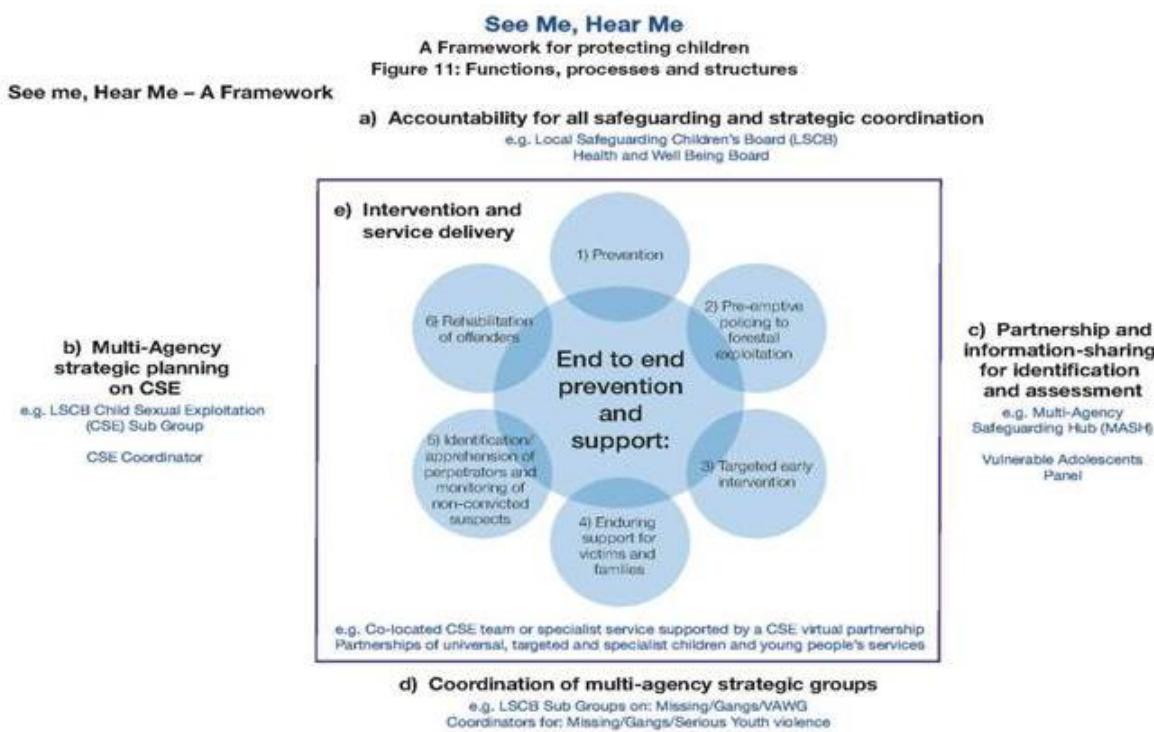
- 2.1 Child Sexual Exploitation has taken centre stage in the public consciousness – through reviews such as Rotherham and Oxfordshire; and the national lessons they have brought. What Rotherham, in particular, has shown us is the need to have a truly transparent and honest debate about the strength of our responses and the openness to challenge each other to ensure we are drawing on the full capacity and expertise across all partner agencies to respond to this agenda in a coordinated and effective way.
- 2.2 The Rotherham review by Louise Casey has shown the importance of having a truly holistic and multi-disciplinary response if the victims of CSE are to be truly heard and the perpetrators brought to justice. Whilst we are in no doubt that CSE is abuse and children must be protected by all means possible, the lessons from the Casey Review also highlighted the risks of a traditional social care response becoming a 'straightjacket' which prevents the protection of children who are being sexually exploited being as effective as it should be. We know from our interactions with Looked after Children, for example, that vulnerable groups need to be able to build trusting relationships and not become isolated from their peers, families and local communities. Simply moving children away or taking them into care of the local authority thus removing them from potential protective factors in their families can increase their vulnerabilities. It is critical that we counter their isolation at every step possible, using all means at our disposal.
- 2.3 Recent national reviews have also demonstrated the challenges in engaging victims of CSE. Many may feel too ashamed at what has happened to them to come forward but may also be unable or unwilling to see themselves as victims in the first instance.

- 2.4 In Sandwell we will adopt a range of methods and casework to ensure that we are able to protect children. We will maintain a child focus, emphasising individual needs and circumstances, being clear about outcomes and how best to achieve protection – whilst actively pursuing those who have caused them harm.

Regional

- 2.5 The seven West Midlands metropolitan local authorities have established a robust regional framework for responding to CSE¹. This framework informs all aspects of Sandwell's strategy, including preventative work, protection of victims of CSE, and the disruption and arrest of perpetrators. It includes a coordinated approach to intelligence gathering and performance information and clear links to work with children who are missing or trafficked. The framework sets out a detailed multi-agency referral pathway and operational arrangements for multi-agency working.
- 2.6 To support the delivery of the regional framework, the region has adopted the Office of the Children's Commissioner (OCC) *See Me, Hear Me Framework (SMHM)*.² Based on the evidence about effective arrangements for tackling CSE, the SMHM Framework sets out operating principles, functions and processes that, in combination, will assist in safeguarding children and young people from CSE. These are shown in the diagram below:

Figure 1 SMHM Framework



¹ West Midlands Metropolitan CSE Regional Framework, July 2015

² 'If Only Someone Had Listened' – OCC Inquiry into Child Sexual Exploitation in Gangs and Groups, November 2013.

The framework is supplemented by the following 7 principles of effective Practice

1. **The child's best interests must be the top priority:** The best interests of children and young people and their rights to protection must drive all decision making. The paramountcy principle (Children Act 1989) must be adhered to where applicable and children's rights under UNCRC Article 3 fully honoured.
2. **Participation of children and young people:** Services need to involve children and young people when decisions are being made about their care, protection and on-going support and be kept informed on any issues that affect them throughout. Professionals must be mindful of children and young people's needs and equalities. Their UNCRC Article 12 rights must be honoured
3. **Enduring relationships and support:** Support must be tailored to meet the needs of the child, according to their age, identity, ethnicity, belief, sexual orientation, disability, language, and stage of development. Children and young people told the Inquiry that a consistent person who stays with them throughout the whole period of their protection and on-going care is crucial to their recovery
4. **Comprehensive problem-profiling:** It is critical agencies regularly problem-profile their local area to analyse and understand all the patterns of exploitation to which children and young people are subjected to. A comprehensive problem-profile needs to be compiled with oversight of the LSCB and should be shared across all key partners to inform the development of a multi-agency strategy and action plans, commissioning of services and delivery of training and awareness-raising activity to support local professionals
5. **Effective information sharing within and between agencies:** Every area should have a cross-sector information sharing protocol which is predicated on the best interests and safeguarding of children and young people. All relevant agencies and services should be signatories; it should clearly state what information should be shared, by whom and the process for doing this
6. **Supervision, support and training of staff:** Services should invest in the development and support of staff including providing regular supervision and the opportunities for them to reflect on practice. Those professionals who offer direct support to sexually exploited children and young people might require further intensive training and must have regular opportunities to reflect on their practice with a skilled consultant or supervisor.
7. **Evaluation and review:** Evaluations and regular reviews of the effectiveness of the CSE strategy is necessary to ensure services and interventions are achieving their intended outcomes and meeting the child and young person's needs. Children and young people must be directly involved in this process in compliance with Article 12 of the UNCRC. This will ensure that performance is driven continuously by a cycle that leads to improvement.

- 2.7 To ensure consistent application of the SMHM Framework in the seven local authority areas the region has devised a number of Local Standards that are linked to the five aspects of the SMHM Framework (see Appendix 1 below). The intention is that by working to the Local Standards the seven local authorities will be operating to the framework and principles of the SMHM Framework in practice. This has particular relevance for Sandwell, which is one of three local areas working with the OCC and Sussex University in a pilot project to implement and evaluate the SMHM framework.

The Sandwell Context

- 2.8 SSCB established its initial CSE strategy in June 2014, based on the Local Standards in the regional framework. Progress against the strategy was monitored by the Young People Sexual Exploitation and Missing (YPSEM) Sub-Group and the Chairs' Group.
- 2.9 SSCB undertook an assurance audit on CSE in September 2014 to scope responses to children and to proactively learn lessons for how the wider partnership was dealing with CSE in the borough. In response to this challenge the following actions were undertaken:
- The Local Authority established an integrated, multi-disciplinary CSE team located in the MASH. Additional capacity was identified and this team was launched in December 2014;
 - The screening of all children and young people (aged 10-17) open, at that time, to children's social care and integrated early help services. In addition all those referred to children's services since this audit are also screened resulting in over 1000 screenings having taken place since November 2014;
 - The completion of a risk assessment, using the National Working Group (NWG) risk assessment tool, for all children or young people whose screening identified them as being at potential high risk of CSE;
 - The implementation of the integrated CSE team, alongside a CSE Coordinator to provide more specialist support in responding to CSE, increase awareness and understanding and provide tracking of all open cases;
 - A specific programme of work with taxi companies, hotels and fast food outlets to increase awareness and target hotspot locations identified through the screening undertaken;
 - The re-focusing of the governance for CSE in Sandwell to better respond to emerging intelligence, improve the interventions with victims of CSE, and ensure a more coordinated response to missing children who are also at risk of CSE;
 - Increased focus on perpetrators and locations to ensure that disruption activities could be coordinated to increase effectiveness.
- 2.10 OFSTED's inspection of services for children in need of help and protection, children looked after, and care leavers which was undertaken in parallel with the review of the effectiveness of Sandwell Safeguarding Children Board (SSCB) between 27th January and 19th February 2015, provided an external perspective on the effectiveness of the response to CSE in Sandwell. The inspection report in June 2015³ concluded that:
- *The arrangements for the management of children who are missing and at risk of child sexual exploitation are poor... The local authority and its partners do not fully understand the scale and prevalence of child sexual exploitation in Sandwell.*

³ OFSTED Single Inspection of LA Children's Services and Review of LSCB June 2015 (see in particular paragraphs 37-41)

This criticism arose in large part from a concern that the needs and risks in relation to CSE cases were not always being held at the right level, with work with some children at high risk of CSE being supported inappropriately and ineffectively in early help.

In respect of SSCB⁴, OFSTED found that:

- *The LSCB has not assured itself that children at risk of CSE in Sandwell are identified by agencies or that they are receiving appropriate services. It has not provided sufficiently timely or strong leadership despite having a longstanding link to Young People at risk of Sexual Exploitation and Missing group (YPSEM). The LSCB is in the process of revising and updating its CSE strategy but that work is not yet complete.*

2.11 Arising from OFSTED's report, there were specific recommendations for immediate and priority action for both the local authority and partner organisations, and for SSCB⁵.

For the local authority and partner organisations:

- *Undertake an immediate review of all child sexual exploitation cases and ensure that children and young people are appropriately assessed and receive services that meet their needs and risk.*

In its published Improvement Plan⁶ the local authority states that: '**we have completed the immediate review and are content that appropriate assessments have been completed in these cases**'. The local authority's Improvement Plan includes 'Improving our response to CSE' as one of its seven areas for improvement and has an associated action plan linked directly with the Sandwell multi-agency CSE strategy.

For the SSCB:

- *Oversee the gathering of intelligence of CSE to inform training and planning so that agencies fully understand their roles in identifying concerns for children who are at risk of CSE.*

SSCB's response is reflected in its improvement plan and the action plan linked to the Sandwell multi-agency CSE strategy. The findings from SSCB's commissioned external review of thresholds have already informed action by the local authority and partners to strengthen the work of the Sandwell multi-agency CSE team and the operation of Multi-Agency Sexual Exploitation (MASE) meetings. The updated 'Process and Guidance for the Management of CSE Cases in Sandwell' is provided at [Appendix 2](#).

2.12 The screening of all new referrals has significantly increased the number of children we are working with over the past 9 months and our understanding of

⁴ ibid. paragraph 169.

⁵ Ibid. paragraphs 2 and 157.

⁶ Sandwell Children's Services Improvement Plan 2015-17 (pages 12-13, and Action Plan section 5)

the nature of the problem in the borough. Our most recent analysis has shown that: -

- Oldbury, Smethwick and West Bromwich have the most open cases
- These towns are also the source of the highest number of our referrals
- Schools are increasing their awareness and engagement in CSE which is shown through the level of referrals we are receiving. However it is clear we still need to target specific schools to raise awareness further
- The vast majority of victims are female and white in ethnicity

2.13 The analysis of perpetrators is ongoing as the new service enables us to track those involved. It is therefore important to recognise that the current information is based on the known cohort, which may change, as we gather increasing amount of data. However it is clear, that similar to other areas of the country, our current analysis of perpetrators has shown a bias towards those from the Pakistani/Indian community. This demonstrates the importance of focusing on community engagement and building community understanding and resilience to ensure this intelligence does not isolate these communities or create false understanding of risks posed from other sectors of the wider community or increase community division in the borough.

3 The Sandwell Multi-Agency CSE Strategy

3.1 Aims

- The core aim of our strategy and approach is to prevent children from being exploited
- To create a robust multi agency response to CSE that places the child/victim at the heart of our work
- To build on existing practises in MASH/MAET to ensure any child at risk of exploitation is recognised and responded to in accordance with the agreed regional protocol and Working Together 2015
- To build a whole system approach to include all relevant departments within the local authority, schools, health, Police, voluntary and community sector, young people, parents, and communities.

3.2 Defining Child Sexual Exploitation

Sandwell Safeguarding Children Board has adopted the definition of child sexual exploitation set out in statutory guidance⁷ (in full below)

Sexual exploitation of children and young people under 18 involves exploitative situations, contexts and relationships where young people (or a third person or persons) receive ‘something’ (e.g. food, accommodation, drugs, alcohol, cigarettes, affection, gifts, money) as a result of them performing, and/or another or others performing on them, sexual activities. Child sexual exploitation can occur through the use of technology without the child’s immediate recognition; for example being persuaded to post sexual images on the Internet/ mobile phones without immediate payment or gain. In all cases, those exploiting the child/ young person have power over them by virtue of their age, gender, intellect, physical strength and/ or economic

⁷ (Safeguarding Children and Young People from Sexual Exploitation – Supplementary guidance to Working Together to Safeguard Children, March 2009).

or other resources. Violence, coercion and intimidation are common, involvement in exploitative relationships being characterised in the main by the child or young person's limited availability of choice resulting from their social/ economic and/ or emotional vulnerability.

The definition highlights that CSE can take place in many forms (as found by Barnardos in its '[Puppet on a String](#)' report), leading to some victims not recognising that they are being abused or understand that they are victims of serious crime. Victims of CSE can be from a range of social groups, however, evidence suggests that there are likely to be contributing factors such as, problems at home, mental health needs or being 'looked after'. We in Sandwell take the view that first and foremost, in any definition, CSE is child abuse and it is a crime. It is the sexual and physical abuse of children by adults who manipulate and gain control over those who cannot consent to sex either by virtue of their age or their incapacity.

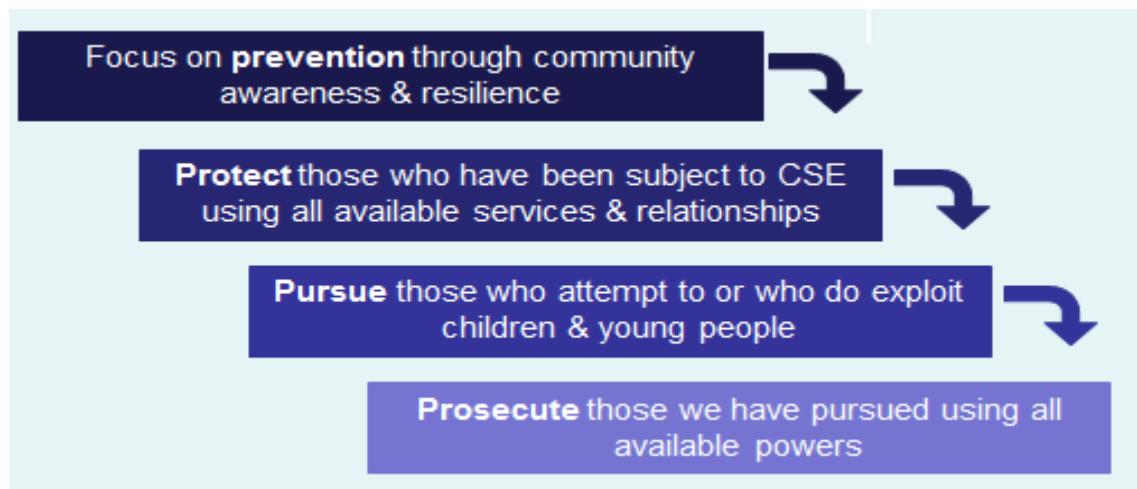
3.3 Sandwell Vision and Principles in targeting CSE

Our long-term goal in Sandwell is the prevention of any form of abuse or neglect of children in the borough. We will focus our efforts on raising awareness and building community understanding and resilience to seek to prevent children from being exploited. At the same time we will respond proactively and patiently to those children who do suffer harm and to those who perpetrate it. The 'strategy on a page' diagram below sets out our overall approach, which is underpinned by the *See Me, Hear Me Framework* principles and the West Midlands Local Standards.



4 Key Elements of the Sandwell Strategy

- 4.1 The Sandwell strategy reflects that defined by national guidance and research, focusing on the four 'P's' of Prevention, Protection, Pursue and Prosecution.



An outline of each of the key elements of the Sandwell strategy is provided in the paragraphs below, with further details in the action plan attached as Appendix 3.

Prevention

- 4.2 All children should be kept safe from any form of sexual predator and therefore a key focus in this strategy is one of prevention: through community awareness, through schools and PSHE in classrooms; through building openness and transparency throughout the partnership regarding the strength and success of our efforts.
- 4.3 Our primary goal will be to raise awareness of CSE across the borough and its workforce to increase understanding of the nature of CSE within communities and services. We will undertake significant community engagement and training to ensure people are 'tuned in' to potential risk factors to better prevent CSE from occurring in the borough. This will include:
- *Specific engagement with schools* through the SSCB Education Advisory Group to increase understanding and to influence local PSHE agenda's to ensure the nature of CSE is recognised both by teaching professionals and pupils. This will include the focus on the dangers of online exploitation and grooming for young people with specific guidance and support offered to schools and community groups.
 - *Engagement events with local communities* across our six towns prioritised based on emerging data showing where the highest prevalence is occurring. This will include focused CSE events sponsored by the board and targeted engagement with specific communities and faith groups.
 - *Holistic training* across all staff from the Local Authority – to ensure all workers are clear about potential signs of CSE Focused training will also be delivered by the SSCB to partners to ensure pathways, referral routes and services are well understood.

- *Work with hotels and taxi companies* across the borough to ensure that awareness of CSE is raised within these workforces to assist in limiting perpetrators opportunities to target young people. This will be achieved by targeted training and using the full range of licencing powers held by the LA to address those whom are failing in their duty to protect young people.
- *Creating bespoke responses to new and emerging issues, or events within Sandwell that could increase the risk of CSE*, such as fun fairs, holiday periods, and other events that attract large numbers of young people.

Protection

- 4.4 Where children are deemed to be at risk of CSE or have been found to have been subjected to it, we will use all of our efforts to protect them from harm and support them in moving forward with their lives. To best understand where children and young people may be at risk we have already implemented a screening policy for all children and young people referred through to children's services, this will continue and the data will be used to better understand the nature and extent of CSE across the borough.
- 4.5 We will continue to screen all children and young people who are referred to children's services for CSE and collate this data for discussion at the Children Missing Operational Group (CMOG) and the Young People at risk of Sexual Exploitation (YPSE) subgroup. We will use the NWG risk assessment for all those children who are deemed to be at risk of or who are suffering CSE. All relevant professionals/agencies will be briefed on CSE referral pathways, local procedures and guidelines.
- 4.6 We will embed, and if necessary, expand our integrated CSE team, co-located in the MASH, to ensure the appropriate resource is in place to work with children deemed to be at risk. This will include the holding of high risk cases by the CSE team. The central collation and tracking of all open cases to ensure the children/victims are being appropriately supported, reviewed and risk assessed. Direct and indirect support will be provided to the local early help Community Operating Groups (COGs) by the CSE team, with advice and guidance for CSE cases or issues within localities. The CSE team will also provide support and guidance to communities and schools through our CSE Team and our CSE Coordinator (funded by the SSCB) to increase awareness and understanding of the issues. We will be providing a primary mental health worker in the CSE team to secure direct links to therapeutic interventions and offer increased support to children and young people
- 4.7 We have already implemented MASE (Multi-Agency Sexual Exploitation) meetings for all children deemed to be at risk of or suffering from CSE. These meetings ensure there is a clear plan is created and implemented for individual children; track progress against plans and actively support those at risk or victims of CSE. The meetings will ensure we:
 - Share and clarify information in order to complete CSE risk assessment;
 - Establish exact nature of concerns and the child or young person's needs;
 - Establish risk for any other children, including siblings;

- Share information pertaining to a suspected perpetrator(s) with police, i.e. car registration, nickname/ alias, descriptions, tattoos, premises/locations etc;
- Consider the disruption and prosecution of perpetrators, and consider the most appropriate tools to be utilised that will have the desired impact. Criminal justice, or civil enforcement tools;
- Consider a referral using the National Referral Mechanism in cases where a child/ young person may have been trafficked;
- Develop a multi-agency plan to meet the child's needs including support for parents/carers;

- 4.8 We will be reporting the number, frequency and outcomes of MASE meetings through our performance framework to YPSE, CMOG and the SSCB, together with themes on perpetrators and locations to the Young People Sexual Exploited (YPSE) operational group to support their activity and plans to intervene with disruption tactics and other information gathering.
- 4.9 The recent problem profile completed by West Midlands Police will be updated to improve our overall intelligence and understanding of the issues. Rich data captured from the screening of all children and young people referred to Sandwell Children's Services (including Early Help) will improve our overall understanding of the local context and enable us to better respond to changing issues, hotspot locations or specific perpetrator types. We will also have a better understanding of the types of support services that are required to best support those at risk or who are victims of CSE locally. We have already commissioned a number of services to provide direct work with children and young people, engaging them in wider support services and helping to drive effective prosecutions. Commissioned services will also include specific family support work to help parents manage behaviours, risk, distraction techniques and reinforcing the engagement work of voluntary and community sector partners. Performance of these services will be reviewed annually to ensure that they are meeting service specifications and contributing to the overall effectiveness of the Sandwell CSE strategy.

Pursue

- 4.10 Lessons from elsewhere indicate that we must talk openly about the intelligence we receive and use this to drive both a deeper understanding of the issues and a more successful set of responses. We will not 'shy away' from the difficult discussions or the challenges that the analysis provides us to work across the whole system to impact on CSE effectively. It is only through using information that we can address the challenging issues for victims, improve community awareness and therefore prevention and address perpetrators activities to ensure that the welfare of our young people is enhanced. We are committed to continuous analysis of information and monitoring of themes to enhance the prevention activities across the Borough and wider region.
- 4.11 A key role of the CSE Coordinator will be to collate data and intelligence of emerging trends and report these to our operational and strategic CSE groups (YPSE and CMOG respectively). SSCB will be using the CSE dataset agreed as part of the regional framework. Data will be collated monthly and quarterly

with a full report to SSCB provided quarterly as a minimum, but more frequently if emerging trends are observed.

- 4.12 The SSCB and local authority are commissioning Public Health England to develop a problem profile with West Midlands Police, which will be shared across the region. Intelligence will be shared with our partners, specifically the police, to drive prosecutions; but also with other services such as local authority trading standards to use the full range of powers available to disrupt and pursue those engaging in CSE in Sandwell.
- 4.13 The coordination of information will be provided to police and LA officers to support their roles in regulation of provisions such as private hire companies, hotels and licence requests. These activities will be coordinated through the operational group (CMOG) and police intelligence. We will share this information across the region, recognising that CSE is not confined to local borough boundaries.

Prosecution

- 4.14 Sandwell is committed to aggressively pursuing prosecutions of those who are found to have been involved in CSE in any form in the borough. The SSCB will work closely with West Midlands Police and provide all information possible to secure effective prosecutions.
- 4.15 Whilst there will of course be sensitivities to data and intelligence in ongoing investigations, the SSCB will expect assurance reports from West Midlands Police as part of the wider performance management reporting on CSE to maintain an active overview of successful prosecutions across the borough.
- 4.16 Where prosecutions are not successful, the SSCB – through the strategic CMOG – will seek a formal review to enable lessons to be learned and shared across the whole partnership. This could include the nature of engagement with children, the use of intelligence or improved engagement with specific community groups. As a partnership and Board we must be open to learning at every stage and level, fostering a culture of openness and transparency to ensure we are as successful as we can be in securing convictions.

5 Governance

- 5.1 As detailed in the Government's recent document '[Tackling Child Sexual Exploitation](#)' (March 2015) there is an expectation that all Local Safeguarding Children Boards will conduct regular local assessments on the effectiveness of local responses to child sexual exploitation and publish the outcome of those assessments through their annual reports. They should set out in this analysis how the local partners have used their data to drive their response to vulnerable children and families.
- 5.2 Under the West Midlands regional framework the LSCB must ensure that:
 - the needs of children and young people who have been or may be sexually exploited and their families have been considered when planning and commissioning local services;

- specific local procedures are in place covering the sexual exploitation of children and young people;
- local safeguarding training includes information about how to identify the signs of sexual exploitation and an understanding of how to gather evidence which can be used to bring prosecutions against abusers;
- where sexual exploitation is known to be prevalent locally, specialist training is available for key professionals;
- Systems are in place to track and monitor cases of sexual exploitation that come to the attention of local agencies.
- A LSCB Sub-Group is put in place to lead on the issue of sexual exploitation, driving work forward and ensuring effective co-operation between agencies and professionals;
- There is a dedicated lead person in each partner organisation with responsibility for Implementing the Government's Supplementary Guidance to Working Together to Safeguard Children;
- Arrangements are in place to co-operate with neighbouring areas and those areas where children who have been sexually exploited are believed to have lived or been present.
- LSCB's have a responsibility to assure themselves that they have robust mechanisms in place which enable them to identify the nature and scale of CSE within their area, through collation of reliable multi-agency data.

5.3 Whilst the LSCB has overall responsibility for ensuring the effectiveness, it must work in conjunction with local **Police & Crime Boards, Local Safeguarding Adults Boards and Health and Wellbeing Boards**.

- **Police & Crime Boards** have a key role in disrupting and managing offenders and also through their local tasking processes they will be managing key locations;
- **Health and Wellbeing Boards** should ensure that CSE is a key feature in Health & Wellbeing Strategies and the JSNA and be using the findings to drive commissioning and ensuring the sexual health, teenage pregnancy and other relevant health and lifestyle services are identifying and referring potential victims of CSE; and
- **Local Safeguarding Adults Boards** have a key role to play in identifying and supporting vulnerable adults and in particular, have a significant part to play providing support to victims of CSE during transition from Children's to Adult Services.

In Sandwell, the Partnership Coordination Group provides a framework for ensuring joint-working to respond to CSE.

5.4 CSE is a key priority for the SSCB and its partners. We have a clear structure of governance that enables the sharing of information, coordination of activity, monitoring of performance against targets and review of the strategy linked to the SSCB. The diagram below shows the structure. Further details are provided at [Appendix 4](#).



APPENDIX 1

Local Standards - See Me, Hear Me Framework

[SOURCE: West Midlands Metropolitan CSE Regional Framework – July 2015]

(A) Accountability for all Safeguarding and Strategic co-ordination

Standard 1:

Every Director of Public Health, in conjunction with the Director of Children's Services, must ensure that the Joint Strategic Needs Assessment includes evidence about the prevalence of CSE, identification and needs of high risk groups, local gangs, their membership and associated females. This should determine commissioning decisions and priorities.

Standard 2:

Every Director of Public Health in conjunction with the Director of Children's Services should ensure the current and anticipated health and care needs of sexually exploited children and young people is addressed in the Health and Well-being Strategy.

Standard 3:

Each LSCB should develop a child sexual exploitation strategy and action plan to tackle child sexual exploitation and monitor the impact of that plan. The action plan should address the following areas of activity:

- Prevention (including providing children and young people with information on safe and healthy relationships through a whole school approach to preventing CSE)
- Protection
- Pursue

(B) Multi-agency Strategic Planning

Standard 4:

Each LSCB should have a dedicated sub group to co-ordinate work at a strategic level to tackle child sexual exploitation.

Standard 5:

Each LSCB should have a designated Child Sexual Exploitation Coordinator/Team to support the work of the sub group/delivery of child sexual exploitation strategy and delivery plan.

Standard 6:

Each LSCB should ensure they have an up to date understanding of the local position in relation to CSE, understanding intelligence held across agencies and ensure data is collated on the scale and nature of sexual exploitation in their area. West Midlands Police will work with partners to develop the agreed methodology, process and frequency for conducting a Problem Profile across the force region.

Standard 7:

Each LSCB should, as part of its monitoring effectiveness activity, understand the quality and impact of the operational response of local agencies to individual children and young people and their families and identify any unmet need and/or gaps in service provision/practice.

(C) Partnership and information sharing for identification and assessment

Standard 8:

Each LSCB should ensure effective information sharing arrangements/ agreement which places the safeguarding of children and young people at their core.

The previously agreed Information Sharing Protocol should be used by the LSCB and its partners (The key components of this Information Sharing Protocol e.g. sharing intelligence with West Midlands Police can be addressed in LSCB CSE procedures where it is felt that existing Information Sharing Protocols provide sufficient guidance on sharing information in respect of child safeguarding concerns).

Standard 9:

Each LSCB should oversee single and multi-agency training on child sexual exploitation that includes the warning signs and risk indicators for child sexual exploitation and how and when information sharing can take place. Training should also address specific patterns of child sexual exploitation e.g. gangs and/or groups, how to gather evidence to support criminal investigation and place sexual exploitation within the broader context of sexual abuse and gender based violence.

Standard 10:

Each LSCB should ensure that the screening tool at and the risk assessment tool at are used to identify and manage those at risk of and those being sexually exploited. Each LSCB should also ensure that all staff working with children and young people are sufficiently trained and confident in using these tools and this is evident in their training strategy. Consideration should be given to the regular review of specific groups of vulnerable children and young people.

Standard 11:

Each LSCB should have a CSE & Missing Operational Group to support effective gathering and use of intelligence by West Midlands Police and partners and to direct medium and long term actions to disrupt and reduce opportunity for children and young people to be harmed through sexual exploitation and/or missing episodes.

(D) Coordination of Multi-Agency Strategic Groups

Standard 12:

Each LSCB should ensure effective strategic and operational arrangements between work to tackle child sexual exploitation and work to tackle:-

- Young people going missing or running away
- Gangs and other youths inflicting serious violence upon young people
- Violence against women and girls

(E) Intervention and Service Delivery

The Intervention and Service Delivery component of the See Me Hear Me Framework is broken down into 6 areas:

- Prevention
- Pre-emptive policing to forestall exploitation
- Targeted early intervention
- Enduring support for victims and families
- Identification/apprehension of perpetrators and monitoring of non convicted suspects
- Rehabilitation of offenders

The majority of activity that will address these 6 areas of the Framework will be achieved through the delivery of the 12 standards set out above. However, to ensure a comprehensive approach to embedding all 5 components of the See Me Hear Me Framework, each LSCB should fully consider Pages 79-89 of the Office of the Children's Commissioner Inquiry into child sexual exploitation ("If only someone had listened" November 2013) when implementing Standards 1-12 inclusive.

To support LSCBs and their partners to fully deliver Component E of the See Me, Hear Me Framework as well as to promote effective and consistent practice, three further Standards have been identified as set out below:

Standard 13:

West Midlands Police to:

- Ensure clear investigative plans to bring offenders to justice which are monitored through internal police performance management activity
- Work with enforcement agencies and other partners to develop and implement SMART offender management and intervention plans and to regularly review the impact of these plans

Standard 14:

Every LSCB should adopt the regional CSE pathway so as to ensure that:

- Each young person who is being sexually exploited has a comprehensive multi agency assessment of their needs completed
- Individual meetings are held to consider the needs of the CSE victim and their family and to devise a plan to meet those needs
- Support services are delivered to meet a child's needs on an individual basis, promote the need to develop an enduring and trusting relationship between the child and professional supporting them and with an understanding that one-size does not fit all.
- Support is provided to parents/carers separate from the support available to the child and information on sources of support e.g. PACE (Parents Against Child Sexual Exploitation) is readily available to all parents/carers
- Disruption and investigation is integral to every child's CSE plan
- Safeguarding and disruption activity is not dependant on a direct disclosure from a young person

Standard 15:

West Midlands Police, in conjunction with the Crown Prosecution Service, to ensure that tailored witness care (pre trial and post trial) is available and that victims and their families are fully supported through the court process and afterwards.

Process and Guidance for Management of CSE cases in Sandwell

Document Control

Organisation	Sandwell MBC
Title	Process and Guidance management of CSE case in Sandwell
Author	Charlie Spencer
File Name	CSE
Team	Children Service Senior Management Team - SMBC
Owner	SSCB – strategic CMOG
Subject	Process for managing CSE cases in Sandwell
Review date	6 months after full implementation

Revision History

Revision Date	Editor	Previous Version	Description of Revision
	Beverly Jones	N/A	First Issue
23 April 2015	Charlie Spencer	Initial Draft	Revised terms of reference, screening tool and MASE decision making
5 June 2015	Charlie Spencer		Introduction of process maps and deletion of text that is no longer required
25 June 2015	Charlie spencer	V1225.6.15	Adjusted flowchart, MASE meetings, and reinforcement of intelligence for Police
15 July 2015	Charlie spencer		Updated and realigned after formal consultation with SSCB
19 August 2015	Charlie Spencer	V1 final draft	Revision and rewrite in response to SSCB consultation. Including reflection of July2015 west Midlands's regional framework. Clarification of referral, processes and expectations

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1. Introduction

This guidance is intended to facilitate a consistent approach to the case management of CSE cases in Sandwell.

The delivery of an effective, safe service to those children and young people who are at risk of, or being, sexually exploited is only achievable with a whole system approach. All partners, whether universal or specialist service delivery, will have a role in addressing this issue.

This process and guidance should be read in conjunction with the West Midlands Regional Framework that can be found at www.seeme-hearme.org.uk, Sandwell Multi Agency Thresholds Document and MASH Process Map. As set out within the CSE strategy, the approach in Sandwell mirrors that defined by national guidance and research focusing on the four 'P's' of Prevention, Protection, Pursue and Prosecution.

We will utilise our existing systems and processes rather than to create an alternative response to CSE. In this way children and young people at risk of CSE will benefit from an already established multi agency system via the Multi Agency Safeguarding Hub, (MASH) therefore new referral mechanisms will not be required.

All practitioners, including those within partner agencies and the voluntary and community sector are required to take full responsibility for adhering to the Sandwell approach. The completion of screening tools, risk assessments and multi-agency referral forms is the responsibility of each agency, however can be supported by the CSE team to facilitate timely assessment, risk management, support and intervention

Providing an appropriate response to CSE requires the combined effort and skills of a protective network for children and young people that are dependent on a multi-agency response. Tackling child sexual exploitation means managing high levels of risk – including professional risk and this is best managed through shared responsibility with each agency playing its part and supporting the others. No professional should feel they are alone in tackling CSE.

2. CSE Screening and referral process (see process map below)

Professionals in all agencies should be alert to the possibility that a child/young person for whom they have concerns may be at risk of being sexually exploited. They should discuss any concerns with their agency's designated safeguarding adviser and they should use the CSE Screening Tool to inform their assessment about the risk of harm to the child/young person.

If CSE is suspected a Multi-agency Referral form (MARF) and completed screening, must be submitted to the MASH in accordance with Sandwell CSE process map and multi-agency thresholds. Practitioners should also have notified their line manager of that concern and advice taken. This information must be recorded in the screening tool and on file.

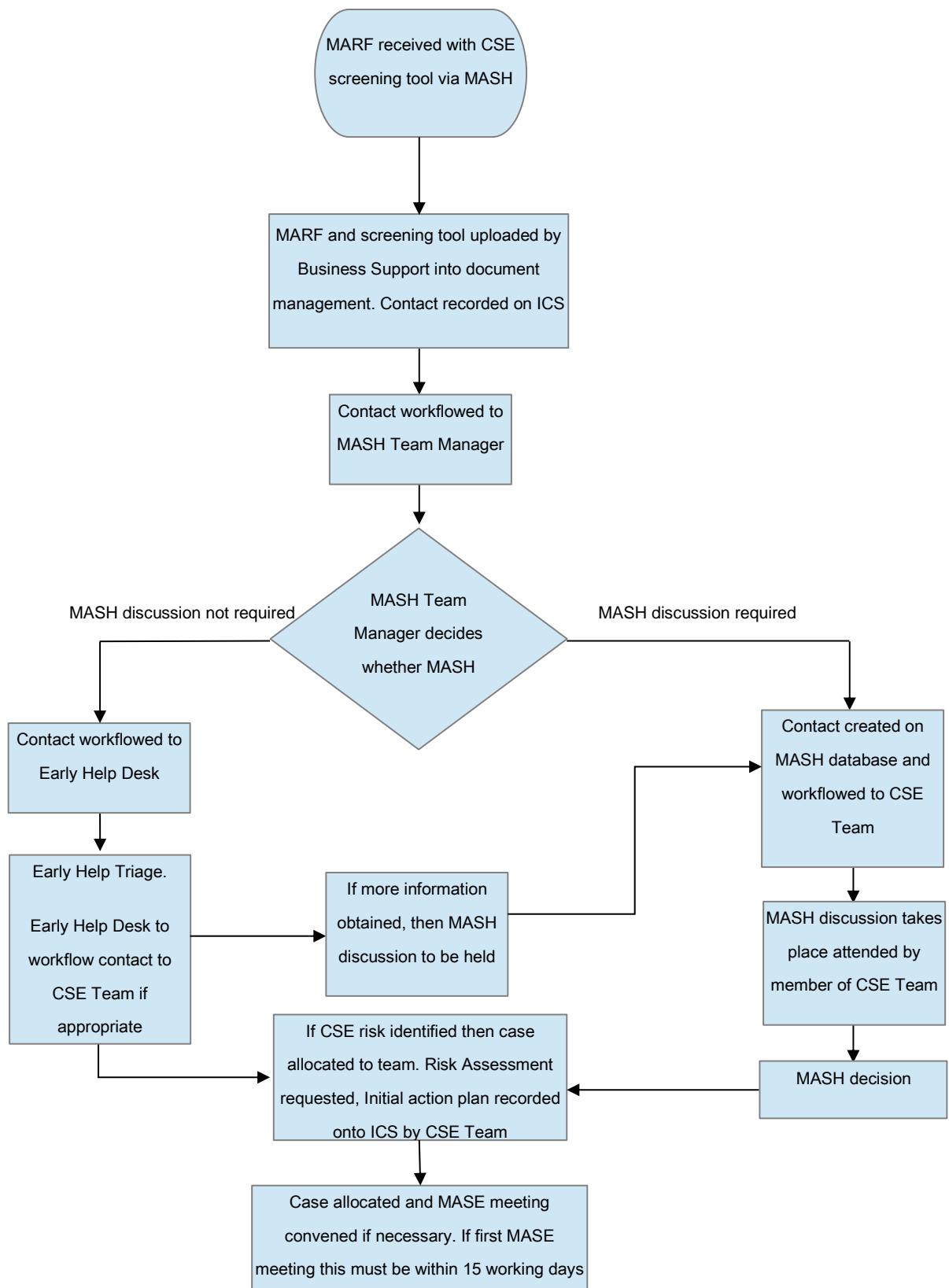
All cases open to a Sandwell Children's Service of 10 to 17 year old child will be screened for CSE. In instances where very few indicators are ticked on the screening tool and it is determined CSE is highly unlikely, the screening tool will be held on file and reviewed in the next statutory review, CIN, core group, CP or TAF meeting. If it is validated that there is no risk of CSE, the screening tool will be updated with that information, held on case file, and case notes updated.

Where there are specific concerns noted or suspected for a child under the age of 10 years old, a screening tool must also be completed, to compliment the MARF. Such cases will be managed as specified in accordance with the multi-agency thresholds document.

MASH will ensure all children aged 10 to 17 years that are referred to MASH are screened for CSE, which will include going back to referrers who are likely to know the child or family better and therefore are best placed to complete screening tools that will ultimately assist to keep children safe. MASH will also complete screening tools as appropriate based upon available information.

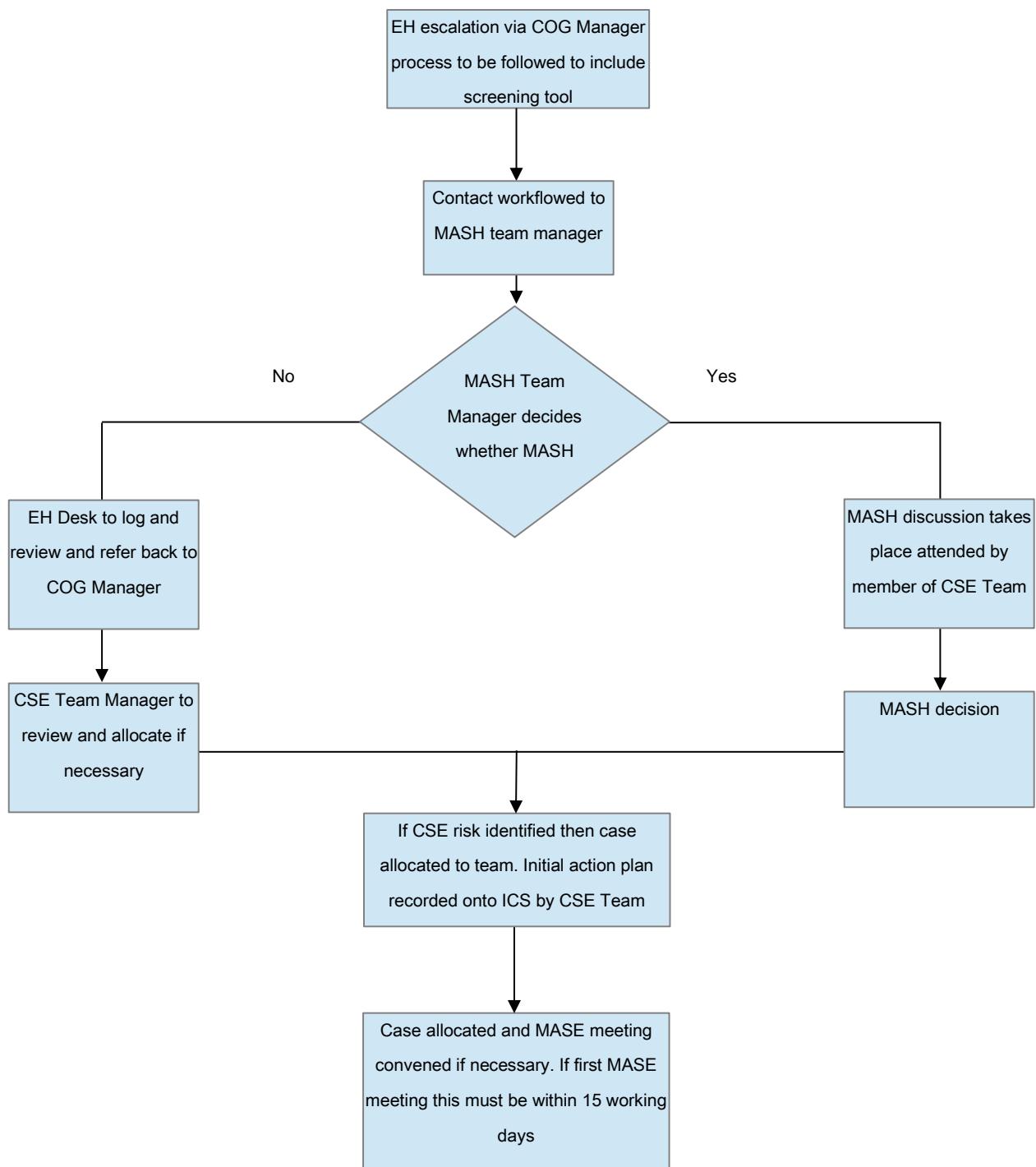
New Case Not Known to CSC or EH
Where the threshold for CSC has been met

(Please also refer to Early Help and Children's Social Care process “An Overview of How to Request Support”)

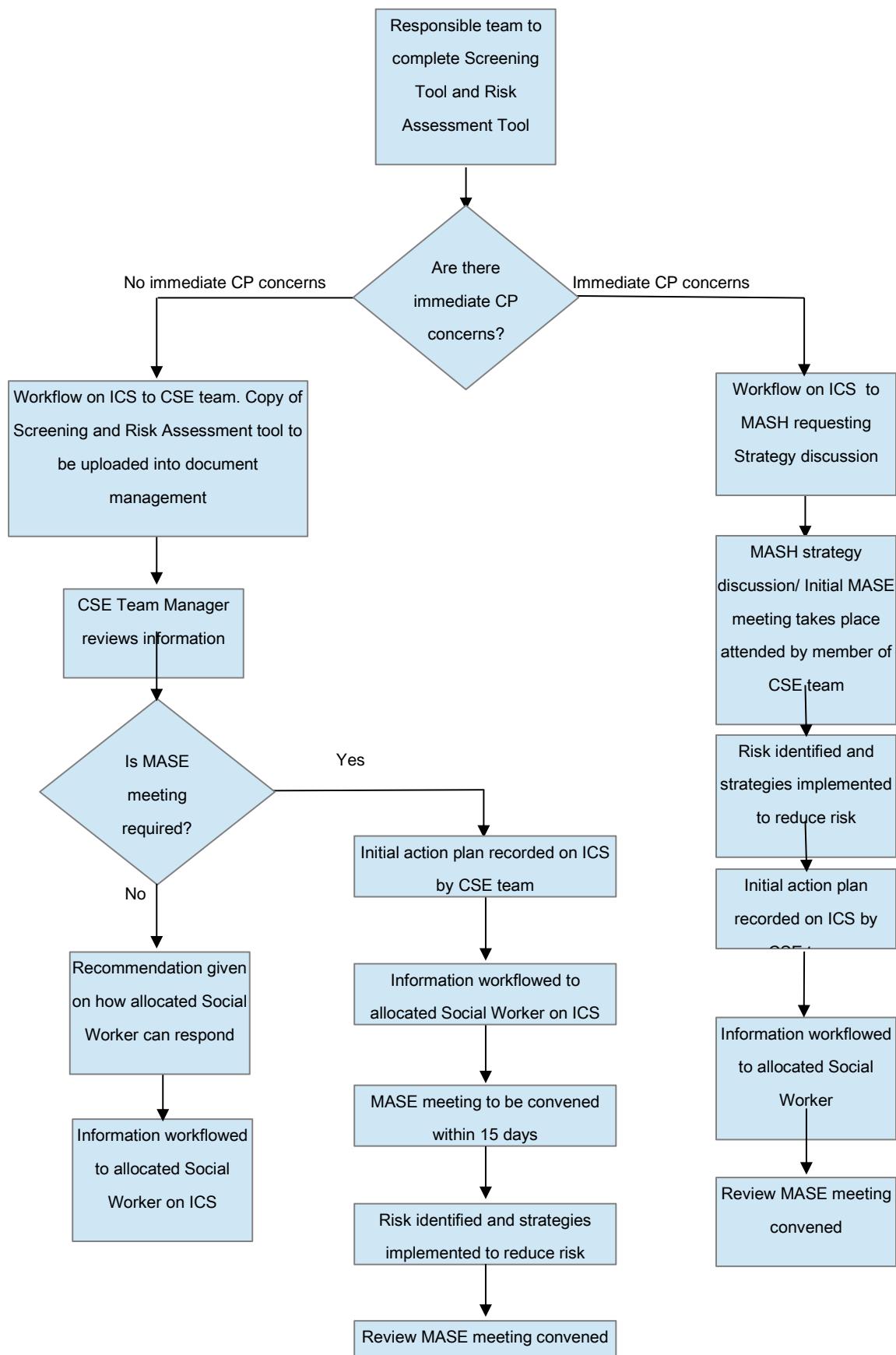


Open Case to EH
Where the threshold for CSC has been met

(Please also refer to Early Help and Children's Social Care process "An Overview of How to Request Support")



Open Case – Children’s Social Care where there are CSE concerns



2.1 CSE team

The CSE team is co-located within MASH and MAET, and is made up of: CSE team manager, CSE coordinator, social workers, family support worker, police officer, targeted youth support worker, Sandwell women's aid (SWA), Barnados, and a business support worker. The team will:

- Maintain a duty rota to provide advice and guidance
- Facilitate multi-agency sexual exploitation meetings (MASE)
- Attend core groups, reviews, and child protection conferences to ensure CSE risks are incorporated into the child's plan, and agreed actions undertaken
- Attend team meetings
- Provide complimentary support and intervention where appropriate
- Undertake return home interviews, and forward the content of those interviews to allocated workers to reflect into their support plans for children
- Collate information from MASE meetings to generate local intelligence to inform practise, understanding, disruption and prosecutions

2.2 Multi-agency sexual exploitation meetings (MASE)

The primary purpose of the MASE meetings will be to Prevent, Protect, Pursue and Prosecute.

The MASE meeting should conduct focused discussions for each case concentrating on:

- Whether the child is a child in need of early help (when a CAF or TAF process is required), is a child in need (Section 17) and/or is suffering, or likely to suffer, significant harm (Section 47).
- Ensuring that a multi-agency assessment of need (i.e. CAF, a child in need assessment or child/young person in need single assessment) has been or will be carried out, involving the young person and their family to inform the plans for working with the child/young person, their family or primary carers. These plans can be a TA/YOS Plan, a Think Family or Family Support Plan, a Child in Need Plan or Child Protection Plan going forward.
- Ensuring that the child/young person has been spoken to alone and their views and desired outcomes are recorded.
- Ensuring the child/young person has been offered support from an Independent Sexual Violence Advisor.

- Ensuring that the child/young person's family have been engaged and their views, strengths and support needs taken into account.
- Sharing and clarifying information in order to complete the CSE risk assessment.
- Analysing their needs and/or the nature and level of any risk and harm being suffered.
- Understanding risk for any other children, including siblings.
- Sharing information pertaining to a suspected perpetrator(s).
- Considering all possible powers and options to protect the victim and disrupt the offenders.
- Consider a referral using the National Referral Mechanism in cases where a child/young person may have been trafficked.
- Ensuring a multi-agency plan is in place which provides support to address the child/young person's needs to improve the child's outcomes to make them safe.
- Co-ordinating actions, where appropriate, with other processes such as MARAC or MAPPA

MASE meetings will be convened for all cases assessed to be medium and high risk, and will be chaired by the CSE Team Manager or Agreed list MASE meeting chairs, taking place within 15 working days of the referral to Children's Services. The record of the meeting will constitute a record of attendees, the completed specialist CSE risk assessment and the child's plan. MASE meeting minutes should be included on the child's file

Attendance at the meeting should include:

- The referrer, if a professional;
- Education;
- Health services;
- Police;
- Social worker;
- CSE Team manager;
- CSE Team;
- Any other relevant person (e.g. fostering link worker, residential key worker / manager, YOS worker, voluntary agency worker, GP);
- And Children/family/carers will be invited to all or part of the meeting where appropriate; however a decision will be made on a case by case basis depending on the circumstances of each case. It may be necessary if there is a confidential police investigation underway, surveillance or concerns about the parents or carers that the child and parents/carers are excluded from all or part of the meeting.

The outcome of the meeting may be that:

- The young person and family can be supported through Early Help services.
- The young person will be supported through a Child in Need Plan.
- There is a need to invoke Child Protection procedures or review the existing Child Protection Plan.
- There is a need to review and change the existing Care Plan.
- Support is provided by an Independent Sexual Violence Advisor.
- There is a possibility of criminal action against an adult.
- Co-ordinated multi-agency support is required to support and divert the child from involvement in sexual exploitation, this will be outlined in a plan/or added to existing plans with clear lead officers and timescales.

In addition to the MASE meetings there could potentially be a series of other meetings scheduled for the child i.e. a TAF (Team Around the Family) meeting for children open to the Early Help Service or core group, child protection (CP) conference, YOS review, risk and vulnerability meeting (RVM) for cases open to the youth offending service, child in need (CIN) meeting or looked after child (LAC) review for children open to children social care.

The following list summarises the timeframes associated with these various meetings;

- CP conference – first review 3 months and every 6 months thereafter
- Core Group – every 4 – 6 weeks.
- CIN meetings take place as a minimum of every 12 weeks
- LAC review - first review 3 months and every 6 months thereafter
- LAC core groups will take place every 12 weeks
- TAF meetings take place as a minimum of every 12 weeks
- YOS reviews will take place every 12 weeks
- RVM Weekly dependant on risk

MASE review meetings will be scheduled every three months and this will be chaired by the CSE team manager. The intelligence from these meetings will be collated, analysed and mapped by the CSE Coordinator to feedback to YPSE. The additional meetings for the child, identified above, will continue to take place and these will be attended by a Social Worker from the CSE team.

The role of the Social Worker at the core group will be to ensure that the CSE aspect in the plan is progressed. These meetings will continue to

be chaired by the SW or TAF coordinator. The Social Worker will also be able to provide any advice needed and escalate back to the CSE team manager if necessary. Any intelligence identified during the meeting will be directly fed back to the CSE Coordinator and recorded on the CSE workspace, this will then link directly back to the YPSE operational group.

In terms of the CP conference, LAC review, TAF and CIN meeting, the social worker will convene a ‘pre meeting’, which they will chair where they will review the NWG risk assessment tool.

2.3 Involvement of multiple children in sexual exploitation

Where there is knowledge or strong suspicion that there are multiple children or young people involved in the same sexually exploitative situation, or they are being controlled by the same person, there will need to be additional planning, including consideration of the use of child protection procedures.

2.4 Urgent Protection of Children/Young People

There will be occasions when it will be necessary to take action to immediately protect a young person. This will involve a multi-agency response to achieve immediate action such as removal of child/young person and/or family out of a particular area. There will then be a co-ordinated response to support the child/young person and/or family once removed to facilitate long term options. It is not appropriate to take immediate interventions without having ongoing support and activity to create long term solutions focused on maintaining the child/young person in Sandwell.

2.5 MASH Decision Making – CSE referrals

Initial decisions in regards to the outcome of CSE referrals will be made in line with existing MASH protocols, be based upon the SSCB agreed Multi agency threshold document and be defensible. Clear records of the decisions and actions MUST be maintained throughout the process and will be subject to audit and Quality assurance processes.

All outcomes, context, plans, interventions and their rationale of case management meetings must be clearly recorded on the child/young persons’ file.

2.6 Disruption and Pursue Strategies

Disrupting perpetrator behaviour is an important part of work to tackle the sexual exploitation of children and young people, which must be a kept consideration for all MASE meetings.

Any meeting in respect of individual children at risk of harm from sexual exploitation should consider developing a disruption plan for offenders. The plan should identify who is responsible for undertaking the work, it should be shared with the agencies involved and timescales for a review meeting agreed. Disrupting offenders is an important part of local work to tackle CSE. A disruption plan could involve a number of activities.

2.6.1 Co-ordinating intelligence gathering and disruption activity

West Midlands Police are well placed to identify:-

- CSE hotspots in and across the 7 Metropolitan Local Authority areas as well as the wider West Midlands region
- Trafficking both into and out of the region
- Perpetrators including those who are linked to more than one child or young person or who operate as part of an organised network.

In addition, the local identified CSE Lead Officer and partner agencies are well placed to identify links and trends in the sexual exploitation of children and young people at a local level as well as cross-border issues.

Work at a local level needs to be informed by intelligence and tackling perpetrator behaviour and local hot spots require a partnership approach. The principal place for this to take place is the local Offender Case Management Forum and/or CSE and Missing Operational Group.

The Police have a critical force-wide role in identifying trends, movements, activities and threats across Local Authority boundaries and ensuring that processes are in place to regularly update and inform local professionals directly and/or through the CSE and Missing Operational Group process.

Any ‘hotspot’ locations identified through debriefing missing children, patrolling officers or other intelligence sources must be policed accordingly. These locations may include night time economy venues, hostels, food outlets, taxi ranks, outside schools, addresses frequented by missing children or other venues where perpetrators may prey on victims. Appropriate information must be provided to patrolling officers,

especially Neighbourhood Policing Teams, to enable disruption and intelligence gathering to take place.

Any vehicles linked to CSE through evidence or intelligence should be linked to the ANPR system.

Addresses where missing children/young people are frequently found should be marked on PNC.

2.6.2 Evidence gathering and information sharing

The effective identification and recording of information and intelligence in relation to individual cases is crucial to the successful disruption and prosecution of perpetrators. All professionals should continually gather records and share information with the appropriate authorities. Parents and carers should be encouraged and supported in identifying perpetrators, collecting and preserving evidence (medical, forensic and circumstantial) as well as in supporting their children through the criminal justice process. Such information can form the basis of strong intelligence and can help the police to start an investigation. Ensuring that evidence is gathered in a way that will be accepted by the Crown Prosecution Service (CPS) and can be used in court is critical. The CPS should work with local partners to discuss how to build a successful case in order to support successful prosecutions including a victimless prosecution.

The investigation should seek to identify and assemble evidence that will support charges to reflect the full extent of the abuse. Photographic evidence of physical abuse should be obtained whenever appropriate. It will help in establishing severe abuse even when the child may be unwilling or unable to give evidence. Photographic evidence of the conditions in which a child was kept could also provide valuable evidence for charges of kidnapping or false imprisonment. Care should be taken, however, in obtaining such evidence to ensure that it does not compound the abuse suffered by the young person, and she or he should be made aware that photographs are being taken for evidential purposes. Those investigating criminal actions must understand that the welfare of the child is the paramount concern.

2.7 Civil Remedies

Securing prosecution and conviction must be the absolute priority against adults committing serious sexual offences upon children. Where there is grooming, low level harassment or other behaviour which suggests a risk of CSE, the Police and Local Authority have access to a range of civil remedies. These include remedies which specifically relate to sexual offences or grooming and other wider nuisance and anti-social behaviour injunctive and closure powers. These powers are important not only as methods of disruption or prevention; they also function as a trail of concern to be used in subsequent prosecutions, providing third party evidence.

2.8 A Child Abduction Warning Notice (Section 2 Child Abduction Act 1984; Section 49 Children's Act 1989) authorised by a child's parent and issued by the Police (or the Local Authority in the case of a looked after child aged 16-18) warns a suspected perpetrator to stop associating with a named child. As such, the adult is made aware that a concern has been raised about the relationship and that authorities are watching. Abduction Notices can be used as evidence in criminal proceedings that the adult knew the age of the child, which is clearly stated on the warning notice. Breach of an Abduction Notice can become grounds for issuing of the Sexual Risk Order.

In addition, there are new powers introduced by the Anti-Social Behaviour and Crime and Policing Act 2014:

- **Sexual Risk Order** (replaced Risk of Sexual Harm Orders) can be issued against an individual who has 'done an act of a sexual nature which suggests that they pose a risk of harm to the public in the UK or children and vulnerable adults abroad'. An 'act of a sexual nature' has not been defined in the legislation and the guidance states this 'will depend to a significant degree on the individual circumstances of the behaviour and its context', which means this Order may be used by Police and the National Crime Agency to disrupt grooming activity. A Sexual Risk Order lasts a minimum of 2 years and has no maximum duration. Breach of a Sexual Risk Order is a criminal offence which can attract a term of imprisonment of up to 5 years.

- **Sexual Harm Prevention Order** can be made against a person who has been convicted or cautioned in relation to a sexual offence to protect any members of the public in the UK, or vulnerable adults and children abroad, from sexual harm including protecting children from grooming

activity. The Sexual Harm Prevention Order must be made for a minimum of 5 years and can be made for an indefinite period if necessary. The Order can contain any prohibitions aimed at protecting children and others. Breach of an Order is a criminal offence, which can attract a term of imprisonment of up to 5 years.

- **Closure Notice** can be issued by the Police in respect of premises which they have reasonable grounds for believing have been, or are likely to be, used for activities related to specified child sex offences. Closure powers now capture a wider range of offences relating to child sexual exploitation and the Police will be able to take proactive action if they believe that the premises are going to be used for child sex offences.
- **Child sexual exploitation at a hotel – requirement to disclose information or comply with Notice served by Police:** Police can serve Notice on a hotel requiring them to disclose the names and addresses of guests where there is reason to believe there are CSE. Failure to comply is a criminal offence.

In addition, the following provides an overview of some of the tools currently available to Local Authorities and Police in relation to nuisance and anti-social behaviour:

- **Civil Injunctions** (Anti-Social Behaviour, Crime and Policing Act 2014) are civil orders which replace the powers previously available to Council's through Anti-Social Behaviour Orders and Housing Act Injunctions.
- **Section 222 Local Government Act 1972** enables a Local Authority to bring criminal or civil proceedings in its own name, including applying for Injunctions, where it considers it expedient for the promotion or protection of the interests of the inhabitants of their area. Local Authorities may use this provision to enforce their Children Act duties.

3. Information sharing

West Midlands Police have developed an information sharing tool to be used by front line practitioners to share information with regard to Child Sexual Exploitation (see Appendix 3 - West Midlands Police Information Sharing Tool). Due to the nature of information often being anecdotal or unsubstantiated, such sharing must be done with sensitivity to data protection, confidentiality and human rights. However, it is often small seemingly innocuous pieces of information that come together to identify those who present risk. The forms should be completed and submitted

to the addressed detailed on the form. It is important that ALL practitioners complete and send the information immediately it becomes known, rather than to wait for the next scheduled meeting.

The activities identified do not separate precisely into each of the 4 'P' areas; there is overlap. They have been separated using the primary role while recognising the holistic nature of all activity in achieving the service outcomes, placing the child/young person's safety at the heart of any intervention/support.

4. Risk Management

The CSE Team will seek to validate/ investigate new cases referred through MASH where screening of that referral raises CSE concerns; this work will be undertaken via a CSE team duty process and will be used to inform MASH / strategy discussions and decisions making on thresholds. If it is determined that there is a risk of CSE; The CSE team will go back to the referrer to advise them to complete a NWG risk assessment, supported by CSE Team. A MASE meeting will be scheduled to be convened within 15 working days, where the risk assessment must be presented.

4.1 CSE Risk Assessment (see Appendix 2)

CSE Risk Assessments are to be completed by a minimum of 3 officers including; police, social worker/ CSE Team and 1 voluntary/partner agency/ referring agency. Risk Assessments to include:

- Risk Assessment of CSE concerns raised from Early Help Assessments and MARFs
- Risk Assessment of all contacts aged 10-17 years old. To develop services and increase intelligence to build problem profile.

The tool used has been developed from the West Midlands Metropolitan Area Child Sexual Exploitation Procedures. The Tool determines a level of risk based on a score with a score of low medium or high. The initial risk assessment is completed as detailed above.

The risk will be assessed on the following:-

- Initial information from contact/referrer
- Information from Police records system – accessed by Police

- Information from social care database (ICS) – accessed by Social Worker
- Information from Early Help System
- Health Records

If the referrer is from a partner agency they will be requested to provide the relevant information i.e. ECAF, Gen 117 (Police), MARF or most recent Social Care assessment.

The discussion at the risk assessment or MASE meeting will result in an agreed risk rating. The outcome of this discussion, including the rating is recorded on an outcome form and uploaded onto Social Care records with a letter to the referrer advising about the outcome and the agreed course of action.

The score and the risk assessment discussion based on professional knowledge will determine the course of action as follows;

No further action for the CSE Team – in cases where the risk is assessed as low, based on the information available, and no role is identified for the CSE Team, a letter will be sent to the referrer signposting to services where appropriate, and advise on whether an early help assessment should now be completed.

Referral to Early Help – in cases where the risk is assessed as low to medium and further preventative work is identified or specific pieces of work related to sexual exploitation and safety are identified, a referral is made to the appropriate COG Team. This work will be recorded using the EH system. The Early Help services could also work with young people and their families to undertake specific pieces of work within this category, and their work will be recorded on social care and Early Help records.

Support Services are in place – where the case has been referrer and discussed at a MASE meeting. Dependant on the agreed level of risk, the chair may determine that the case should continue to be managed by that agency/team

Case determined to be medium/ high risk – CSE is the main issue.
Cases will be sent to MAET for immediate investigation.s47 supported by CSE S/W and PPU.

Where additional Information, comes to notice that is CSE in nature and raises risk level to high a strategy meeting should be initiated to inform S47 investigation. Such investigation will be supported by CSE S/W and PPU.

Where additional information comes to notice that is non CSE, but CSE is a factor a strategy meeting should be initiated with a view to the case transferring for single assessment

Appendix 2.1:

Sandwell Child Sexual Exploitation Screening Tool

Name:		Also known as:	
Date of Birth:		Gender:	
Ethnicity:		Disability:	

Address: Contact number:	
Lives with:	
Parental Responsibility:	
Relationship to young person:	

Referrer's details
Name:
Agency:
Telephone:

Reason for completing screening tool:
--

Child sexual exploitation is child abuse. It involves children being forced or manipulated into sexual activity in exchange for something- money, gifts or accommodation, or less tangible goods such as affection or status. The sexual activity and exchange may be seen as consensual, but is based on an imbalance of power which severely limits victims' options. This Tool has been developed to enable the identification of children and young people at risk of sexual exploitation.

Sandwell Child Sexual Exploitation Screening Tool

Name of child/young person: _____

Child sexual exploitation is child abuse. It involves children being forced or manipulated into sexual activity in exchange for something- money, gifts or accommodation, or less tangible goods such as affection or status. The sexual activity and exchange may be seen as consensual, but is based on an imbalance of power which severely limits victims' options. This Tool has been developed to enable the identification of children and young people at risk of sexual exploitation.

Significant Risk Indicators	Current or during the past 6 months:	Prior to 6 months ago:
Repeat periods of absence/missing (day and/or night)		
Relationship of concern with a controlling adult (male or female) or young person, which might involve physical and/or emotional abuse and/or gang activity		
Entering/leaving vehicles driven by unknown adults (not car theft)		
Unexplained amounts of money, expensive clothes or other items; including phone credit		
Frequenting areas known for risky activities		
Groomed/abused via the Internet and mobile technology and/or excessive use of mobile phone including late at night		
Having unexplained contact with hotels, taxi companies or fast food outlets		
Recurring sexually transmitted infections/repeat terminations		

Risk Indicators	Please tick
Whereabouts unclear or unknown – day and/or night	
Absences/exclusion from school or not engaged in school/college/ training/work	
Regular/Multiple contacts from unknown adults/young people	
Physical injuries without plausible explanation	
Sexually transmitted infections/ Pregnancies / termination of pregnancies	
Drugs Misuse	
Alcohol Misuse	
Self-harming/ suicide attempts/ eating disorders/aggression	
Use of a mobile phone which causes concern – including sexting/multiple phones/sims	
Unsafe use of internet	
Has been sexually assaulted	
Disclosure of sexual/physical assault followed by withdrawal of allegation	
Risky/inappropriate sexual behaviour	
Lack of awareness/understanding of being safe	
Peers involved in sexual exploitation/risky or concerning behaviours	
Living independently and failing to respond to attempts by workers to keep in touch	
A&E attendance because of alcohol/drug misuse	
Being accompanied to appointments by an unknown person that causes concern	
Association with gang members that suggests sexual exploitation is a possibility	
Volatile behaviour	
r/hostility in relationships with parents/carers and other family members	

Vulnerability Factors	Please tick
Unsuitable/inappropriate accommodation/ sofa, surfing / financially unsupported/ migrant/refugee	
Isolated from peers/family/social networks	
Learning disabilities/special needs or mental health issues	
History of Local Authority Care/looked after child status	
Involvement in criminal activities and/or at risk of gang involvement	
Family conflict/ breakdown, lack of love/security, death, loss, illness of a significant person in child's life	
History of Child Protection involvement in relation to neglect, physical sexual or emotional abuse	
Family history of domestic abuse and/or substance misuse and/or mental health difficulties	
Risk of forced marriage	
Recent bereavement and loss	

The framework includes three categories of risk and is intended to inform appropriate responses in relation to children and young people's safeguarding needs. The presence of one significant risk indicator will necessitate action as set out below.

Please use your professional judgement to reflect upon the indicators you have ticked above and consider the health, welfare and safety of the child in question. (NB: A 'child' is any person under the age of 18, male and female, and older children can be equally as vulnerable).

Description	Associated actions
Category 1 – Low. At risk of harm A child who is at risk of being groomed for sexual exploitation.	<ul style="list-style-type: none"> Delivered as a single agency or integrated into existing multi-agency plan. Educate to stay safe. Work with children, young people and families to develop an awareness of the risks that can lead to a situation in which they may be exposed to sexual exploitation. Ongoing review of risk required particularly if there are significant changes in circumstances. Inform CSE Co-ordinator of young person considered to be at risk of CSE so this can be captured by SSCB Use the police information report form to share information on victim's or perpetrators Referral will be made to Raising Aspirations who will undertake direct work with the victim on healthy relations and staying safe
Category 2 - Medium. Significant risk of harm A child who is targeted for abuse through exchange of sex for affection, drugs, accommodation and goods etc. The likelihood of coercion and control is significant.	<ul style="list-style-type: none"> A Multi Agency Referral Form to be completed along with the screening tool A multi-agency approach is likely to be needed. Follow local procedures e.g. CAF or DSCB Safeguarding Procedures for Children at Risk of Sexual Exploitation (Section 34) Inform CSE Co-ordinator of young person considered to be at risk of CSE so this can be captured by SSCB Discuss with Police missing episodes and Barnardo's and referral for return home visits to be completed Ongoing review of risk required particularly if there are significant changes in circumstances. Intervention by Sandwell Women's Aid to be completed in order for young people to recognise healthy/unhealthy relationships. They will also be support in attending Court Referral will be made to Raising Aspirations who will undertake direct work with the victim on healthy relations and staying safe MASE (multi agency sexual exploitation) will be convened and risk assessment

		form to be completed
Category 3 – Significant. Serious risk of harm A child who is entrenched in sexual exploitation, but often does not recognise or self denies the nature of their abuse often in denial, and where coercion/control is implicit.	<ul style="list-style-type: none"> Follow the DSCB Safeguarding Procedures for Children at Risk of Sexual Exploitation A referral will be needed and a multi-agency strategy meeting should be convened in relation to children and young people assessed as at 'significant risk'. Participants of the meeting should agree a protection plan and action to include long-term intensive direct work with the individual child or young person. Risk should be closely monitored and regularly reassessed as part of the risk reduction process. The Plan to include actions in relation to perpetrators MASE (multi agency sexual exploitation) will be convened and risk assessment form to be completed Joint investigation between Police and Children's services Inform CSE Co-ordinator of young person considered to be at risk of CSE so this can be captured by SSCB Intervention by Barnardo's who will conduct return interviews for young people who go missing Barnardo's will provide family based interventions and assessments who will work proactively with parents/carers and families Barnardo's will provide therapeutic care with the victim 	

Action Taken	Done (date) / To be done (timescales) and any appropriate details
Discuss with line manager	
Contact CSE TEAM	
T.A.F meeting convened	
NWG Risk assessment completed	
Multi Agency Sexual Exploitation Meeting	
Risk Level	
Any other actions, treatment or monitoring arrangements	

Where to refer or discuss your concerns:

Anyone who completes a CSE screening tool, or is considering the need to do so, can seek advice from the Designated Safeguarding Advisor in their agency/service/setting.

Advice can also be sought from the SSCB CSE Co-ordinator.

If the screening tool indicates that the child/young person is likely to be at significant risk or serious risk of harm from sexual exploitation you should contact Children's Social Care or the Police:

CSE Team Natalie Shand	CSE Co-ordinator MASH	0845 352 8690 natalie_shand@sandwell.gov.uk
CSE Team Ann Marie Thomas-Bartley	CSE Social Worker	0121 596 7129 annemarie_bartley@sandwell.gov.uk
CSE Team Rachael Hopkinson	Targeted Youth Support - Raising Aspirations Tier 1/2 Service	0845 352 7701 rachael_hopkinson@sandwell.gov.uk
CSE Team Sandwell Womens Aid	Tier 2/3 Service	0121 553 0090
CSE Team Rob Cotterill	Barnardo's Tier 4	01922 644 338
CSE Team Police Sinead Rattigan	Child Abuse Investigation Unit	0121 626 9153
Children's Social Care	MASH	0845 351 0131 Emergency Duty Team (Out of Hours)

Health	Safeguarding Children 0121 507 2844	Sandwell Hospital Sandwell and West Birmingham
Education Early Years:	Duty Officer (Safeguarding)	0121 569 4970
YPSE:	Children's Social Care Quality Development Unit	0121 569 8147 elizabeth_johnson@sandwell.gov.uk

Where to get more information:

Sandwell Safeguarding Children's Board www.sandwellscb.org.uk

See me hear me www.seeme-hearめ.org.uk

Child Exploitation and Online Protection (CEOP) www.thinkuknow.co.uk

PACE – Parents Against Child Sexual Exploitation. www.paceuk.info

UKHTC – UK Human Trafficking Centre. www.soca.gov.uk/about-soca/about-the-ukhtc

Appendix 2.2 Child Sexual Exploitation (CSE) Risk Assessment Tool (Page 1 of 7)



This form allows you to explore some of the vulnerabilities and indicators present in a child or young person that you know might be at risk of or experiencing sexual exploitation. It is intended to help you think about what the risk might be to the young person and about what to do with the information you have. You should always bear in mind other services may have other information to add to what you know so if any of the indicators in Section 3 appear to be an issue, particularly if more than one or if compounded by vulnerabilities in Section 2, you should speak to other agencies or family during the assessment and/or use this assessment to support discussion with your Designated Officer or to supplement a CAF or referral to another service including Specialist CSE Team / Children's Social Care.

If you suspect anyone is in immediate danger, call the Police on 999. If a child/young person is currently at risk of significant harm, including from CSE, refer immediately to your local Children's Social Care.

Section 1. General Details

1.1 Name and role of worker completing assessment		1.2 Agency and contact details	
1.3 Child/Young person's Name/Alias/Known as		1.4 Local Authority Currently living in	
1.5 Language(s) spoken		1.6 Date of Risk Assessment	
1.7 Age/DOB		1.8 Legal status	
1.9 Ethnicity		1.10 Gender	

Section 2. Vulnerabilities – These are things which may make a young person more at risk of being targeted for CSE. They give context to the specific indicators of CSE in section 3. However, the absence of these vulnerabilities does not preclude children being targeted; evidence shows victims can come from any background and without any prior vulnerability. You may not need to complete this section if you are also doing a CAF or other standard risk assessment / referral form as long as, in making your summary of risk, you bear these factors in mind.

2.1 Migrant/Refugee/Asylum Seeker/Trafficked status through NRM		2.2 Sexuality (if known)	
2.3 Known to Children's Social Care/CP Plan/LAC, now or previously	Yes <input type="checkbox"/> No <input type="checkbox"/>	2.4 Physical/Learning Disabilities/Communication disorder	

2.5 Involvement with the Youth Justice system? (If Yes provide brief details including type of criminality)		2.6 Is the child receiving support or services from any other agency, such as drug & alcohol or mental health services	
2.7 Has sexual exploitation previously been identified as a specific issue for this child? Please provide details	Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, when		
2.8 Neglect by Parent/Carer/Family member		2.9 History of / current family domestic abuse (including risk of forced marriage/risk of honour based violence/familial child sexual abuse)	
2.10 Physical/emotional/Sexual abuse by Parent/Carer/Family member		2.11 History o/ current substance misuse in family	
2.12 Poverty or Deprivation		2.13 Family history of exploitation or Prostitution	
2.14 Unsuitable or inappropriate accommodation (inc. street homeless, staying with inappropriate adults/hostel/B&B)		2.15 Family history of mental health difficulties impacting parenting	
2.16 Breakdown of Family relationships		2.17 Family bereavement	
2.18 Low self-esteem or history of being bullied or of bullying		2.19 Lack of positive relationship with a protective / nurturing adult	
2.20 Recent bereavement or loss		2.21 Young carer	
2.22 Disconnecting from support networks i.e. family / friends		2.23 Living in a chaotic or dysfunctional household	

2.24 Unsure about their sexual orientation or unable to disclose sexual orientation to their families/friends		2.25 Living in a gang neighbourhood (postcode gangs)	
2.26 Gang association either through relatives, peers or intimate relationships		2.27 Ethnicity (bullying or gang ethnicity)	
Section 3. Risk Indicators – Children are groomed and exploited in different ways. It may be difficult for parents, carers and practitioners to differentiate between ordinary teenage behaviour and the risk of or involvement in sexual exploitation but below are some signs that may signify if the child is being groomed for sexual exploitation or actually being sexually exploited.			
Within family / home / relationship			
3.1 Change in behaviour – being more secretive / withdrawn / isolated from peers or not mixing with usual friends		3.2 Increasingly disruptive, hostile or physically aggressive at home or school inc. use of sexualised language	
3.3 Associating / relationships with significantly older men or women who encourage emotional dependence, loyalty and isolation from safe relationships (record details of adults i.e. occupation/description)		3.4 Physical or emotional abuse by a boyfriend / girlfriend or controlling adult including use of manipulation, violence and/or threats	
3.5 Association with other sexually exploited children		3.6 Multiple callers (unknown adults / older young people) – (record description / names etc.)	
3.7 Estranged from family			
3.8 Regularly coming home late or going missing from home, care or education or any period of time (whether reported or not)		3.9 Returning home after long intervals appearing well cared for	

Health and Mental Health		(Page 4 of 7)	
3.10 Change in physical appearance (new clothes, more/less make-up, weight gain/loss)		3.11 Increased health / sexual health related problems	
3.12 Marks or scars or physical injuries on the body or face which they try to conceal		3.13 Expressions of despair (inc. depression, mental ill-health, self harm, suicide thoughts / attempts, overdoes, eating disorder)	
3.14 Branding (i.e. of gang logos)		3.15 Repeat / unplanned pregnancy or pregnancies (including ending in termination / miscarriage(s))	
3.16 Sexually Transmitted Infections (STI's) and/or repeat tests particularly with negative results			
Behaviour and Experiences			
3.17 Concealed / concerning use of the internet including web-cam, online gaming (via X-box, PlayStation), chat rooms etc.		3.18 Exclusion from school or unexplained absences from, or not engaged in school / college / training / work	
3.19 Failing to respond or attempts to keep in touch by workers / carers or recent disengagement		3.20 Reports of being taken to hotels, nightclubs, takeaways or out of area by unknown adults	
3.21 Sexualised risk-taking, including on internet or mobile phone, such as sexting (sending explicit messages or photos to adults or peers)		3.22 Young gay/bisexual exploring sexuality in unsupported way	

3.23 Association with gangs		3.24 Increasing use of drugs or alcohol or misuse of drugs or alcohol	
3.25 Fear of victimisation from other gangs due to gang affiliation or rivalry		3.26 Constrained by 'rules' of a gang	
3.27 Inability to negotiate exit from a gang due to fear / dependency		3.28 Displaying signs of harassment / unwanted attention	
3.29 Fear of gang leaders		3.30 Evidence of sexual bullying and/or vulnerability through the internet and/or social networking sites	
3.31 Involved in criminal offending activity (i.e. ASB / criminal damage / theft)		3.32 Usual association with groups of adults	
Appearance and Possessions			
3.33 Unexplained amounts of money , mobiles, credit, expensive clothing, jewellery or other items / gifts		3.34 Overt sexualised dress	
3.35 Having multiple mobile phones, sim cards or use of a phone that causes concern – multiple callers or more texts/pings than usual		3.36 Possession of hotel keys / cards or keys to unknown premises	
Incidents <i>If any of these are known to have happened and the Police or Social Care are not yet aware you must refer to the local CSE Team, if there is one, otherwise to Social Care – or direct to the Police in emergencies.</i>			
3.37 Child under 13 engaging in penetrative sex with someone over 15 years		3.38 Entering / leaving vehicles cars with unknown adults	

3.39 Child meeting different adults and exchanging or 'selling' sexual activity		3.40 Frequenting areas known for on/off street sex work	
3.41 Receiving rewards of money or goods for introducing peers to CSE perpetrators.		3.42 Disclosure of sexual/physical assault followed by withdrawal of allegation	
3.43 Knowledge of towns or cities they have no previous connection with		3.44 Being taken to clubs or hotels and engaging in sexual activity	
3.45 Abduction or forced imprisonment		3.46 Association with taxi firms / takeaway owners (night-time economy)	
3.47 Being taken to brothels / massage parlours		3.48 Seen in CSE hotspots (certain flats, recruiting areas, cars or houses)	
3.49 Please add any additional information that you feel is unusual / relevant / concerning			



Child Sexual Exploitation (CSE) Risk Assessment Tool (Page 7 of 7)

Actions already taken or to be taken (with timescale)	Done (date) / To be done (timescale) and any appropriate detail
Discuss with line manager	
Initiate CAF	
Contact local CSE Co-ordinator	
Refer to Children's Social Care	
Discuss with Police regarding investigation	
Call strategy meeting / CIN meeting/CP case conference	
Contact/referral to specialist voluntary sector service	
Any other actions, treatment or monitoring arrangements	
Details of known suspects:	
Are there any risks that cannot be disclosed due to confidentiality/data protection? (Consider 5x5x5)	
Is there a risk present to others, i.e. other child/vulnerable adult?	
What immediate risk does the young person face?	
For CSE Team Use: Initial Summary of Risk Level and response needed (inc. check of other systems)	Refer to Social Care Immediate strategy meeting Refer to local multi-agency meeting Support agency to complete CAF / Signposting

Appendix 2.3: West Midlands Police Information Sharing



INFORMATION REPORT (Page 1 of 2)

Date/time of report.....

Details of professional submitting:

Name				
Post/Job Title				
Agency				
Contact details				
Witnessed incident		Professional	Member of the public	

If the information was supplied by someone other than yourself, on a scale of 1 – 5 how reliable do you think they are?

(5 = always reliable and 1 = unreliable).....

How accurate if the information on a scale of 1 – 5?

(1 = known to be true without doubt to 5 suspected to be false).....

If you are not able to say re above two questions please state “don’t know” rather than guess

If the information is from a 3rd party would they be willing to engage with the police?

Yes No

Does this information involve a licensed premise (e.g. newsagents, takeaways, pubs, off licences, etc)?

If yes, please provide trading name and address of premise.....

.....

.....

Please provide clear & accurate information: Include as much detail as possible re names/descriptions/nicknames/vehicle details/addresses etc: if providing details of specific incidents please put a date and time these were witnessed.

If you have access to secure email please forward this report to West Midlands Police Intelligence department on fib@west-midlands.pnn.police.uk or contact the MFH officer in your area.

APPENDIX 3

SANDWELL CSE ACTION PLAN						
Activity	Desired Outcome	Due Date	Lead	Outcome Measure	Progress	RAG
1 Review the MASE meetings	1) Align MASE with other Multi Agency meetings 2) Ensure all CSE cases are supported a co-ordinated single plan	October 2015	Mel Barnett	MASE meetings minutes held on ICS/ CSE workspace/ECAF CSE evidently reflected into other meeting minutes and plans		
2 All children aged 10 to 17 who are referred to a CSC or have a lead professional/ allocated worker are screened for CSE	All 10-17 year olds to have screening tool at referral stage completed by referrer or by the allocated worker where cases are not referred via CSC	January 2015	Carol Singleton Mel Barnett Charlie Spencer	CSE screening tools held on ICS/ CSE workspace, MASH database, YOS case management systems. Completion rates reported		

Activity	Desired Outcome	Due Date	Lead	Outcome Measure	Progress	RAG
3 NWG assessments are completed on identified CSE cases that are subject to MASE meetings	<p>1)NWG risk assessment completed on all cases subject to MASE to inform support plans and disruption activity</p> <p>2)All NWG assessments updated at new 3 monthly MASE meetings</p> <p>3) NWG assessment to inform statutory meetings for young people, including core group, LAC reviews CP conferences, TAF meeting ETC</p> <p>4)NWG risk assessments completed by multi agency partnership with support , as appropriate, from CSE team</p>	October 2015	Benn Nolan	<p>NWG assessments held on CSE workspace and relevant case management systems</p> <p>MASE meeting minutes</p> <p>Updated/ review</p> <p>NWG assessments are uploaded to CSE workspace, and other case managements system with clear review dates evidenced</p> <p>Partners aware of risk identification evidenced through completed NWG tool</p>		

Activity	Desired Outcome	Due Date	Lead	Outcome Measure	Progress	RAG
4 Finalise and launch CSE process and guidance to ensure all CSE cases are managed consistently	1)All CSE Cases are referred to CSE Team Via MASH 2)All open cases to EH and/or CSC follow agreed internal process to facilitate CSE team input	November 2015	Charlie Spencer Mel Barnett	Percentage of cases that have evidently followed correct procedure(via thematic audit) CSE team will be aware of all amber and red CSE cases		
5 Develop duty worker rota for CSE team to facilitate consultation with practitioners/partners	1)Partners obtain advice and guidance to assist in clarifying what meets threshold for MARF and/ or other advice/support 2)Duty worker to be part of MASH meetings to discuss children where there appear to be CSE concerns	September 2015	Benn Nolan	Duty rota Published Records of contacts to CSE duty desk for advice and guidance CSE team attendance at MASH discussion to inform decision making		

Activity	Desired Outcome	Due Date	Lead	Outcome Measure	Progress	RAG
6 Participate in See Me Hear me pilot	1)Establish Sandwell project board 2)Brief key partners on framework to promote consistent approach to CSE across Sandwell 3) initiate pilot programme 4)SSCB Training sub group to co-ordinate delivery of See me Hear me training	To start October 2015	Matthew Sampson/All Partners	Clear project Board terms of reference agreed Schedule of Project board meetings established See me hear me pilot programme launched, supported by clear evaluative framework See me hear me training programme launched, rate of attendees and agencies attending		
7 SSCB QA group to undertake CSE multi agency audit looking at multi agency intervention	Clarity of all partners input into CSE and the effectiveness of this in minimising risk	Feb 2016	Linda Joyce	Schedule of audits to include CSE Audit report to SSCB/ Children's Services Identified learning and actions taken in response		

Activity	Desired Outcome	Due Date	Lead	Outcome Measure	Progress	RAG
8 SSCB and SMBC to jointly commission assurance report	To ascertain status of current processes and arrangements and inform future developments	Sept 2015	John Harris/ Matthew Sampson	Assurance report published. Successes, challenges, learning and recommendations inform service improvements and reported back to strategic CSE group and SSCB		
9 Establish Missing Operational Group (MOG)	Multi agency group to provide governance and monitoring for all missing episodes, including missing from home, care, education and linked to CSE	Sept 2015	Chris Ward	Scheduled of MOG meetings established Terms of reference agreed Clear governance established Minutes of meetings and record of actions		

Activity	Desired Outcome	Due Date	Lead	Outcome Measure	Progress	RAG
10 Review the role of CSE coordinator	<p>Co-ordinator role is clarified to meet the partnership requirements.</p> <p>The links between victims, perpetrators, locations, trends are routinely reported in partnership with WMP</p>	Sept 2015	Charlie Spencer/ Raj Bector	<p>New JD drafted, evaluated and role advertised.</p> <p>Permanent co-ordinator recruited ion new JD</p>		
11a Develop specific CSE Workforce Development plan to equip all relevant staff to respond effectively to CSE.	<p>Increase awareness of CSE in Sandwell so that all practitioners are better equipped to respond/ intervene to support victims and inform prosecutions.</p>	November 2015	Matthew Sampson/ CMOG	<p>Practitioners across partnership agencies receive the appropriate training in accordance with their roles and responsibilities</p> <p>Training evaluations evidence</p> <p>practitioners are better equipped to recognise and respond to CSE in all settings</p>		
11b Launch new CSE strategy and approach to CSE in Sandwell	All partners / practitioners are fully briefed on CSE strategy and Sandwell response to CSE					

Activity	Desired Outcome	Due Date	Lead	Outcome Measure	Progress	RAG
12 Implement CSE /missing workspace in early help system	<p>1)Establish single view and location for recording of all CSE cases in Sandwell</p> <p>2)Improved reporting capability of risks, outcomes, plans, intelligence, cases numbers</p> <p>3) greater access to information across partnership</p> <p>4) Children, where CSE is a concern are routinely flagged to promote joined up working across partnership by highlighting the risk of CSE.</p>	September 2015	Mel Barnett/ Benn Nolan	<p>All CSE cases are migrated to new CSE workspace</p> <p>All new CSE cases are recorded and managed via CSE workspace</p> <p>Regular reports are generated by CSE workspace in accordance with performance framework</p>		

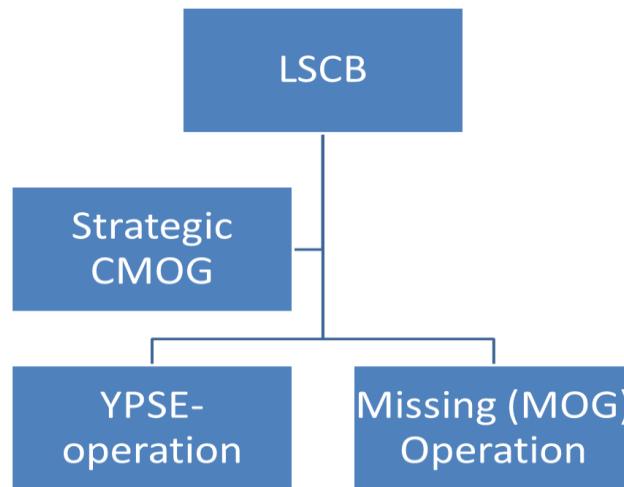
Activity	Desired Outcome	Due Date	Lead	Outcome Measure	Progress	RAG
13 Review of CSE capacity and resources	Identify current capacity, partnership shortfalls and next steps	December 2015	Mel Barnett	Appropriate level of capacity in place to respond to the needs of children at risk of or who are being sexually exploited Services Partnership input to meet gaps in service provision/ framework		
14 Recruit PMHCW in CSE team	Enhance capacity within service to better meet the emotional health and wellbeing needs of victims or children at risk of CSE	March 2016	CCG/ Matthew Sampson	Reduction in recorded self-harm for victims of CSE Emotional health and wellbeing needs are addressed and recoding into plans		
15 Implement the use of the strengths and difficulties questionnaire for all amber and red CSE	1)identification of emotional wellbeing of all children at risk of CSE 2)information for PMHCW to develop intervention/ support 3)To reinforce strength based interventions for young people	March 2016	CCG/SSCB/Strategic CMOG chair	All young people identified as red/amber will have S&D questionnaire offered Plans for young people will reflect S&D questionnaire information		

Activity	Desired Outcome	Due Date	Lead	Outcome Measure	Progress	RAG
16 SSCB to raise community awareness of CSE	Increase awareness of risk factors and areas of concern in the community 2)Engage local community in prevention	March 2016	SSCB	Community feedback Community awareness of CSE in Sandwell is improved Increased intelligence will be available to support prosecution/pursue and prevention		
17 Continued work with regional partners	Ensure cross border working minimising risk to Sandwell YP	Ongoing	Charlie Spencer/ Mel Barnett, Natalie Shand	Cross border working arranged defined and agreed. Level of information exchange between authorities to safeguard victims or inform Police operations Annual report to SSCB on CSE		
18 The CSE service should put in place an effective performance management system <i>(Recommendation 3 threshold review)</i>	Agreed performance framework facilitates regular reporting to SSCB, evidencing impact of partnership response to CSE in Sandwell	October 2015	Matthew Sampson/ Strategic CMOG	Regular performance reports are tabled at relevant meetings and inform service improvements		

Activity	Desired Outcome	Due Date	Lead	Outcome Measure	Progress	RAG
19 The CSE service should be strengthened with staff from education and training and career service backgrounds <i>(Recommendation 4 threshold review)</i>	Children/ Young person's education is fully integrated into assessment and planning	Dec 15	Chris Ward	Education/ Connexions PA to become part of CSE team.(co-located or virtual)		
20 Review impact of CSE strategy	1)The CSE strategy supports ongoing development of CSE interventions and awareness across Sandwell. 2)the strategy reflects changing circumstances and knowledge of CSE in Sandwell	Feb 2016	SSCB	New strategy reflecting current situation		

APPENDIX 4

SSCB GOVERNANCE FRAMEWORK FOR MULTI-AGENCY CSE STRATEGY



Strategic CMOG (children missing organisational group)

- Provide strategic oversight for CSE and ‘missing’ work across Sandwell.
- To be the accountable body for the Y.P.S.E and M.O.G
- To consolidate partnership resources at a senior level to address CSE and missing issues

Young person’s sexual exploitation operational group (YPSE)

- To be reassured through feedback from Coordinator that plans and actions protect children identified as being at risk of CSE or who go missing from home or care, where that episode is linked to CSE
- Direct intelligence collection and/or disruptive actions with regard to individuals who are believed to be harming children through sexual exploitation activities.
- Direct safeguarding and disruptive activities in locations considered vulnerable to sexual exploitation activities.

Children’s missing Operational Group (MOG)

- MOG will also discuss young people identified who may be at particular risk. Such young people will be identified in advance of the meeting with agreement of the Chair/Co-Chair.
- Maintain and overview of children who go Missing from all settings, including Home, Care, and education in order to ensure we have a holistic partnership response in place for all missing episodes