Surrey Safeguarding Children Board

Multi-agency Operating Protocol for safeguarding children who are at risk of abuse through child sexual exploitation

April 2016
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1. Introduction

1.1 Statement of intent

1.1.1 Sexual exploitation of children is child abuse and child abuse is a crime. Tackling child sexual exploitation is one of the key priorities for the Surrey Safeguarding Children Board (SSCB). Such exploitation can have serious long term impact on every aspect of the child or young person’s life, as well as the lives of their families.

1.1.2 It is our collective multi-agency responsibility to identify those children and young people at risk of exploitation, to protect them and safeguard them from further risk of harm. We shall also prevent children becoming victims of this form of abuse and reassure our communities that we can perform our duties effectively.

1.1.3 The CSE Strategy Group has agreed a detailed work plan to support delivery of the CSE strategy structured around the four themes of the National Working Group Action Plan of:

- Prepare – By providing strong leadership and effective systems while working with partners to tackle CSE
- Prevent – By raising awareness of CSE among young people, parents, carers and potential perpetrators, to prevent incidents or repeat incidents of CSE.
- Protect – By safeguarding vulnerable young people and supporting victims and those professionals who seek to reduce instances of Child Sexual Exploitation
- Pursue – By disrupting, arresting and prosecuting Child Sexual Exploitation offenders, ensuring a victim centred approach at all times

1.1.4 It is our intention to improve the lives of children living in Surrey. This Protocol is designed to implement the Surrey Safeguarding Children Board ‘Safeguarding Children from Child Exploitation’ Strategy.

1.2 Definition and scope

1.2.1 The sexual exploitation of children and young people under 18 involves exploitative situations, contexts and relationships where young people receive ‘something’ (e.g. food, accommodation, drugs, alcohol, cigarettes, affection, gifts, money) as a result of engaging in sexual activities. This can occur through the use of technology without the child’s immediate recognition, for example the persuasion to post sexual images on the internet/mobile phones with no 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 or other resources.

*National Working Group for sexually exploited children and young people, 2008*
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.

1.2.2 In recognising child sexual exploitation as child abuse this protocol identifies that children must be protected, and enabled to protect themselves, in all aspects of their lives and relationships. The sexual exploitation of children and young people crosses boundaries of gender, disability, class, culture, community groups, disability, social class, and gender.

1.2.3 A common feature of CSE is that the child / young person does not recognise the coercive nature of the relationship and does not see themselves as a victim of exploitation (ACPO 2013)

1.3 Protocol

1.3.1 This protocol sets out a clear framework for supporting children who are vulnerable to exploitation.

1.3.2 This protocol is issued under the auspices of Working Together to Safeguard Children 2015 (Children Act 1989 & Children Act 2004) and should be read in conjunction with the 2009 supplementary guidance from the Department for Children, Schools & Families (DCSF) – ‘Safeguarding Children and Young People from Sexual Exploitation’ ([http://www.education.gov.uk](http://www.education.gov.uk)).

1.3.3 Children who go missing are particularly vulnerable to sexual exploitation. The Surrey Safeguarding Children Board (SSCB) procedure for Children Missing from Home and Care outlines the county’s response to children who go missing.

1.3.4 Professionals should consult the SSCB Child Protection Procedures for concerns, decisions and actions related to, but not covered, in this protocol.

2. Principles

2.1.1 A child-centred approach. Action should be focussed on the child’s needs, including consideration of children with particular needs or sensitivities, and the fact that children do not always acknowledge what may be an exploitative or abusive situation.

2.1.2 A proactive approach. This should be focussed on prevention, early identification and intervention as well as disrupting activity and prosecuting perpetrators.

2.1.3 Parenting, family life, and services. Taking account of family circumstances in deciding how best to safeguard and promote the welfare of children and young people.
2.1.4 **The rights of children and young people.** Children and young people are entitled to be safeguarded from sexual exploitation just as agencies have duties in respect of safeguarding and promoting welfare.

2.1.5 **Responsibility for criminal acts.** Sexual exploitation of children and young people should not be regarded as criminal behaviour on the part of the child or young person, but as child sexual abuse. The responsibility for the sexual exploitation of children lies with the abuser and the focus of police investigations should be on those who coerce, exploit and abuse children and young people.

2.1.6 **An integrated approach.** Working Together to Safeguard Children 2010 (now archived) sets out a tiered approach to safeguarding: universal, targeted and responsive. Within this, sexual exploitation requires a three-pronged approach tackling prevention, protection and prosecution.

2.1.7 **A shared responsibility.** The need for effective joint working between different agencies and professionals underpinned by a strong commitment from managers, a shared understanding of the problem of sexual exploitation and effective coordination by the Surrey Safeguarding Children Board.

3. **Vulnerability factors and risk indicators**

3.1 **Vulnerability factors to sexual exploitation**

3.1.1 Children/young people are more vulnerable to abuse through sexual exploitation if they have existing vulnerabilities:
- Already known to Children’s Social Care/CP Plan/LAC, now or previously
- Physical or learning disability or mental health problems
- Child is receiving support or services from any other Agency, such as drug & alcohol or mental health services
- History of/current family domestic abuse (including risk of forced marriage/risk of honour based violence/familial child sexual abuse)
- History of/current physical/emotional/sexual abuse/neglect by Parent/Carer/Family member
- Living in a chaotic or dysfunctional household
- Unsuitable or inappropriate accommodation (Inc. street homeless, staying with inappropriate adults/hostel/B&B)
- Poverty or deprivation
- Migrant/refugee/asylum Seeker/trafficked child
- History of / current substance misuse in family
- Involvement with the Youth Justice system
- Recent bereavement or loss
- Disconnecting from support networks ie. family/friends
- Unsure about sexuality or unable to disclose to their families/friends
- Gang association
- Breakdown of Family relationships/lack of positive relationship with a protective/nurturing adult
Low self-esteem or history of being bullied or of bullying
Family history of prostitution or exploitation

Surrey Children’s Service Risk Assessment tool 2015

3.2 Risk indicators

3.2.1 Identification of Risk and Possible Indicators
The factors below are recognised as indicators linked to sexual exploitation. It is not an exhaustive list and each indicator is not in itself proof of involvement. Concerns should increase the more indicators that are present.

Risk Indicators could be described as:
• Repeat missing episodes
• Contact with known perpetrators
• Established drug and alcohol problems
• Experience of violence
• Intimidation and fear
• Victim of abusive relationships
• Association with peers also at risk of CSE
• Frequenting known CSE hotspot
• Recurrent STI’s
• Repeat Pregnancy / Unplanned
• Self Harm / Suicide attempts

SSCB CSE Risk Screening tool 2015

4. Initial professional response

4.1 A CSE Screening tool (See Appendix 1) has been adopted to help professionals and workers from both statutory and voluntary agencies consider the risk that a child is at from sexual exploitation. Children and young people engage in sexual activity and not every circumstance will be one of exploitation. It is therefore important that an informed assessment is made of the individual situation of the child or young person.

4.2 Professionals in all agencies should be alert to the possibility that a child they are in contact with may be being sexually exploited. The professional may already have concerns about the child e.g. that s/he is missing school, frequently missing from home, misusing substances, is depressed or self-harming etc.

4.3 Interventions to prevent sexual exploitation and support children to recover a healthy lifestyle are more likely to be successful if a child who is at risk can be identified and information about concerns shared within a multi-agency support network as early as possible.

4.4 Professionals are often in a position of having to develop the child’s trust, or having built it up are concerned about breaking that trust through the sharing of confidential information with other agencies. These issues should be discussed
with the agency’s designated child protection officers, and efforts made to share information as soon as possible.

4.5 Sharing information about the child with other agencies may reveal that the child is at a different level of risk to that initially perceived. Therefore the professional should discuss their concerns with their agency’s nominated safeguarding children adviser and use the CSE Screening Tool to make a preliminary assessment of the risk of harm to the child.

4.6 If a risk is identified, then a referral should then be made to Surrey Children’s Service with full details of the young person and significant others provided. If the child is considered to be at immediate risk, Surrey Police should be contacted to secure the child’s immediate protection. See flowchart at Appendix 2.

5. **Multi-agency intervention**

5.1 All staff (including practitioners, middle and senior managers) in all agencies should, as a result of training, be familiar with the vulnerability and warning signs/risk indicators, the CSE Flowchart: Child Sexual Exploitation Flowchart (For Use By All Agencies) (Appendix 2) and the Multi-agency CSE Screening Tool (Appendix 1) which can be viewed here.

Each agency should identify a lead officer, practitioner or manager for CSE who should have, or develop, a level of expertise. They should be able to advise within their agency on identifying and referring a child at risk and how their agency can contribute to risk reduction work and a safeguarding plan.

Professionals should refer to the Surrey Safeguarding Children Board procedures.

5.2 **List of all children assessed to be at risk of CSE**

Surrey Children’s Service maintains a list of all children in Surrey considered to be at risk of CSE. The list is compiled jointly with colleagues from the Police and is reported weekly. Children on the list are risk rated and may be discussed at the monthly Area MAECC (Missing & Exploited Children’s Conference) meetings.

5.3 **MAECC (Missing And Exploited Children’s Conference)**

Area MAECC meetings are held monthly within each area and have the following representation:

- Area Head of Children’s Services (Chair)
- Area Education Officer
- Area Manager YSS
- Care Services Manager CS
- Detective Chief Inspector
- Named Nurse Safeguarding Children Community Providers
The objectives of the Area MAECC meetings are:

- To reduce the risk to children.
- To maintain an area list of children identified as at risk of CSE and that level of risk ensuring that all new young people are identified and those no longer deemed to be at risk are removed from the area list.
- To provide a forum for the sharing of information and intelligence by all partner agencies
- To identify those children within the area that are at the highest level of risk and quality assure and control the plans in place are sufficient to safeguard them from harm and promote their wellbeing.
- To identify those children who go missing from care most frequently.
- To refer those children at the highest risk to the MAECC oversight group for quality assurance
- To ensure that where appropriate disruptive action is being taken when perpetrators have been identified.
- To use the data and information shared by partner agencies to identify patterns and areas of particular concern
- To develop a local picture of intelligence in relation to CSE that can be communicated to the oversight group and be used to inform strategic planning.
- To agree key messages to be disseminated to staff, including schools; identify areas of training and plan how this is to be delivered.
- To review management plan for those children referred to MAECC

A MAECC Oversight Group meets monthly and considers the work and decision-making of the Area MAECC meetings.

5.4 Each area has a weekly MAECC Triage Panel comprising front line managers from partner agencies. These meetings review all new CSE referrals of both children deemed at risk and perpetrators. If the risk is deemed high, or medium these cases will be referred to the Area MAECC. See Appendix 3.

5.5 **Missing Children**

Data regarding missing children is compiled from Police and Surrey Children’s Service information and is reported on monthly to senior managers with the Surrey Children’s Services, the Surrey Safeguarding Children Board and members of the MAECC Oversight Group.

5.6 **CIAG**
Community Impact Groups (CIAG) and Joint Action Groups (JAG) comprise statutory, social and voluntary agencies working in partnership to tackle crime and disorder across all 11 Surrey boroughs and districts. CIAG are focused on supporting victims and disrupting perpetrators, whilst JAG adopt a place based approach.

CIAG and JAG have both pledged to work closely with MAECC and local policing teams respectively to lend their support to tackling CSE concerns.

CIAG and JAG can provide a range of multi-agency tactical options in support of victim, perpetrator and geographical CSE strategies.

6. **Responsibilities of agencies**

6.1 **All agencies**

6.1.1 Each of the organisations engaged to co-operate in tackling child sexual exploitation will be expected to agree to implement and adhere to the principles set out within this protocol.

6.1.2 They will also be required to agree to an Information Sharing Protocol and these requirements will extend to any collectively agreed amendments to these documents.

6.1.3 Each organisation will also be asked to nominate a lead professional to provide drive and direction in respect of the response to child sexual exploitation.

6.2 **Surrey Children’s Service**

6.2.1 Surrey Children's Services have the lead responsibility for responding to children and young people at risk of, or abused through sexual exploitation and should act in accordance with their responsibilities under the Children Act 1989.

6.2.2 On their receiving a referral, Surrey Children's Services will consider whether the child is at immediate risk of significant harm, and if so, child protection procedures will apply and a strategy meeting convened.

6.2.3 Following a referral, all Local Authorities have a duty, under Section 17 of the Children Act 1989, to ensure that the needs of all children and young people who are involved in, or are at risk of, being sexually exploited are assessed using the CSE Risk Assessment tool and that appropriate multi-agency engagement and appropriate interventions are undertaken.

6.2.4 Where a child or young person is already allocated, concerns may be raised by another professional or by the child’s social worker. The risk of harm to the child or young person needs to be re-assessed in light of the information relating to CSE and any existing plans amended accordingly.

6.2.5 Where the placement is in another authority, or children from other authorities are involved, that authority's child protection manager (or equivalent) must be
contacted, to agree roles and responsibilities. The placing local authority is required to take overall responsibility for convening the meeting and co-ordinating the response.

6.3 Police

6.3.1 Sections 47 to 51 of the Sexual Offences Act 2003 deal with the exploitation of children, whether through prostitution or pornography. The Act (as amended by the Serious Crime Act 2015) creates a number of offences that apply to both types of exploitation.

6.3.2 The priority for the police is the investigation, disruption and prosecution of offenders who have been involved in abusing the child through Sexual Exploitation. This role should be undertaken in accordance with the principle of multi-agency cooperation to safeguard children.

6.3.3 Police will also work with partners, to provide support and engagement to identified victims or those at risk of sexual exploitation, with a view to reducing the risk to them.

6.3.4 The initial police response to the discovery of a child who is being, or is at immediate risk of being, abused through sexual exploitation, must be to remove them from the source of harm and to secure any evidence of an offence. This action must be followed by a referral to Surrey Children’s Services so that the assessment and intervention processes can commence. (This will be via a Child at Risk form, also known as a 39/24, but in urgent cases a call to Surrey Children’s Services / Emergency Duty Team will be necessary).

6.3.5 If there are suspicions that a child is a victim of sexual exploitation, but there is no immediate or direct evidence, the police officer noting the concern must submit a Child at Risk referral via the MASH. The MASH will carry out initial research and share the information with Children’s Social care. If a crime has been committed then the matter will be allocated to an appropriate officer to investigate.

6.3.6 Criminal action in respect of a child victim will be avoided wherever possible. The Youth Intervention Team will in the first instance provide alternative options of disposal, to all children who have admitted an offence (and the offence is not Indictable only). This team has been working effectively to reduce offending and arrests of children. Any decision to take criminal action against a victim of Sexual Exploitation should only follow a multi-agency discussion and when all other options have been explored.

6.3.7 All interviews with the child as an actual or potential victim should be conducted, as far as possible, in accordance with the Achieving Best Evidence interview guidelines.

6.3.8 Where a number of children are suspected of being exploited by an individual or group of individuals then the county’s complex abuse policy should be followed.
6.3.9 The police will work with partners in order to identify Locations (Hotspots) where Child Sexual Exploitation is occurring or likely to occur and they will assist with taking the relevant steps to disrupt and prevent further abuse occurring at that place.

6.4 Education Services

Staff in schools, further education colleges and other education establishments are uniquely placed to recognise and refer children who are abused through CSE. They are also in a position to support children to reduce their vulnerability to and risk of sexual exploitation and to support abused children to recover.

6.4.1 Schools

School staff should be alert and competent to identify and act upon concerns that a child is vulnerable to, at risk of, or experiencing abuse through CSE.

The school’s Personal and Social Education (PSE) curriculum provides clear opportunities for schools to teach about all aspects of relationships. Specifically learners should be given opportunities to understand the features of safe and potentially abusive relationships and the risks involved in sexual activity, including potential sexual exploitation. By exploring the features of safe and healthy relationships, schools can help children and young people to develop the skills to negotiate behaviour in personal relationships, identify potential risks, stay safe and seek help if needed. PSE provides a sound platform through which to deliver basic safeguarding information, to explore ideas around ‘healthy’ sexual relationships. This also needs to include opportunities for children and young people to understand the risks involved in staying out late and going missing from school, home or care.

Staff should be aware of the importance of reporting any concerns related to children and young people who go missing during the school day, reporting information that perpetrators may be targeting an educational facility or other relevant information. This includes responding to concerns related to a child in local authority care.

Education services should identify a designated lead officer for CSE and/or a designated teacher who should monitor information to identify when more than one child in the school or community may be being targeted for sexual exploitation. These lead individuals should have, or develop, a level of expertise in relation to CSE. They should be able to advise within their school or service on identifying and referring a child at risk and how their agency can contribute to risk reduction work and a safeguarding plan.

6.4.2 Education Welfare Officers and Other Pastoral Staff
In their assessment and ongoing work with young people and their families and liaison with school staff, can identify children who are being, or are at risk of being, abused through sexual exploitation. Where the young person is already known to an Education Welfare Officer, they would also be expected to attend the strategy meeting where appropriate and contribute to the Family Action Plan or child protection plan.

Any concerns that a child is at risk of sexual exploitation should be raised with the designated teacher for CSE, who should make a referral to Surrey Children’s Services in line with the school’s child protection policy.

The designated CSE lead will be expected to attend the strategy meeting where appropriate in relation to individual children or young people.

6.5 Services for Young People

Within Surrey the council’s Community Youth Work Service and Youth Support Services are key agencies with expertise and a significant role in identifying, assessing and responding to child sexual exploitation.

6.5.1 Youth Support Service

The Youth Support Service is the county’s specialist adolescent service and offers an integrated response to many of the county’s most vulnerable teenagers, discharging a number of the local authority’s statutory duties in the social care, health, education and justice arenas, including case managing the county’s older Children in Need and fulfilling the functions of the YOT. As such the service works with young people who may either exploit others or be exploited, or indeed, may fall into both categories.

All YSS staff have been trained in recognising and working with young people at risk of CSE and wider healthy / unhealthy adolescent sex and relationships. The service delivers a range of programmes for young people focusing on CSE, and healthy relationships. It also delivers Relationships and Sex Education training for the workforce alongside colleagues in other parts of Services for Young People. In addition, the YSS has a number of staff trained to assess and intervene with YP who (may) display harmful sexual behaviours (including via AIM2 assessments and GLM interventions) and thus works with others to respond to those YP who may exploit others. Risk assessment is embedded and overseen by consultant social work practitioners.

In particular, the YSS has developed and regularly runs "Sliding Doors" which is an impactful group work offer to YP at risk of CSE and/or unhealthy relationships.

6.5.2 Community Youth Work Service

The Community Youth Work Service (CYWS) provides open access provision for young people through our youth centres and projects across the county. Our staff have been trained in Relationships and Sex Education (RSE) and CSE and
understand the potential signs of concern. For many young people, their local youth worker is the one adult that they feel comfortable with talking through issues and as such the CYWS provides a critical point of early intervention for young people at risk of CSE. We also provide ongoing support to young people who are experiencing or have been victims of CSE. The open access and community facing role of the service means that staff are uniquely placed to gather intelligence in respect of potential perpetrators, emerging exploitative situations, risky behaviours of young people and locations of concern that can support wider interventions.

In addition to this the Community Youth Work Service also provides a wide range of learning opportunities for young people through the youth work curriculum that tackles CSE under the banner of healthy relationships, RSE and the safe use of the internet and the approach taken to supporting young people’s resilience, self-esteem and self-confidence. Trained peer educators supported by the CYWS work with schools to deliver sessions focusing on CSE in a way that is more accessible and relevant to young people. This has been proven to be highly effective in educating young people in CSE.

6.6 Health Services

6.6.1 As most health provision is provided universally, health professionals may often be the first to be aware that a child may be vulnerable to, at risk of or abused through CSE. These children may be in contact with a range of services, including sexual health services, advice and counselling, school nursing, CAMHS, substance misuse services and Emergency Department services General Practice, Maternity and Termination of Pregnancy Services

6.6.2 Health professionals should be alert and competent to identify and act upon concerns that a child is vulnerable to, at risk of, or experiencing abuse through CSE.

6.6.3 Health professionals such as school health nurses, practitioners in young persons’ advisory/sexual health clinics and GPs have a crucial role in promoting the young person’s health which includes identification of immediate and ongoing health needs (including sexual health needs and emotional needs). As a universal service, health is well placed to offer support, counselling and information to enable young people to understand the risks and develop strategies for staying safe.

6.6.4 A CSE Champion should be identified in each agency. These lead individuals should have, or develop, a level of expertise in relation to CSE. They should be able to advise within their service on identifying and referring a child at risk and how their agency can contribute to risk reduction work and a safeguarding plan. They should also be invited to attend multi-agency CSE MAECC and contribute to Pre MAECC Meetings as appropriate.
6.6.5 The Clinical Commissioning Groups (CCGs) should identify a designated lead officer for CSE.

6.6.6 Any health professional with concerns that a child is at risk of or at risk of CSE should complete a CSE Screening Tool and make a referral to Surrey Children’s Services in line with their agency’s safeguarding procedures.

6.6.7 Health professionals should offer and/or continue to provide health education, counselling, sexual health and medical intervention to the child as an appropriate part of early intervention.

6.6.8 The Solace Centre, Sexual Assault Referral Centre (SARC) provides an open access, one stop shop to help victims of rape and sexual assault working in partnership with the multiagency team. The child ISVA (independent sexual violence advisor) service is available through the SARC.

6.7 Voluntary and Community Groups including Faith-based organisations

6.7.1 Government guidelines on young people involved in sexual exploitation emphasise the importance of a multi-agency approach, which includes voluntary and community groups / agencies: ‘The child may seek to avoid statutory services. They are more likely to respond to informal contact, for example, with health outreach workers, or local non-statutory agencies.

6.7.2 There is a wide range of specialist voluntary and community agencies / groups who may be well placed to identify children who are at risk of or are experiencing abuse through sexual exploitation; because:
- Voluntary and community sector agencies often have a close relationship with their local communities;
- Voluntary and community sector agencies can develop relationships of trust with the children and maintain a link to the child if they become ‘lost’ to statutory services;
- Outreach agencies are often the first point of contact for children in risk situations;

6.7.3 It is essential that voluntary and community groups / agencies operate as multi-agency network partners in order to provide children with access to the widest possible range of intervention and support services.

6.7.4 Professionals and volunteers in voluntary and community groups / agencies should be alert and competent to identify and act upon concerns that a child is at risk of or experiencing abuse through sexual exploitation. They are well placed to receive and verify information about sexual abuse and exploitation of children in the local community.

6.7.5 Where a professional or volunteer in a voluntary or community group / agency has immediate concerns (moderate or high risk using the Risk Assessment
Framework above) they should make a referral to social care or the police. Where the concerns are not immediate or are unclear, staff should discuss the case with their agency’s nominated safeguarding children adviser.

6.8 Probation

6.8.1 The National Probation Service (NPS) does not supervise any cases aged under 18 and so would not work directly with victims of Child Sexual Exploitation (CSE). However, convicted CSE perpetrators would be supervised by the NPS, either in custody or in the community, and other cases on the NPS caseload may be as yet unconvicted CSE perpetrators or living with or have parental responsibility for potential victims or perpetrators.

6.8.2 All NPS staff have attended Surrey Safeguarding Children Board training levels 1 to 3 and all practitioners have attended additional safeguarding training and so they are fully aware of safeguarding issues and their responsibilities for identifying them and making appropriate referrals.

6.8.3 In terms of supervising CSE perpetrators, there are a large number of child sex offenders on the NPS caseload and some of these cases would fit the criteria for CSE. There is, as yet, no specifically developed intervention programme for CSE perpetrators, but they would be considered for referral to the current sex offender treatment programmes that are delivered by NPS. Regardless of whether they attend a programme or not, they will be subject to rigorous risk management procedures that are undertaken in collaboration with Surrey Police’s ViSOR (Violent and Sex Offender Register) team, with whom we are co-located.

6.8.4 In terms of cases suspected of having committed CSE offences or at risk of doing so, Surrey Police have provided NPS management with a list of all such suspected cases and these individuals are monitored. Practitioners are very familiar with the issues and behaviours that would raise concern and there are clear risk management processes, delivered in collaboration with Surrey Police, to manage such cases as and when they arise.
SSCB has developed a screening tool which all professional groups will use when they have concerns. Following referral a CSE assessment, using the Surrey Children’s Services tool, may then be undertaken by a Social Worker.

This form allows you to explore some of the vulnerabilities and indicators present in a child 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 child and about what to do with the information you have.

If you suspect anyone is in immediate danger, call the Police on 999. If a child is at risk of significant harm, including from CSE, refer immediately to Surrey Children’s Service.

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<thead>
<tr>
<th>GENERAL DETAILS</th>
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<tbody>
<tr>
<td>Name and role of worker completing assessment</td>
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<tr>
<td>Agency and contact details</td>
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<tr>
<td>Child’s name/alias/known as</td>
</tr>
<tr>
<td>Local authority currently living in</td>
</tr>
<tr>
<td>Language(s) spoken</td>
</tr>
<tr>
<td>Age/Date of Birth</td>
</tr>
<tr>
<td>Gender</td>
</tr>
<tr>
<td>Details of known suspects</td>
</tr>
<tr>
<td>Details of friend/associates</td>
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<tr>
<td>Date of completion</td>
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<table>
<thead>
<tr>
<th>SIGNIFICANT INCIDENTS</th>
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<tbody>
<tr>
<td>If any of these are known to have happened and you are not sure if Police or Social Care are aware you must refer to Surrey Children’s Service or direct to the Police in emergencies. (Tick all that apply)</td>
</tr>
<tr>
<td>Child under 13 subject to penetrative sex</td>
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<tr>
<td>Entering/leaving vehicles with unknown adults</td>
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<tr>
<td>Child meeting different adults and exchanging or ‘selling’ sexual activity, including on the internet</td>
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<tr>
<td>Receiving rewards or money or goods for introducing peers to CSE adults</td>
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<tr>
<td>Disclosure of sexual/physical assault followed by withdrawal of allegation</td>
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<tr>
<td>Knowledge of towns or cities child/young person has no previous connection with</td>
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<tr>
<td>Being taken to clubs or hotels and subjected to sexual activity</td>
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<tr>
<td>Abduction or forced imprisonment</td>
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<tr>
<td>Association with taxi firms/takeaway owners (night-time economy)</td>
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<tr>
<td>Being taken to brothels/ massage parlours</td>
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<tr>
<td>Seen in or known to frequent CSE hotspots (certain flats, recruiting areas, cars or houses)</td>
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</tbody>
</table>
**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 the next section. 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.** (Tick all that apply)

<table>
<thead>
<tr>
<th>Vulnerability</th>
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<tbody>
<tr>
<td>Migrant/refugee/asylum seeker/trafficked status through National Referral Mechanism (NRM)</td>
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<tr>
<td>Known to Children’s Social Care/CP Plan/LAC, now or previously</td>
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<tr>
<td>Physical/learning disabilities/communication disorders</td>
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<tr>
<td>Involvement with Youth Justice</td>
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<tr>
<td>Is the child receiving support or services from any other agency, such as drug/alcohol or mental health services?</td>
</tr>
<tr>
<td>Has sexual exploitation previously been identified as a specific issue for this child?</td>
</tr>
<tr>
<td>Neglect by parent/carer/family member</td>
</tr>
<tr>
<td>History of/current domestic abuse (including risk of forced marriage/honour based violence/familial child sexual abuse)</td>
</tr>
<tr>
<td>Physical/emotional/sexual abuse by parent/carer/family member</td>
</tr>
<tr>
<td>History of/current substance misuse in family</td>
</tr>
<tr>
<td>Poverty or deprivation</td>
</tr>
<tr>
<td>Family history of exploitation or prostitution</td>
</tr>
<tr>
<td>Unsuitable or inappropriate accommodation (inc. street homelessness, staying with inappropriate adults/hostel/B&amp;B)</td>
</tr>
<tr>
<td>Family history of mental health difficulties impacting parenting</td>
</tr>
<tr>
<td>Breakdown of family relationships</td>
</tr>
<tr>
<td>Family bereavement</td>
</tr>
<tr>
<td>Low self-esteem or history of being bullied or bullying</td>
</tr>
<tr>
<td>Lack of positive relationship with a protective/nurturing adult</td>
</tr>
<tr>
<td>Recent bereavement or loss</td>
</tr>
<tr>
<td>Young carer</td>
</tr>
<tr>
<td>Disconnecting from support networks, i.e. family/friends</td>
</tr>
<tr>
<td>Living in a chaotic or dysfunctional household</td>
</tr>
<tr>
<td>Unsure about sexual orientation or unable to disclose sexual orientation to their families/friends</td>
</tr>
<tr>
<td>Ethnicity (bullying)</td>
</tr>
</tbody>
</table>

**RISK INDICATORS**

Children are groomed and exploited in different ways. Below are some signs that may signify if the child is being groomed for sexual exploitation or actually being sexual exploited. (Tick all that apply)

**Within family/home/relationships**

<table>
<thead>
<tr>
<th>Indication</th>
</tr>
</thead>
<tbody>
<tr>
<td>Change in behaviour – being more secretive/withdrawn/isolated from peers or not mixing with usual friends</td>
</tr>
<tr>
<td>Increasingly disruptive, hostile or physically aggressive at home or school, including use of sexualised language</td>
</tr>
<tr>
<td>Associating/relationship with significantly older men or women who encourage emotional dependence, loyalty and isolation from safe</td>
</tr>
<tr>
<td>Physical or emotional abuse by a boyfriend/girlfriend or controlling adult including use of manipulation, violence and/or threats</td>
</tr>
<tr>
<td>Associating with other sexually exploited children</td>
</tr>
<tr>
<td>Multiple callers (unknown adults/older young people)</td>
</tr>
<tr>
<td>Estranged from family</td>
</tr>
<tr>
<td>Regularly coming home late or going missing from home, care or education for any period of time (whether reported or not)</td>
</tr>
<tr>
<td>Returning home after long intervals appearing well cared for</td>
</tr>
</tbody>
</table>

**Health and mental health**

| Change in physical appearance (new clothes, more/less make-up, weight gain/loss) |
| Increased health/sexual health related problems |
| Marks or scars or physical injuries on the body or face which there are attempts to conceal |
| Expressions of despair (including: depression, mental ill health, self harm, suicidal thoughts/attempts, overdose, eating disorder) |
| Branding (i.e. of gang logos) |
| Repeat/unplanned pregnancy or pregnancies (including ending in termination/miscarriage(s)) |
| Sexually transmitted infections (STIs) and/or repeat tests particularly with negative results |

**Behaviour and experiences**

| Concealed/concerning use of the internet including webcam, on-line gaming (via X-box, PlayStation) chat rooms, etc |
| Exclusion from school or unexplained absences from, or not engaged in school/college/training/work |
| Failing to respond to attempts to keep in touch by workers/carer or recent disengagement |
| Reports of being taken to hotels, nightclubs, takeaways or out of area by unknown adults |
| Sexualised risk-taking, including on internet or mobile phone, such as sexting (sending explicit messages or photos to adults or peers) |
| Young gay/bisexual exploring sexuality in unsupported way |
| Association with gangs/fear of victimisation by gangs |
| Increasing use of drugs or alcohol or misuse of drugs or alcohol |
| Inability to negotiate exit from a gang due to fear/dependency |
| Displaying signs of harassment/unwanted attention |
| Evidence of sexual bullying and/or vulnerability through the internet and/or social networking sites |
| Involved in criminal offending activity (i.e. anti-social behaviour/criminal damage/theft) |
| Unusual association with groups of adults |

**Appearance and possessions**

| Unexplained amounts of money, mobiles, credit, expensive clothing, jewellery or other items/gifts |
| Inappropriate style of dress |
| Having multiple mobile phones, sim cards or use of a phone that causes concern – multiple callers or more texts/pings than usual |
| Possession of hotel keys/cards or keys to unknown premises |
| Is there a risk present to others, i.e. other child/vulnerable adult? |
Please add any additional information that you feel is unusual/relevant/concerning and include any examples

Please comment on the robustness of the concern / data source.

<table>
<thead>
<tr>
<th>Analysis</th>
</tr>
</thead>
<tbody>
<tr>
<td>Professional judgement:</td>
</tr>
<tr>
<td>This form is a guide to professionals and there is no set number of criteria that need to be met, but professionals are encouraged to reflect upon the indicators and vulnerabilities and exercise their own judgement.</td>
</tr>
</tbody>
</table>

What does the above information tell you about this child and the risk to them of CSE?

Using the guidance below, what would you grade the risk to be? (insert RAG rating – see guidance below)

<table>
<thead>
<tr>
<th>Outcome of analysis</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>High</strong></td>
</tr>
<tr>
<td>A child whose sexual exploitation is habitual, often self-denied and where coercion and control is implicit. There are urgent and immediate concerns due to multiple high level risk factors. The child is at risk of significant harm. One or more risks are placing the child in present or impending danger and there are insufficient protective capabilities to mitigate these risks. A multi-agency plan is required to consider, manage and reduce the risks.</td>
</tr>
<tr>
<td>• There are urgent and immediate concerns about Risk.</td>
</tr>
<tr>
<td>• There are multiple risk factors: i.e.</td>
</tr>
<tr>
<td>○ Repeat missing episodes</td>
</tr>
<tr>
<td>○ Contact with known perpetrators</td>
</tr>
<tr>
<td>○ Established drug and alcohol problems</td>
</tr>
<tr>
<td>○ Experience of violence</td>
</tr>
<tr>
<td>○ Intimidation and fear</td>
</tr>
<tr>
<td>○ Victim of abusive relationships</td>
</tr>
<tr>
<td>• Please refer to list on page 1</td>
</tr>
</tbody>
</table>

| **Medium** |
| Evidence that a child is being targeted for opportunistic abuse, through the exchange of sex for drugs, perceived affection, sense of belonging, accommodation (overnight stays), money/goods, etc. The likelihood of coercion and control is significant. One or more risks are placing the child in present or impending danger; however, one or more protective capabilities have been identified that mitigate these risks. Some safety planning may be required, and there is likely to be a need for services to support and address the risks to the child. |
| • There are fewer risk factors, but some of their behaviour puts them at risk, e.g. |
|   ○ Their association with peers also at risk of CSE |
|   ○ They frequent known CSE hotspots |
|   ○ They are truanting and occasionally going missing. |
| • Some protective factors do exist though e.g. they are engaging in school. |

| **Low** |
| A vulnerable child, where some of the CSE specific warning signs have been identified and preventative action (e.g. targeted work |
around health relationships/CSE awareness) should be offered, but the child is unlikely to be exploited unless circumstances change.

- There is no evidence of offences.
- There are less risk indicators / they are showing early signs of risk indicators.
- They are exiting exploitation.
- The concerns appear to relate to normal teenage behaviour

<table>
<thead>
<tr>
<th>Not deemed to be at risk of CSE</th>
</tr>
</thead>
<tbody>
<tr>
<td>There appear to be no risks placing the child in present or impending risk of CSE. There may be other vulnerabilities and/or concerns/sexual behaviours that relate to normal teenage behaviour.</td>
</tr>
</tbody>
</table>

### NEXT STEPS

<table>
<thead>
<tr>
<th>Action(s) already taken or to be taken with timescales:</th>
<th>Done – include summary of action taken and date completed</th>
</tr>
</thead>
<tbody>
<tr>
<td>Discuss with line manager or CSE Champion</td>
<td>To be done – include timescales and any appropriate details</td>
</tr>
<tr>
<td>Refer to Children’s Service</td>
<td></td>
</tr>
<tr>
<td>Discuss with Police</td>
<td></td>
</tr>
<tr>
<td>Any other actions, treatment or monitoring arrangements</td>
<td></td>
</tr>
</tbody>
</table>
Appendix 2

CHILD SEXUAL EXPLOITATION (CSE) FLOWCHART
(FOR USE BY ALL AGENCIES)

Consider causes of concern:
- Follow SSCB Guidance and complete CSE Screening Tool
- Once the screening tool has been fully completed and the concern level identified against the descriptors in the section entitled ‘Outcome of analysis’ the following steps should be taken

Not considered to be a concern:
Individual agencies should keep a copy on their files and advise the organisations safeguarding lead that a screening tool has been completed

In all cases if the screening tool identifies the following
Green / Low Level of Concern
Amber / Medium Level of Concern
Red / High Level of Concern

Contact the local RAIS team or, if out of hours, the Emergency Duty Team to discuss the concern and email the completed CSE Screening Tool with a completed Multiagency Referral Form (MARF) within 24 hours

IS THERE EVIDENCE OF SIGNIFICANT RISK?

NO
Children’s Service may:
- Conduct a Child & Family Assessment; or
- Explore Early Help options

YES

STRATEGY DISCUSSION

Outcomes:
- Referral to multi-agency Area Missing & Exploited Children’s Conference (Area MAECC)
- Section 47 investigation
- Criminal investigation
- Section 17 assessment
- Referral to Early Help
- Provide help to family from universal / targeted services
- Feedback toreferrer on next course of action

| North East Area | Spelthorne, Elmbridge and Epsom & Ewell | 0300 123 1610 | nerefhub@surreycc.gov.uk |
| South East Area | Mole Valley, Reigate & Banstead and Tandridge | 0300 123 1620 | nerefhub@surreycc.gov.uk |
| North West Area | Runnymede, Surrey Heath and Woking | 0300 123 1630 | nwrefhub@surreycc.gov.uk |
| South West Area | Guildford and Waverley | 0300 123 1640 | swrefhub@surreycc.gov.uk |
| Emergency Duty Team | | 01483 517898 | Duty Team Emergency/SSD/SCC@SCC |
Appendix 3

MAECC Triage admin process flowchart

New CSE Cases
Referral to be sent to Area Admin* duty box as soon as CSE concern identified
Include CSE screening tool or Risk Assessment with referral

Misper
Referral to be sent to Area Admin *duty box when a child is a repeat Misper (3 in 90 days) or Deemed at risk of significant harm whilst missing.

Perpetrators
Names and dob of suspected perpetrators to be sent to Area Admin* duty box

List of names to be collated by designated Area Admin:
CSE cases Mispers Perpetrators

Six days prior to Triage Panel date –
List to be sent to Triage Panel members with agency information form

Two days prior to Triage Panel date –
Deadline for return of agency information forms (Appendix A) to Admin duty box

One day prior to Triage Panel date –
Admin to circulate following documents to Triage Panel members:
List of names
Completed agency information forms
CSE screening tool/Risk Assessment

TRIAGE PANEL MEETING HELD
Admin type meeting notes and distribute to Triage Panel members within 24 hours
(cc MAECC duty box and Liz Hennessy)

Admin check level of risk on minutes – add any low level risk to list of names for identified review date (3 month’s time or sooner)

MAECC administrator to upload minutes to LCS within 48 hours of Panel meeting

* Admin Duty Boxes
North East nreadinsocialcare@surreycc.gcsx.gov.uk
South East seeadminsocialcare@surreycc.gcsx.gov.uk
North West nreadinsocialcare@surreycc.gcsx.gov.uk
South West stfranciscentre@surreycc.gcsx.gov.uk
MAECC Duty maecc@surreycc.gcsx.gov.uk

Triage Panel days
North East Wednesday
South East Thursday
North West Thursday
South West Thursday

Triage Panel Quoracy:
CSE / Misper - Children’s Service, Police, YSS
Perpetrators – Police, YSS, Probation
Appendix 4

CSE Governance in Surrey

- Surrey County Council Cabinet
- Police and Crime Commissioner

- Chief Officers Group

- Surrey Safeguarding Children’s Board
- Missing & Exploited Children’s Conference (MAECC) Oversight Group

- SSCB CSE Strategy Group

- NE MAECC
- NW MAECC
- SE MAECC
- SW MAECC

- Area MAECC Triage Panels