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Foreword

Child sexual exploitation is one of the most challenging safeguarding issues faced by society today. It affects boys and girls from all communities and is perpetrated by adults, both male and female, from all communities.

Experience tells us that it is only by parents, professionals and communities working together and by good front-line practice that such abuse can be most successfully tackled. Prevention and Protection is strengthened by early identification of those children and young people at risk of, or involved in, child sexual exploitation, leading to measures to free them from the control of abusers. Abusers and potential abusers must be disrupted and, ultimately, prosecution employed to rid society of all abusers. Unflinching support is required by professionals whose work with sexually abused children requires considerable patience and delicacy of touch.

Doncaster's Professionals' Handbook is an excellent starting point for professionals who require information on what they need to be on the alert for and what to do if they are concerned about a child. It also provides guidance on longer term work.

The key message 'Never Give Up On A Child' is critically important. Sexually exploited children need to build safe and trusting relationships with adults when their experience has been that adults abuse them. This takes time, skill and patience. The child will often test the relationship to extremes and successful professionals are those who stand firm, are tenacious, who listen and who are there for the child. They truly 'never give up' knowing that once a child trusts them enough they will talk about their experiences and allow the professionals to help them. I am pleased to be able to endorse the handbook and look forward to hearing about its impact on practice.

Sheila Taylor MBE

Chief Executive

National Working Group Network for Tackling Child Sexual Exploitation

Introduction

Child Sexual Exploitation is a serious safeguarding issue which affects boy and girls from all parts of the community. It is a form of child abuse and has a major long lasting impact on the lives of children and their families. This Handbook is designed to support all professionals in their work with children and young people involved in, or at risk of child sexual exploitation.

The Handbook is part of Doncaster Safeguarding Children Board's approach to tackling child sexual exploitation which includes our Strategy and Action Plan, Disruption Plan and a range of policies and procedures. Our strategy has four strands - prevention, protection, disruption and prosecution all of which play an important role in addressing this issue.

Prevention is very important as children's wellbeing is best safeguarded by preventing them from becoming victims. The Doncaster Safeguarding Children Board is investing in prevention work including awareness-raising in schools through the medium of Chelsea's Choice, a powerful drama which enables young people to recognise the issue and discuss it in a safe environment.

As chair of the board I hope professionals will find this Handbook a useful tool and that practitioners will contribute to the resources section by sharing any other materials or information they have found helpful to their work.

John Harris

Independent Chair
Doncaster Safeguarding Children Board

1. What is Child Sexual Exploitation?

1.1 The sexual exploitation of children and young people has been identified throughout the UK, in both rural and urban areas, and in all parts of the world. It affects boys and young men as well as girls and young women. The abuser could be male or female. It is a form of Sexual Abuse and can have a serious impact on every aspect of the lives of children involved and their families.

1.2 The sexual exploitation of children is described in the government guidance document *as, involving 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 their performing, and/or another or others performing on them, sexual activities. It can occur through the use of technology without the child’s immediate recognition; e.g. being persuaded to post sexual images on the internet/mobile phones without immediate payment or gain. In all cases, those exploiting the child have power over them by virtue of their age, gender, intellect, physical strength and/or economic or other resources. Violence, coercion and intimidation are common, involvement in exploitative relationships being characterised in the main by the child’s limited availability of choice resulting from their social/economic and/or emotional vulnerability.* (Source)‘

1.3 Child sexual exploitation can take many different forms including:

- Exploitation by family members, including being ‘sold for sex’
- Sexually exploitative relationships with older adults
- Sexually exploitative relationships with peers
- Sexual exploitation through technology including grooming through social media and the taking and circulation of sexually explicit images of the child

1.4 Research undertaken by Barnados ‘***Puppet on a String the Urgent Need to Cut Children Free from Child Sexual Exploitation***’ has concluded that child sexual exploitation can be classified into three different models:

Abuse Model 1: Inappropriate relationships and/or boyfriend

Usually involves one abuser who has inappropriate power – physical, emotional or financial – or control over a young person. The young person may believe they have a genuine friendship or loving relationship with their abuser. This model of 1 on 1 abuse can exist in isolation and CSE does not necessarily involve groups or gangs or perpetrators or victims. Sometimes this is a ‘boyfriend’ relationship where the abuser grooms the victim by striking up a seemingly normal relationship with them, giving them gifts and meeting in cafes/ fast food outlets or shopping centres. A seemingly consensual sexual relationship develops but later becomes abusive. Victims may be required to attend parties and sleep with multiple men including groups of men and threatened with violence if they try to seek help. They may also be required to introduce their friends as new victims.

Abuse Model 2: Online

The abuser grooms the victim by striking up a relationship with them on line. The abuser may pose as a young person of a similar age or as an adult. This can be via chatrooms such as Facebook. Sometime the abuser persuades a victim to give them details of other children or young people. The abuser may ask the child to talk to them via web cam and progress to getting them to pose or send images of themselves in underwear which may progress to naked or semi-naked images. These images will be stored and are likely to be shared with other child abusers. They may start to pressure the child or young person to meet them and from this point the grooming may be similar to the boyfriend model.

Abuse Model 3: Organised exploitation and trafficking

Victims are trafficked through criminal networks – often between towns and cities – and forced or coerced into sex with multiple men including groups of men. They may also be used to recruit new victims. This serious organised activity can involve the buying and selling of young people.

Awareness is developing locally that these are not pure models and children may be abused in more than one way simultaneously or move between the models for example begin in the ‘boyfriend model’ which may become a route into ‘organised exploitation and trafficking’.

1.5 Whatever their experience of child sexual exploitation it is important to be aware that **children and young people are not making a free and informed choice to participate in the sexual activity**. They often make constrained choices against a background of vulnerability and because of their age, unmet needs or vulnerability they are unable to give informed consent. Young people under the age of 16 cannot legally consent to sexual activity and sexual intercourse with children under the age of 13 is statutory rape. A child under 18 cannot consent to their own abuse through exploitation.

1.6 What marks out exploitation is an imbalance of power within the relationship and how the perpetrators use that power to groom and then abuse their victims and then prevent them from disclosing the abuse and being helped to extract themselves from the abuse. The perpetrator always holds some kind of power over the victim, increasing the dependence of the victim as the exploitative relationship develops. Often illegal drugs and alcohol are used as part of creating dependence and reducing the child’s awareness of the abuse.

1.7 Technology can play a part in sexual abuse, for example, through its use to record abuse and share it with other like-minded individuals or as a medium to access children and young people in order to groom them. Increasingly this includes the use of social media sites such as Facebook, X Box and Twitter. Victims may also be recorded being abused for example on mobile phones and those images shared or used as another means of threatening, humiliating or coercing the child.

1.8 Sexual exploitation has strong links with other forms of crime, for example, domestic abuse, online and offline grooming, the distribution of abusive images of children and child trafficking.

1.9 The perpetrators of sexual exploitation are often well organised and use sophisticated tactics. They are known to target areas where children and young people gather without much adult supervision, e.g. parks or shopping centre's or sites on the Internet.

2. Cases Studies - 'If you can't rule it out, rule it in'

2.1 This section sets out a number of mini case studies highlighting the different forms of child sexual exploitation. They are all based on real cases where information is in the public domain and are from different areas of the country. They are here as an aid to professionals who may be thinking about whether their concerns about a child are child sexual exploitation. It is important to think about the early grooming stages which are often the point at which parents and professionals instinctively start to feel that something is wrong.

Case Study 1

Two men ages 22 and 23 years manage to meet two 13 year old girls on Facebook. One of the girls gives the men her mobile phone number. They chat on FB over a few weeks and the men send the girls texts which are sexually suggestive. The girls agree to meet the men in the local KFC. Both girls are wearing their school uniforms and the men comment how young they look. Over a six month period the men bombard the girls with FB messages and texts and meet them several times. When the men push the girls to have sex one of them panics and tells her mother. Both men were convicted of grooming for sexual exploitation and enticing a child into sexual activity and were jailed.

Case Study 2

Alex was a 16 year old boy who was struggling in many aspects of his life and had become involved in low level criminal activity. He was involved with the Youth Offending Service. He was missing school and did not have many friends. Alex was a vulnerable boy with some social presentation issues including being very overweight and had severe acne which made him anxious about his appearance. He met a woman who was a lot older than him and she engaged him in drinking and drug taking. The relationship became sexual. His parents and professionals were concerned but because he was 16 years old made a decision that the relationship was consensual. The woman had significant influence over Alex and the adults around Alex felt that Alex was being manipulated by the adult for her own ends. Eventually she led Alex into drug dealing and he was arrested and charged.

Case Study 3

Two brothers in their mid-20's met young girls age 13 and 14 years old via Facebook, on the street and through the girls' friends. They were given alcohol and later drugs. The girls were given Blackberry phones and the men used Blackberry Messenger to contact them (Blackberry Messenger communications are not traceable). The men had more than 20 girls contact details on their phones. Gradually they enticed the girls into having sex with them and this progressed to them selling the girls for sex to other men.

Case Study 4

Sophie was a 14 year old girl who had some learning difficulty and attended a local special school where she struggled to fit in. She began to miss school and started staying out late at night. She came to the attention of the agencies who discussed her in a strategy meeting about a number of girls where there were concerns about grooming and child sexual exploitation. That meeting decided Sophie was not involved in CSE. She had a 'boyfriend' who was in his late 20's. Sophie continued to cause concern and her mother was unable to influence her behaviour. Sophie became pregnant and had a baby who was clearly of dual heritage. She confronted her 'boyfriend' and his cousin both of whom she had been having sex with about the paternity of the child and told them she was going to tell their families. Sophie was murdered by the two men who have been convicted.

Case Study 5

Mr C is a 47 year old male who opened an on line account pretending to be a teenage boy. He met upwards of 200 teenage girls on line, some as young as 13. He obtained their personal details and sent them gifts such as perfume and vouchers. He persuaded a number of girls to take explicit pictures of themselves and send them to him and he used a webcam to capture them naked and in sexual poses. He never met any of the children face to face. He was convicted of grooming for sexual exploitation and of making and storing indecent images and was jailed.

Case Study 6

Monique is from Somalia and is 12 years old. She has been sent to England by her parents who want her to have a good education. The man who brought her promised her parents that she would be taken to her Aunts home in the midlands. She was instead taken straight to a house in another part of the country where there were many other girls, mostly teenagers but some were women in their 20's. They were all from countries like Somalia, Pakistan and Egypt. Monique was told that she had to work to pay the money for her journey to England and then she would be taken to her Aunt's house. She was forced to have sex with men who came to the house, often several men one after the other. She learnt that all the girls and women had been brought to England like her and that she would never escape to see her family again.

Case Study 7

Bev is a 14 year old girl who hangs out after school with a couple of lads who are 15 and go to her school. Bev's cousin Sam who is 15 years old often joins them. They go to McDonalds for a coke and chips most days. One day one of the lads chats to a man in a car and asks the girls if they want to go for a drive. The man looks to be about 30 years old. There is another man in the car that looks about 26 years old. One of the lads knows the men and tells the girls it will be a laugh. They are very impressed with the car which is a large black BMW. The girls get in. They drive round a bit then park up. The men have spliffs which they offer the girls. Neither Bev nor Sam have ever smoked a spliff but they think it would look babyish not to so they do. Over the next few weeks they meet these men more and more. They start being given Vodka and Red Bull to drink as well as the spliffs and they feel very grown up. The men ask for their phone numbers and the girls give them willingly. One of the lads tells Bev he thinks they should stop going in the car as 'bad things are going to come of it' but Bev just laughs at him. She thinks he is very childish now and dumps him. The girls go in the car with just the men. They are drinking a lot of vodka now. Sometimes a third man is in the car. One night they go to the local park and sit on a bench for a bit. The older man then asks Bev to go for a walk with him. She has had a couple of spliffs and the vodka and feels 'mellow'. She goes with him willingly. He then tells her she is beautiful and he wants to kiss her. They end up having sex. Bev feels a bit ashamed afterwards but she can't really remember what happened. Over the next month or so they have sex every time they meet. Bev thinks the man is her boyfriend. She doesn't know his name but everyone calls him Zax. She thinks Sam is also having sex with the other man but they don't talk about it. One night the girls agree to go to Zax's flat. It is very dirty and doesn't have much furniture but they hang out there and drink and smoke. Zax gives Bev a line of coke to snort and it makes her feel strange. The next few nights she gets coke every night and they always have sex. Then one night the men swop the girls – Zax has sex with Sam and Bev with the other one. Both girls were a bit off their heads on drink and drugs. Two nights later they go to the flat and there are some other men there. Sam and Bev are both gang raped. They dare not tell anyone because Zax tells them they are now prostitutes, having sex for drink and drugs and if they tell they will go to prison. The girls like the drink and drugs and the buzz of being with the men. They don't like sex except with their own' boyfriends' but they don't really know how to stop it.

Case Study 8

Two brothers aged 28 and 32 years old meet a 13 year old girl Jodie in the local shopping centre in Accessorize and tell her the things she is looking at are lovely and she would look pretty in them. She smiles and buys some things. The next Saturday Jodie and her friend Jess are shopping again and the same two men approach them and offer to buy them a drink in the café. The girls go. Jess then thinks this is a bit unsafe and tells Jodie they shouldn't be with men they don't know. Jodie says she knows them! Jess gets the bus home but Jodie stays and chats with the men. Every week then they meet up. Sometimes the men buy Jodie little things like bracelets or make up. One week just the younger man comes and he spends all afternoon with Jodie. He takes her outside for a walk and kisses her.

Case Study 8 continued...

Then each week it's just him. He starts touching her and then persuades her to have sex. She starts meeting him after school – her parents don't know. They don't get in from work until about 6.30 and she's always home by then. The man rings and texts her all the time and she knows he loves her. He tries to get her to bring Jess to meet his brother but Jess won't. One day Jodie's mum finds stained underwear and rings the police. Jodie admits she has sex with the man but says he is her boyfriend and she loves him. She won't give a statement to the police but they have her knickers which have semen stains and her mum and dad agree the man should be prosecuted even though Jodie doesn't want that and says she agreed to sex. He was convicted of sexual activity with a child and sent to prison.

Case Study 9

Sarah is 14 years old and a bit of a rebel at home and at school. She pushes boundaries all the time, including regularly staying out after her agreed coming home time at night. Sometimes Sarah stays over at her friend Emma's house even though her mum and dad don't like that because Emma lives with just her dad and Sarah's parents think he is a bit odd. Gradually Sarah starts staying out later and staying over more often. Eventually she stops answering her mobile phone when her parents call to try and find her. Her parents start reporting her missing to the police. Sarah's school write to her parents expressing concern at the number of days Sarah is missing school. Her parents didn't know she wasn't going to school. Sarah has become impossible to talk to and when she is at home she shuts herself in her bedroom. She has lost a lot of weight and looks pale and tired. 6 months later, just before Sarah's 15th birthday she has a big row with her dad and storms out. The police find her at Emma's house – Emma has left home and gone to live with her mum and hasn't been at her dad's for about 8 months. Sarah is pregnant. She finally tells the school nurse that Emma's dad is the father of her baby.

Case Study 10

James is 12 years old. His parents have just started letting him go to town with his friends on a Saturday afternoon. He is a sensible boy, although a bit young for his age and has never given his family a moment's trouble. His friends are also sensible and their parents socialise together so they know all the boys well. James has become moody and withdrawn and his parents put that down to adolescence – they remember it with his older brother Matthew. About 3 months on James tells Matthew that a man who he met in the shopping centre has been touching him sexually and last Saturday tried to have anal sex with him in the shopping centre toilets. He followed James in when he went for a wee and pushed him into the cubicle. James is frightened and ashamed. He is worried his parents will think he is gay and he asked Matthew (who is 17 years old) not to tell them. The man started out being nice to him; he bought him some computer games and always had nice chocolate bars. James' friends don't know about this because he has been wandering off on his own because he got bored with them just hanging around when James wanted to look in the games shops. Matthew keeps James secret. 6 weeks later James tries to hang himself. Luckily Matthew finds him in time and Matthew then tells his parents what has happened to James. The police are now investigating.

3. Trafficking

3.1 Children who are abused through child sexual exploitation may also be trafficked.

3.2 There are three different types of trafficking of children for the purposes of sexual exploitation. Firstly, there is trafficking from abroad into the United Kingdom. The second category is internal trafficking, where children are moved from one place to another in the UK for the purposes of sexual exploitation. This may be from one street to a neighbouring street, from one area of a town or city to another area, or across county borders. It is not the distance that is relevant in the definition of internal trafficking, but the movement of a child or young person for the purpose of sexual exploitation. The third is being trafficked out of the UK to other countries and brought back again.

3.3 It is probably helpful for professionals to think of trafficking as moving children around for the purpose of them being abused. An example would be a child from Doncaster being taken to Sheffield by their abusers or associates of the abusers and then being abused by other adults in Sheffield. Children being moved from street to street by their abusers is another form of trafficking within the UK.

3.4 Trafficking children, including for the purpose of sexual exploitation is a criminal offence and concerns that a child may be being trafficked should always be reported to the police.

3.5 Professionals will need to collect as much data as possible which includes anything you hear the child say, or hear other children say about them, dates and times when you know or suspect they have been trafficked and any information about the people they were with and vehicles used to transport them. This should be recorded carefully and passed to the police for investigation

Case Study 11

Trudy is 13 years old. She met a group of older men through her boyfriend who is also 15 years old. Her boyfriend started taking her to a house in her home town where she was forced to have sex with two older men. About a month later one of the men took her to Birmingham where she was taken to a hotel and forced to have sex with another man. Trudy was trafficked for the purpose of sexual exploitation which is a criminal offence.

3.6 For more information, please visit the online multi-agency procedures for safeguarding Children who may have been trafficked. You can access the pages directly by following this link: <http://doncasterscb.proceduresonline.com/>

4. The importance of language and labelling

4.1 Throughout this document the term 'child' will be used to describe any child or young person aged 0 – 18 years. Whilst it is acknowledged that teenagers would wish to be referred to as 'young people' the term 'child' in this context helps professionals stay focused on the fact that they are children being abused and not young adults making positive choices.

4.2 The way we use language influences our thinking. Recent Serious Case Reviews in other areas have highlighted this as a significant issue which contributed to systemic failure to protect.

4.3 Read the following two recordings about a child and reflect on the immediate perception you have of their situation.

Sally is 14 years old and has been living at Care View for 3 months. She is a streetwise young woman who from day one has been a persistent absconder. She chooses to associate with older friends in the town centre where she drinks alcohol and uses drugs. She refuses to engage with staff and take guidance believing, as always, that she knows best. Sally is known to be sexually active and is promiscuous. She says she has had sex with 7 different partners in the past month. She has already been treated for Chlamydia but she doesn't seem to care about the impact on her health. We think she is prostituting herself to get money for drugs and new clothes and she is certainly materialistic. Sally is a negative influence on the other young people and often involves younger residents in her inappropriate activities.

Sally is 14 years old and has been living at Care View for 3 months. From day one we have been concerned about her going missing and she is thought to be a very vulnerable child. Sally is known to be spending time with older men in the town centre and is drinking alcohol and using drugs. This increases her vulnerability. Staff are working hard to engage Sally but at the moment she cannot accept our help and support. Sally is sexually active and we believe she is having sex with a number of older men. Sally has been treated for Chlamydia and we are concerned about her sexual health and well-being. Sally often has money and new clothes which she cannot explain and we feel that she is at risk of, or already being abused through child sexual exploitation. Sally often takes younger residents off with her and we are worried that she is being coerced into introducing other children to the abusers.

4.4. There are some labels which in the past have been used to describe children and their behaviour and which lead to inaccurate assumptions which in turn can help to minimise the risks and reality of their situation. Professionals should avoid using such terms in their recording and conversations and should be mindful of when they enter their thinking and challenge them.

These include:

Child prostitution: because this term implies that the child is choosing to sell themselves for sex when we know that is not the reality of their situation.

Street wise: because this term implies that the child is able to understand the dangers they face and protect themselves whilst missing from home or care when we know the reality of their situation is that they are vulnerable and exposed to situations they cannot control

Choosing to....: because in situations of child sexual exploitation the child is not making free choices and we know that they are subject to coercion, bribery, violence and threats in order to enforce compliance. Children cannot 'choose' to be abused.

Consensual sex – because it is unlawful for a child under 16 to have sex and they cannot legally consent and also because consent implies an understanding of the situation, the risks and an aspect of free choice when we know in CSE the child is not in a position to make such choices

Boyfriend – because in a CSE situation the child is not in a relationship of equals in which they can make free and developmentally appropriate choices about the extent of their sexual activity

5. The Key Principles

5.1 Doncaster Safeguarding Children Board has agreed the following key principles to guide the multi-agency response to child sexual exploitation:

- We will focus on the needs and rights of children and young people. Children and young people are entitled to be safeguarded from sexual exploitation.
- All agencies have duties in respect of safeguarding and promoting the welfare of children and young people and this includes safeguarding them from child sexual exploitation;
- Sexual exploitation is a form of child abuse and includes sexual, physical and emotional abuse, and, in some cases, neglect.
- All agencies will adopt a child-centred approach. Action should be focused on the child's individual needs and circumstances
- The label 'child prostitution' is unhelpful and inappropriate and should not be used other than to describe a specific charge against an offender.
- Unless it is unsafe to do so, we will take account of family circumstances in deciding how best to safeguard and promote the welfare of children and young people and involve families in safeguarding plans.

- Children and young people do not make informed choices to enter or remain in sexual exploitation, but do so due to coercion, enticement, manipulation or desperation.
- Young people under 16 cannot legally consent to sexual activity and sexual intercourse with children under the age of 13 is statutory rape.
- Sexually exploited children and young people should be treated as victims of abuse, not as offenders.
- Many sexually exploited young people have difficulty distinguishing between their own choices about sex and sexuality, and the sexual activities they are coerced into. This potential confusion should be handled with care and sensitivity by professionals.
- Robust law enforcement effort must be made against the adults who groom and sexually exploit young people.
- In some cases young people themselves may exploit other young people, and in these cases law enforcement action may also be necessary.
- We will take a proactive approach. This includes a focus on prevention, early identification and intervention as well as disrupting activity and prosecuting perpetrators;
- We will ensure effective joint working between different agencies and professionals underpinned by a strong commitment from managers, a shared understanding of the problem of sexual exploitation, good information sharing and communication and effective coordination by the Doncaster Safeguarding Children Board.
- We will have regard for specific factors such as the age, disability, race, ethnicity or cultural backgrounds of both perpetrators and victims and will take these fully into account in our investigations and work with victims.
- We will work with local communities to assist in combating child sexual exploitation
- We will provide multi agency training and development opportunities and will monitor agencies attendance to ensure all professionals have received appropriate training.
- We will consider fully any potential risks to the children and family of an alleged perpetrator and ensure assessments are carried where necessary
- We will have regard to the DSCB guidance on Working With Sexually Active Under 18's in our work with children at risk of CSE

6. The Screening Tool

The CSE Screening Tool is attached at Annex 2

6.1 The CSE Screening Tool should be used by all professionals who have concerns that a child is at risk of, or may be being abused through CSE. It is designed to be completed quickly and without too much detailed recording (that will be done in The Risk Assessment Tool if necessary).

6.2 It is designed to help professionals reflect on their concerns, determine whether the child may be at risk or involved and help them structure a referral to children's social care. If a referral is to be made the completed screening tool should accompany the referral.

6.3 The Screening Tool may also be used directly with children to raise awareness of the issues of CSE, the risks they are exposed to and to facilitate their understanding of concerns. It can also be used with parents and carers to assist them in thinking about what may be happening to the child.

6.4 The Screening Tool should not be seen as a rigid document. Professionals should use their expertise and judgment in completing it. The suggested risk levels (High, Medium, and Low) are in many ways arbitrary and the professional will need to take into account the child's age, ability and other vulnerabilities when considering this. A Medium risk for a 15 year old may well be a High risk for a 10 year old.

6.5 The Screening Tool is primarily designed for use when there are concerns about a child aged 10 -18 years but may also be used for younger children if the professional thinks it would be useful.

6.6 It is important to note that the screening tool is designed for both early identification of signs that a child may be at risk of child sexual exploitation and when a preventative response may be appropriate and to also identify children who are already being abused through child sexual exploitation. Those children will be suffering significant harm rather than being at 'risk of' and will need a robust protection strategy and an exit strategy from the abuse.

7. Professional role and responsibilities

7.1 Professionals working in health services

7.1.1 Government Guidance on children involved in child sexual exploitation says *'Because of the universal nature of most health provision, health professionals may often be the first to be aware that a child may be involved, or be at risk of becoming involved, in sexual exploitation. Children involved in sexual exploitation are likely to need a range of health services, including advice and counselling for harm minimisation, health promotion and advice on sexually transmitted diseases and HIV'*.

7.1.2 Health professionals working in universal and specialist settings should be alert and competent to identify and act upon concerns that a child may be at risk of, or experiencing abuse through child sexual exploitation.

7.1.3 The named lead professional should carefully record and monitor information in order to identify at an early stage any pattern of concern including for example whether more than one child may be at risk in an area or community or where more than one perpetrator may be active. They should report any such concerns to the CSE Team as soon as possible.

7.1.4 All health professionals should ensure they have access to and understand how to use the CSE screening tool (part of this Toolkit) and should complete a screening for any child about whom they have emerging concerns.

Where this confirms there are concerns about a child a referral should be made to the Referral and Response Team. The completed screening tool should be sent with the referral.

7.1.5 Health professionals should provide, or continue to provide health education, screening, sexual health services advice and support as necessary. Where necessary, they should liaise with the health professional based within CSE Lead Nurse is able to facilities a Health Assessment or Consultant led Paediatric Sexual Abuse medicals, including the collection of any forensic evidence.

7.1.6 The health professional should check the child's records for any other health professional involvement and should ensure they have an overview of all health involvement prior to attending any strategy discussion.

7.1.7 The health professional should attend any strategy discussion, CSE multi-agency planning meeting or initial child protection conference relating to the child, providing written reports where requested.

Professionals working in Leaving Care Services

7.2.1 Leaving care professionals will often develop strong relationships with children leaving care and into their early adulthood. It is likely that some young people will make disclosures to leaving care professionals and this is often triggered by other events in the child's life such as being further abused, entering into a new relationship or having a child. Where a child does disclose, the professional should listen carefully and note what the child is saying. They should take care not to 'lead the child' or ask too many probing questions. It is important that the child is able to talk freely but also that they do not feel 'they have told the story in detail once' and so feel unable to make a formal statement which would be needed for a successful prosecution.

7.2.2 Where a child does disclose the leaving care professional should seek the child's agreement to contact the police and should offer to support them through an interview with the police. Where the child refuses the professional should make it clear that they will need to share the information because other children may be at risk.

7.2.3 The leaving care professional should, in the first instance, contact their own organisations lead professional for advice and to ensure that one person in the organisation has an overview of the concerns.

7.2.4 The named lead professional should carefully record and monitor information in order to identify at an early stage any pattern of concern including, for example, whether more than one child may be at risk in an area or community or where more than one perpetrator may be active. They should report any such concerns to the CSE Team as soon as possible.

7.2.5 Leaving care professionals should ensure they have access to and understand how to use the CSE screening tool (part of this Toolkit) and should complete a

screening for any child about whom they have emerging concerns, whether or not there has been a disclosure.

Where this confirms there are concerns about a child who is under the age of 18 a referral should be made to the children and families assessment team. The completed screening tool should be sent with the referral.

7.2.6 The leaving care professional should continue to provide services to the child and should support them to attend health services as needed.

7.2.7 The leaving care professional should check the child's records for any other professional involvement and should ensure they have an overview of all their services involvement prior to attending any strategy discussion.

7.2.8 The leaving care professional should attend any strategy discussion, CSE multi-agency planning meeting or initial child protection conference relating to the child, providing written reports where requested.

7.3 The Police

7.3.1 The police are likely to be an agency which picks up concerns about a child who may be involved in, or at risk of child sexual exploitation. This may be through their work on the streets, through intelligence or through information from other criminal investigations. Reports of missing persons should also alert police officers to the possibility of child sexual exploitation. All police officers, including PCSO's, should be alert and competent to identify and act upon concerns that a child may be at risk of, or experiencing abuse through child sexual exploitation.

7.3.2 The police officer should in the first instance contact their own organisation's lead professional for advice and to ensure that one person in the organisation has an overview of the concerns.

7.3.3 Any police officer who becomes aware of concerns in relation to a child should carefully record and monitor information in order to identify at an early stage any pattern of concern including for example whether more than one child may be at risk in an area or community or where more than one perpetrator may be active. They should report any such concerns to the CSE Team as soon as possible.

7.3.4 Police officers should ensure they have access to and understand how to use the CSE screening tool (part of this Toolkit) and should complete a screening for any child about whom they have emerging concerns.

7.3.5 Where this confirms there are concerns about a child a referral should be made to the children and families assessment team. The completed screening tool should be sent with the referral.

7.3.6 The police have additional responsibilities and powers and where they discover a child who is being, or is at risk of child sexual exploitation, they must take immediate steps to remove them from harm, using their powers of Police Protection if necessary and they should also secure any evidence.

7.3.7 One priority for the police is to protect children through the investigation and prosecution of offenders and this must be done in accordance with Doncaster's

principles of ensuring multi-agency cooperation. This includes discussion at a strategy meeting to agree and plan the investigation.

7.3.8 All interviews with the child will be carried out in accordance with the Achieving Best Evidence Interview. It must be recognised that children will often struggle to disclose what has happened to them due to fear and intimidation, embarrassment or a belief that their abusers are their friends. Children will often need time and patience in order to achieve a full evidential disclosure.

7.3.9 Where a child refuses or is unable to make a disclosure, the police must continue to investigate the concerns and should continue to work with the child and their family and/or professional support.

7.3.10 Where a child has made a disclosure the police have a duty to provide information and support to the child throughout the investigation and this responsibility should be allocated to a named officer. It is best practice to record the way in which the child will be supported and to give the child a copy of this so they know what to expect. Should a case proceed to trial this support will need to continue in line with the Crown Prosecution Service requirements.

7.3.11 The police should check the child's records for any other professional involvement and should ensure they have an overview of all their services involvement prior to attending any strategy discussion. It is likely that a police officer in the CSE Team will undertake this.

7.3.12 The police should attend any strategy discussion, CSE multi-agency planning meeting or initial child protection conference relating to the child, providing written reports where requested. It is likely that a police officer in the CSE Team will undertake this.

7.4 Probation

7.4.1 The Probation Service are likely to be an agency which picks up concerns about a child who might be involved or is at risk of child sexual exploitation. Although not working directly with children under the age of 18, probation workers will have contact with people who are close to such children – parents, older siblings, and friends. Probation workers will also be working directly with perpetrators of child sexual exploitation, some of whom will be convicted of such offences but some of whom might yet not be recognised as perpetrators. Perhaps most importantly, probation workers will be working with offenders who have been victims (or are still being victimised) of such abuse, which will almost certainly have a significant effect on that person's ability to engage with their service.

7.4.2 All probation workers (including Independent Sexual Violence Advocates) will have basic child protection training to enable them to identify and act up on concerns that a child might be at risk of or is experiencing child sexual exploitation. Probation staff who work on a one-to-one basis with offenders will have specialist child protection training, relevant to their role.

7.4.3 The probation worker should in the first instance discuss their concerns with their line manager. They may subsequently also discuss the concern with the senior probation officer lead, who will act as the lead professional for child sexual exploitation to ensure appropriate oversight of the matter.

7.4.4 The probation worker who raises the concern should record and monitor information in a confidential manner, making a note of the date, to which manager they raised the matter and the date and outcome of any subsequent referrals. Serious further offence reviews have highlighted the need to monitor referrals to other agencies and to record the outcome of that referral.

7.4.5 Probation officers and probation services officers (the two main practitioner grades of probation worker) will be able to access training material to assist their practice with working with offenders who have been victims of child sexual exploitation. They will have access to the screening tool which they will complete for any child they have concerns about CSE.

7.4.6 If indicated by the screening tool, the probation worker will make a referral to the children and families assessment team. The completed screening tool should be sent with the referral. All child protection referrals are to have line management oversight which in turn is monitored and recorded by the director's

7.4.7 If the child is linked to an offender who is a current probation case, the probation worker will participate in case conferences and multi-agency meetings as appropriate.

7.4.8 Practitioners will ensure that risk management plans (including community order Requirements and licence conditions) include sufficient measures to address CSE concerns.

7.4.9 A probation officer or senior probation officer will be nominated to attend the CSE strategy meetings on a regular basis, to aid information-sharing and networking.

7.4.10 A working group consisting of probation officers, specialist sexual offending behaviour workers, Independent Sexual Violence Advocates and with input from other specialists (e.g. forensic psychologist) as appropriate is to be formed, to ensure there is a professional forum for discussing practice matters relating to CSE.

7.4.11 The Independent Sexual Violence Advocates is briefed on local issues of CSE and there will be on-going liaison between Victim Liaison Officers and probation workers in individual cases, to ensure sufficient risk management.

7.4.12 The Independent Sexual Violence Advocates will offer victims of CSE a service which includes the provision of information regarding the offender's sentence, assistance with accessing specialist services such as counselling, and the opportunity to make representations as to license conditions on release, specifically exclusion zones and non-contact conditions. Where the victim is now over the age of 18 they will be offered the service directly. For those under 18 the service will be offered via their parent or guardian.

7.5 Residential Child Care Professionals

7.5.1 Children living in children's homes must be enabled to feel safe and be safe, including from child sexual exploitation. They need to understand how to protect themselves, to feel protected and be protected from significant harm.

7.5.2 Residential child care professionals have a duty to protect children resident and this includes taking all possible steps to prevent them going missing from care, to ensure they are accessing education or employment, that their health care needs are being met and that they have access to appropriate friends and age appropriate activities. Residential child care professionals carry out much of the day to day (corporate) parenting roles and responsibilities and in that role should act as any good parent for example knowing where the child is, who they are with and setting boundaries around their activities. It is really important that staff place true value on building positive relationships with the children resident and generating a culture of openness and trust. Residential child care professionals should be alert to any signs that a child is at risk of harm through child sexual exploitation.

7.5.3 Where a child is thought to be at risk of, or is involved in child sexual exploitation, their care plan should set out clearly what actions will be taken to ensure their safety.

7.5.4 Residential child care professional should ensure that all relevant information is recorded including information about anyone the child is associating with including appearance, cars, telephone activity, the child's pattern of going missing, any names the child discloses, other children who may go missing with the child or at the same time, any addresses the child says they are going to etc.

7.5.5 We know that being missing is one of the biggest risk factors in CSE and residential child care staff should do everything possible to dissuade a child thought to be at risk from leaving. This includes talking to them, offering alternative activities, escorting them on activities, escorting them to and from school. The use of restrictive physical intervention is not permitted simply to prevent a child from leaving. It is unlawful to lock doors to prevent a child from leaving (other than in a designated secure children's home).

7.5.6 Should a child go missing the residential child care professional must work with the police to try and locate them in line with the Runaway and Missing from Home and Care Protocol.

7.5.7 Where a child has been missing and returns, the residential child care professional should welcome the child home, ensure they are offered food and drink and the opportunity to talk. Details about their appearance and anything they might say should be recorded. Staff should liaise with the police to ensure the child is seen as soon as possible and also to secure any evidence if possible. This might include clothing (including underwear) which may have DNA. Such clothing can and should be retained by staff, placed in a clean plastic bag and handed to the police even if the child withholds their consent.

7.5.8 Where a child is persistently running away or engaging in other risky behaviours the residential child care professional should liaise with the child's social worker and the CSE Team to convene a multi-agency CSE meeting.

7.5.9 Residential child care professionals should offer advice and guidance to the child, including talking to them about exploitation and risk, providing guidance about where they should and should not go, appropriate clothing etc.

7.5.10 Staff should be vigilant about monitoring telephone calls and other communication and should take steps to prevent the child making or receiving inappropriate calls. Staff should discuss with the police concerns about any mobile phone thought to be being used inappropriately and the police should advise on whether the phone should be handed over to the police for analysis if CSE or other forms of abuse are suspected.

7.5.11 Staff should monitor all callers and visitors to the home and should turn away visitors who are felt to be inappropriate. They should record details such as descriptions of the person, car details etc. and pass this onto the police. Staff should tell callers the age of the child and inform them that should they be in the company of that child in the future, the police will be involved.

7.5.12 On no account should residential child care professionals visit addresses where they suspect the child may be unless this is agreed in the risk assessment (for example their parents' home address) and should never attend other addresses to search for the child. This is a matter for the police and suspicions about the child's whereabouts should be passed to the police for investigation.

7.5.13 Staff may wish to go out looking for the child and this may involve driving to known locations such as parks or café's. Care should be taken if staff intend to do this – including a risk assessment relating to them being seen in an area and their personal car details being noted.

7.6 Professionals in Schools and Colleges

7.6.1 Staff in schools and colleges have a key role to play in preventing children being abused through CSE. Personal, Social and Health Education (PSHE) can help to raise awareness of the risk and issues relating to grooming and CSE, can help children make safe choices and can help children who have been exposed to CSE to talk about their experiences and move onto recovery.

7.6.2 Attending school is one of the key safeguarding factors in a child's life. Being in a safe and supportive environment during the school day, having access to caring professional staff, experiencing success, accessing a good PHSE curriculum and having access to friends and age appropriate out-of-school activities are all critical for the well-being of any child, and more so for those abused through CSE.

7.6.3 Children abused through CSE may already have troubled backgrounds and may act out their distress in school. These children are frequently subject to additional support in school and are likely to challenge staff through their behaviour and through attendance issues.

7.6.4 Schools should do everything in their power to keep these children in school and where exclusion is a risk, for a child of secondary school age, should complete the screening tool and ensure an appropriate referral to children's social care prior to the earliest stage. Children thought to be at risk of CSE should not be excluded from school without careful consideration of the implications for their safety.

7.6.5 Staff in schools and colleges are uniquely placed to identify, at an early stage, children at risk of CSE. Staff should be competent to identify and act upon concerns that a child is at risk of or experiencing CSE. Any concerns should be notified immediately to the named lead professional for CSE in school or college.

7.6.6 The named lead professional should carefully record and monitor information in order to identify at an early stage any pattern of concern including for example whether more than one child may be at risk in an area or community or where more than one perpetrator may be active. They should report any such concerns to the CSE Team as soon as possible.

7.6.7 All professionals should ensure they have access to and understand how to use the CSE screening tool (part of this Toolkit) and should complete a screening for any child about whom they have emerging concerns.

7.6.8 Where this confirms there are concerns about a child a referral should be made to the children and families assessment team. The completed screening tool should be sent with the referral.

7.6.9 The school or college professional (or the named lead professional) should check the child's records for any other concerns and should ensure they have an overview of all issues prior to attending any strategy discussion.

7.6.10 The school or college professional (or the named lead professional) should attend any strategy discussion, CSE multi-agency planning meeting or initial child protection conference relating to the child, providing written reports where requested.

7.7 Professionals in Referral and Response

7.7.1 Referral and Response have the lead responsibility for responding to children and young people at risk of, sexual exploitation and should act in accordance with their responsibilities under the Children Act 1989.

7.7.2 Following a referral, all Local Authorities have a duty, under Section 17 and S47 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 and that appropriate multi-agency engagement and appropriate interventions are undertaken.

7.7.3 The assessment of all new referrals to the assessment team should include the use of the screening tool, where it is thought that CSE is an issue. Likewise, practitioners should ensure that for already open cases in Children's Social Care where CSE is identified as a concern the screening tool is completed.

7.7.4 The assessment teams should offer referrers appropriate consultation and advice in relation to CSE issues. The senior practitioners for locality working along with the link social workers they support can also provide advice, support and training to partner agencies and the voluntary sector.

7.7.5 Where appropriate, concerning information and identified referrals should be discussed with the CSE Team and responsibility passed to them accordingly.

7.7.6 Any general issues or themes emerging within Referral and Response in relation to child sexual exploitation should be raised with the lead professional who will bring these to the attention of the DSCB through the CSE Sub Group. Where there are concerns about organized, gang or group abuse or about an individual child who may be suffering harm legal advice should be sought in line with usual practice.

7.8 The Voluntary and Independent Sector

7.8.1 Because of their often chaotic circumstances and past family experiences, many young people are reluctant to engage with statutory services and might often find voluntary agencies more approachable sources of help. Voluntary agencies may well be where a child first discloses the abuse and where they seek help and support.

7.8.2 By working in partnership with statutory bodies, voluntary agencies are able to offer services which help young people understand the grooming process and raise awareness of risks and the implications of risk taking behaviour.

7.8.3 There are a wide range of specialist and other voluntary and community agencies and groups who might be well placed to identify children who are at risk of, or are experiencing abuse, through CSE. Voluntary and community sector agencies often have a close relationship with their local communities and can develop trusting relationships and maintain a link to the children or young person if they become 'lost' to statutory services. Outreach agencies are often the first point of contact for children in risk situations and specialist voluntary agencies often have the opportunity to provide vital risk reduction support.

7.8.4 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 sexual exploitation. Staff should be familiar with, and able to use the Screening Tool and should know when and how to make a referral should they be concerned about a child.

7.8.5 Where this confirms that there are concerns about a child, a referral should be made to the children and families assessment team. The completed screening tool should be sent with the referral.

7.8.6 The voluntary sector partner should check the child's records for any other concerns and should ensure they have an overview of all issues prior to attending any strategy discussion.

7.8.7 The voluntary sector partner should attend any strategy discussion, CSE multi-agency planning meeting or initial child protection conference relating to the child, providing written reports where requested.

7.8.8 Voluntary and community groups are also likely to have community links and may pick up intelligence relating to issues such as street grooming or early indications about children exposed to risk in the community. It is important that such information is carefully recorded and shared with the police.

7.8.9 Independent sector partners may be commissioned to provide services for children and if so they should follow the guidance relating to their type of provision – for example residential child care professionals or leaving care professionals.

7.9 Early Help Services

7.9.1 Early Help Services provide a range of services including youth and community work, personal advisors, family support, young carers support, face to face youth counselling, parenting support to parents of adolescents and other universal or targeted services. The role of early help services staff in relation to children abused through sexual exploitation is primarily in the prevention, recognition and referral stages.

7.9.2 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 sexual exploitation. Staff should be familiar with, and able to use the Screening Tool and should know when and how to make a referral should they be concerned about a child.

7.9.3 Where this confirms there are concerns about a child, a referral should be made to the children's assessment team. The completed screening tool should be sent with the referral.

7.9.4 Staff should check the child's records for any other concerns and should ensure they have an overview of all issues prior to attending any strategy discussion.

7.9.5 Staff should attend any strategy discussion, CSE multi-agency planning meeting or initial child protection conference relating to the child, providing written reports where requested.

7.9.6 Staff working in early intervention services are in a strong position to identify issues within the community including patterns of street activity, street grooming and risk taking behaviours. They may also become aware of individuals or premises where children are becoming involved. Staff should record such information carefully and pass this onto the police.

7.9.7 Early intervention services have a key role to play in educating children to stay safe and preventing risk of CSE through awareness-raising and keep safe work.

7.10 Youth Offending Service (YOS)

7.10.1 The YOS is likely to be a service that has contact with children, often presenting with a number of complex difficulties which makes them vulnerable across a range areas in their lives. This could include child sexual exploitation.

7.10.2 All children seen by the service have come into contact with either the police or criminal courts as a result of their offending behaviour; the role of YOS is to focus upon protecting the public from further criminal activity, whilst also taking account of duties in respect of safeguarding and promoting the welfare of children and young people.

7.10.3 YOS is multi-agency service that includes in its core make up representatives from partner agencies such as the Police, Health Workers and Youth Offending professionals. In addition, we have specialists in Restorative Justice, Victim relationships and Substance misuse workers as part of the team. Each child and

young person is assessed as a core part of the service delivered and these risk and vulnerability assessments are regularly reviewed and updated.

7.10.4 National and local evidence informs us that children missing from home, absconding from school, having poor attainment, family breakdown or loss of secure and stable accommodation leads to increased likelihood of criminal activity (notwithstanding an increased vulnerability to adverse peer or adult influence which can compromise the child or young person's well-being). Increased alienation from positive experience or opportunity through criminal sanction can also increase a child's vulnerability to become engaged in circumstances or behaviours where they are at risk.

7.10.5 Given these risk factors, there has been decade long emphasis on interagency and public protection partnership working around criminal activity by children and young people within Doncaster. The YOS is linked with a greater wide range of agencies involved with both child welfare and public protection/safety; these include Community Safety Partnerships, Police, Social Care, community sector organisations and well as Education establishments. Finally it must be recognised that for those children and young people for whom no other agency remains involved the YOS may provide the only statutory contact for a child or young person.

7.10.6 Practice Requirements

- YOS workers should be alert to the signs of concern regarding CSE and complete a screening tool whether or not there has been a disclosure.
- Concerns should be referred to the relevant children and families' assessment team and the CSE Team.
- YOS workers (where relevant) should attend any strategy discussion, CSE multi-agency planning meeting or initial child protection conference relating to the child, providing written reports where requested.
- The named lead professional in the YOS and other relevant staff should carefully monitor information in order to identify at an early stage any pattern of concern.
- Should YOS workers become concerned that a young person they are dealing with may be involved in the exploitation of children, they should share their concerns at the earliest opportunity with the police.
- YOS workers should ensure they have access to and understand how to use the Child Sexual Exploitation (SCE) screening tool, and should complete a screening for any child about whom they have emerging concerns..
- There is also a nominated senior and a Manager with lead for safeguarding and front line knowledge who staff have access too
- Access specialist in-house CSE training from one of our recognised trainers in the field

7.11 Other Services including housing, leisure and culture, adult social care, licencing, street scene, parks etc.

7.11.1 Staff working in a range of other services have a role to play in protecting children from abuse through child sexual exploitation. Primarily this will be in noticing

signs that children may be at risk, information gathering and sharing and referrals to children's social care.

7.11.2 Staff working in adult social care should be aware of the issue of CSE and alert to signs that it may be happening. Concerns may be noted relating to the children of adult service users, children seen at addresses or adult service users, including multiple occupancy premises or children in public places.

7.11.3 Staff working in leisure services, libraries, housing services, cultural services, parks and street scene may be amongst the first to pick up signs that a child/children may be at risk. They should be alert to the signs of CSE and should record any concerns (using the Information Recording Tool) and pass this on to the police. Where they see evidence that a child may have been harmed or is at risk of harm they should also make a referral to children's social care following the procedure in section 7 of this document.

7.11.4 Housing

The DSCB information sharing protocol exists to ensure information is shared for the purpose of safeguarding children and young people. This includes safeguarding any child placed in private housing through sharing of information regarding any landlord

7.11.5 Staff working in these services would not normally be expected to complete the Child Sexual Exploitation Screening Tool but may do so if they feel confident and know the child well enough.

7.11.6 Staff working in these other service may also have a role to play in disruption activity through their visible presence in areas identified as hot spots.

8. A multi-agency responsibility – what to do if you think a child may be at risk of child sexual exploitation

8.1 Providing an appropriate response to CSE requires the combined efforts and skills of a protective network for children and young people and depends heavily 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.

8.2 Safeguarding and promoting the welfare of children and young people depends on effective joint working between different agencies and professionals that work with children and young people. Their full involvement is vital if children are to be effectively supported and action is to be taken against perpetrators of sexual exploitation. All agencies should be alert to the risks of sexual exploitation and be able to take action and work together when an issue is identified.

8.3 In relation to confidentiality, where there are concerns that a child or young person is subject to sexual exploitation, all agencies have a responsibility to report their concerns and share information. The need for a child to be safeguarded overrides their right to confidentiality. Data protection should not prevent the sharing of information but ensures that personal information is

shared appropriately. It is never acceptable for an individual or agency to decide not to share information when there are concerns about the safety of a child.

8.4 This joint working is underpinned by:

- A strong commitment from leaders and senior managers
- The Tackling CSE Strategy and Action Plan
- A shared understanding of the problem of sexual exploitation
- Effective coordination by the DSCB
- Clear policies, procedures and practice guidance (including this toolkit)
- An agreed Information Sharing Protocol
- Staff training and development

9. Referral and Assessment

9.1 It is the responsibility of all partners to be alert to and identify signs that a child may be at risk of or being abused through CSE. It is the responsibility of all partner agencies to complete the CSE screening tool and where this confirms concerns, to make a referral to the children and families assessment team.

9.2 The Referral and Response Team will record the referral and undertake any additional assessment to determine whether the case is one of CSE. If it is CSE the case will be referred on to the CSE Team who will lead the CSE Risk Assessment process. All partner agencies have a responsibility to contribute to the risk assessment and any other assessment deemed necessary.

10. Strategy Discussion

10.1 Following completion of the CSE Risk Assessment tool, a strategy discussion should take place where a child or young person is assessed as being at risk of or involved in CSE. The CSE Team will lead in arranging the strategy discussion. The appropriate agencies should be invited as required.

10.2 ***The strategy discussion should be held as soon as possible following the risk assessment and in most cases this should be within 3 working days.*** The strategy discussion should consider carefully the risk assessment and decide on the next course of action, taking in to account the level of risk that has been identified to the child or young person. Key information shared, the level of risk and agreed actions should be carefully recorded. It is important that the strategy meeting also considers any risk the young person may present to others including whether they are being asked to introduce other young people to the perpetrators.

10.3 Any agency involved with the child is expected to attend the strategy meeting. At the very least a local authority social worker and their manager, health professionals and a police representative should, a minimum, be involved in the strategy discussion.

11. Multi-Agency CSE meeting

11.1 Following a strategy discussion one likely outcome will include a multi-agency CSE meeting for each child identified as at risk of or involved in sexual exploitation. ***This should be held as soon as possible following the strategy discussion and in most cases this should be within 5 working days.*** There should be individual strategy meetings for each child identified to ensure the focus of that meeting is on the individual child and their needs. Where there is more than one child identified the CSE Team will ensure that information from all CSE meetings is coordinated.

11.2 A CSE meeting should take place where a child is identified as at risk of, or involved in CSE and that child is in Local Authority care.

11.3 Where there are also concerns regarding the young person's parents/carers and their ability to protect the child the convening of a child protection conference should also be considered.

11.4 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, covert surveillance or concerns about the parents that the child and parents are excluded from all or part of the meeting

11.5 The multi-agency CSE meeting should be chaired by the independent chair attached to the CSE Team.

11.6 The multi-agency CSE meeting should be attended by any relevant professionals who can assist in the information sharing and planning process for the child. The following professionals may be required at this stage. Please note however that this is *not* an exhaustive list:-

- Child's social worker (if already allocated)
- Police (CSE Team)
- Health Professional (CSE Team)
- Fostering/residential worker
- YOT (Youth Offending Team) worker
- LAC (Looked after Children) nurse
- School

11.7 The aim of the CSE meeting is to develop a plan to enable the child to be protected, including helping to protect themselves, to recognise and avoid risky behaviours and people and to engage in positive activities and relationships.

11.8 The CSE meeting should ensure that:

- Information is shared and clarified and any gaps in information are identified
- Risks are identified and documented on the Risk Assessment Tool
- The likelihood of prosecution is considered (including forensic/disruption opportunities) of relevant adults and where prosecution is not likely; consider

the range of alternate action against perpetrators (including Child Abduction Warnings).

- A written plan is developed to safeguard the child or young person ensuring actions are allocated to relevant professionals.
- The plan is recorded appropriately.
- A decision is made as to who will undertake direct work with the child or young person to enable recovery.
- Exit strategies for the child or young person are discussed.
- A date to review the plan (usually 3 months) is agreed and it is clear where individual responsibilities lie.

12. Prevention, Protection, Prosecution and Disruption

12.1 Doncaster's holistic approach to tackling child sexual exploitation has four strands. Prevention, Disruption, Protection and Support & Prosecution.

12.2 These areas of work should not be undertaken in isolation. Work to identify and address the risk factors that make young people vulnerable to CSE and the provision of support and protection will enable agencies to gain the trust and confidence of the young person, in many cases so that they can be part of the work to tackle the exploitation itself.

12.3 Identifying, disrupting and prosecuting perpetrators must be a key part of work to safeguard children and young people from CSE. While the police and criminal justice agencies lead on this aspect of work, the support of other partners, for example in recording information and gathering and preserving evidence is also vital. Identifying and prosecuting perpetrators should be a key consideration of all agencies working to address the issue of CSE locally but, any work to identify and prosecute perpetrators should not put children and young people at any further risk of harm.

12.2. Prevention

12.2.1 Our aim is to prevent children and young people from abuse through child sexual exploitation by:

- Reducing their vulnerability
- Improving their resilience
- Reducing tolerance of sexually exploitative behaviours

12.2.2 We will do this by:

- Undertaking an assessment of the extent of the problem within Doncaster.
- Awareness raising and preventative education to equip children and young people with the skills they need to make safe and healthy choices and to avoid situations which put them at risk of CSE.
- Ensuring children and young people know who they can turn to if they are worried, need advice or support.
- Awareness raising for parents and carers so they are aware of the risks, understand the patterns of abuse, know about key indicators and where to access advice and support.

- Awareness raising in communities – geographic, communities of interest, faith communities etc.
- Awareness raising and training for professionals working in universal, targeted and specialist services, including a focus on known risk factors.

12.3 Prosecution

12.3.1 Our aim is to identify and prosecute offenders to remove them from the ability to continue to offend and to send out strong messages that child sexual exploitation will not be tolerated in Doncaster.

12.3.2 We will do this through:

- Identifying suspected perpetrators and reducing dependency on victims' statements, through information sharing, local intelligence, surveillance and proactive joint operations
- Proactive and reactive investigations
- Working closely with the Crown Prosecution Service to secure convictions
- Good multi-agency co-operation
- Providing effective support for victims and witnesses.
- Providing effective support to parents, carers and other family members
- Developing methods to reach unwilling victims and witnesses
- Cross border multi-agency cooperation and sharing of intelligence
- Maximising forensic opportunities
- Quality assuring and advising on Achieving Best Evidence (ABE) interviews with victims of CSE
- Immediate allocation of resources, utilising partner agencies in live incidents

12.3.3 Tackling child sex offenders and/or organised criminal networks

12.3.4 Information and intelligence gathered through the joint investigation of CSE is the starting point for building up local knowledge about people responsible for exploiting children and young people. This should enable police and other partners to recognise situations where organised and complex abuse is taking place, and instigate the necessary investigations.

12.4 Protection and Support

12.4.1 Our aim to ensure children and young people are identified as being abused through, or at risk of, child sexual exploitation and are protected and supported to either ensure they do not become involved in CSE or are safely removed from CSE and supported to move on to positive futures.

12.4.2 We will do this by:

- ***Ensuring that all services have a 'never give up' approach to their work so that children who reject offers of help and support remain of concern and experience a tenacious response*** Keeping under constant review and revising the DSCB policies, procedures and practice guidance relating to CSE, children who go missing from home, school or care and sexually active young people under the age of 18.
- Providing multi-agency training for all practitioners

- Ensuring all children aged 10 years and above have a CSE screening as part of any referral to children's social care services
- Ensuring all children age 10 years and above who are accessing universal, targeted or specialist services, have a CSE screening should any practitioner be concerned about their safety or well being
- Ensuring services understand the particular issues and needs of children being abused through CSE and are equipped to respond quickly and appropriately
- Ensuring a clear multi-agency response which includes information sharing, assessment, planning and service delivery
- Ensuring a multi-agency risk assessment and preventative plan is in place for all children identified as being abused through, or at risk of CSE
- Ensuring decisions about the use of child protection plans or entry to the looked after system are timely and appropriate
- Ensuring placement decisions for looked after children are based on a clear assessment of need and the CSE risk assessment and that where a cross boundary placement is being considered the risks of such a placement are fully assessed
- Ensuring that all services understand the issues and barriers for children and young people in engaging with services and that the service response will be as flexible as possible in order to encourage engagement
- Visible policing in areas where CSE is suspected
- The circulation of details of potentially vulnerable children to those working in areas where they may be at risk such as neighbourhood police teams, youth and community workers etc.
- Ensuring on going services and support to children and young people who have been victims of CSE and to their families
- Joint meetings with every young person suspected of being a victim of CSE

12.5 Disruption

12.5.1 Our aim to disrupt the activities of perpetrators and prevent them from sexually exploiting children.

12.5.2 We will do this by:

- Joint police and social care street operations, including viable operations to ensure perpetrators know that we are aware of the grooming and exploitation and are taking action
- Issuing Child Abduction Warning Notices (aka harbouring warning – see notes below). A Child Abduction Warning Notice identifies the child/young person and confirms the suspect has no permission to associate with or to contact or communicate with the child. If the suspect continues to do so, they may be arrested and prosecuted for an offence under Section 2 of the Child Abduction Act 1984 (a child under 16) or Section 49 of the Children and Young Persons Act 1989 (child under 18 under a care order). http://www.cps.gov.uk/legal/p_to_r/prosecuting_cases_of_child_abuse/#kidnapping

- Proactive use of legislation to challenge and confront inappropriate behaviour, including: Anti-Social Behaviour Orders, Risk of Sexual Harm Orders, Sexual Offences Prevention Order
- Using legislation to enforce/prevent children accessing certain premises, businesses or individuals
- Using housing legislation to close down premises used for the purposes of CSE
- Targeting private hire and taxi drivers who knowingly transport vulnerable young for the purposes of CSE (including revocation of individual drivers licenses)
- Visible policing in areas where CSE is known or suspected to be taking place
- Trigger plans to deal with any street contact with victims or suspects

12.6 Child Abduction Warnings

12.6.1 Child Abduction Warnings, advising against actions which could lead to a prosecution for the offence of Section 2 of the Child Abduction Act 1984 can be used to disrupt contact between an adult and a child or young person where a child is under 16 years old (or under 18 years old and in local authority care under a section 31 care order). It is an offence for a person not connected to the child to take the child away from the person with lawful control of the child, without lawful authority or reasonable excuse. Although in these cases a complaint from the child or young person is not necessary, it does require the child's parent or guardian to make a statement. This can include the residential child care staff or foster carers acting in the role of corporate parents.

12.6.2 Child Abduction Warnings are a useful tool in terms of immediately breaking contact between the child and the individual exploiting them. They also ensure that the suspected perpetrator cannot claim they did not know the age of the child. The suspected perpetrator's details and the fact that they have been issued a Child Abduction Warning will be recorded on the Police National Computer (PNC).

13. Evidence gathering and information sharing

13.1 Information sharing and multi-agency working is central to safeguarding and promoting the welfare of children and young people vulnerable to, at risk of and/or abused through CSE.

13.2 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 record 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.

13.3 The CSE lead professional in each agency must work in partnership with their counterparts in other agencies to ensure that information and intelligence is recorded and shared appropriately. Effective recording systems should be in place to enable information to be shared between agencies, support individual investigations and enable local areas to monitor and map sexual exploitation to identify specific problems and monitor trends.

13.4 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.

13.5 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.

13.6 Photographic evidence of the conditions in which a child was kept could also provide valuable evidence for charges of kidnapping or false imprisonment. Police officers attending may wear body cameras for this purpose.

13.7 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.

14. CSE information sharing Tool (Annex 1)

14.1 The purpose of this tool is for agencies to record any information that may be important and relevant for the police in order to build intelligence, for example:-

- Vehicle details including registration/make/model/colour etc.
- Details/descriptions including names/nicknames of suspected perpetrators.
- Details/descriptions of unusual/regular callers to children's homes.
- Phone numbers of suspected perpetrators.
- Address details of suspected perpetrators
- Details of any addresses or localities where the child may have been taken

14.2 This information will help the police keep an overview of linked crimes/cases etc. and help build intelligence and a bigger picture in relation to organised criminal networks etc.

14.3 This tool is a way of formalising information sharing between agencies and the police, and it is not to be used as a referral tool to children's social care.

15. Working with children involved in or at risk of CSE

15.1 Children and young people who are at significant risk of experiencing abuse through CSE can easily become labelled as 'streetwise' or 'problematic' rather than being at risk and in need of support. Intervention, support and action should be based upon the child's individual needs and be delivered by a trusted worker in conjunction with a protective network of appropriate agencies.

15.2 Working with children and young people for whom CSE is an issue requires a holistic approach through investment of time and resources in long term intervention. An important aspect of the work can be maintaining contact with and being available to children until they reach a point where they are ready to think about their situation and accept support. The process and effort spent by a worker on relationship building can be an important factor in bringing them to that point.

15.3 Establishing a positive trusting relationship with such vulnerable children and young people takes time. A relationship needs to be developed which offers something tangible to the child. At the same time it is important to acknowledge that workers are not providing a friendship and that there are inescapable power differentials. Change needs to happen at a pace that is set by the child and which provides real choices and promotes a sense of positive control for the individual. Working with children who are exposed to grooming and CSE requires an approach that is non-judgmental. There is a need to be consistently honest and to listen to and respect their views.

15.4 Workers need to be realistic about expectations and to understand that this is long term, intensive work, where progress will not always go forward, and where some level of regression is likely.

15.5 Children abused through CSE need tenacious adults who will never give up on them and who never lose faith that at some point the child will be ready to disclose and/or ready to break away from the abuse. The child may test this resolve.

15.6 Workers also need to avoid colluding with the child and should actively seek opportunities to discuss the risk the child is facing and the options available to support them away from the abuse.

15.7 Working with a child involved in CSE is stressful and the worker will be carrying high levels of anxiety and risk. It is important that this risk is shared through the CSE Safeguarding Plan and that the worker receives regular, high quality supervision.

15.8 If the child is in local authority care, the staff or carers should be asked to take positive action to clarify and record any concerns and minimise the child's involvement in CSE.

15.9 Part of the on-going support to the child should include support to continue with, or re-engage with education, to access appropriate health advice and support including sexual health and contraceptive services, to develop interests away from the CSE including having access to experiences which are fun and exciting.

15.10 Where children give evidence which may lead to prosecutions all professionals will play a role in supporting them through the process.

16. Supporting Parents, Carers and Families

16.1 Child sexual exploitation affects children from all backgrounds and often their parents or carers will be the first to pick up signs that something is wrong. Where a parent or carer approaches services their concerns must be listened to carefully. It may be helpful to use the CSE Screening Tool with the parents or carer to help identify the concerns and whether they are indicative of CSE or point to other concerns.

16.2 In a small minority of cases the parents or carers or wider family may be implicit or complicit in the CSE and attempts should be made to assess this at the earliest stage to ensure lingering concerns do not become a barrier to effective working or compromise any police investigation.

16.3 Unless there are grounds to suspect that the parent or carer are implicated they should be treated as key partners in safeguarding and protecting their child, they should be encouraged to record and share all information (including using the CSE information sharing tool) and should be encouraged to be active participants in all professionals meetings.

16.4 Where the parents, carers or wider family members are implicated this should be dealt with as with any other child protection issue, including through discussions with the police in a strategy meeting.

16.5 In some cases the parents will have additional needs such as mental health problems, disabilities, drug or alcohol problems or domestic abuse. In such cases consideration should be given to how best support the parents. That is likely to be through the appropriate adult services. In such cases the child protection professionals must ensure close working with the adults' workers. Where there is not a professional linked to the adult and they do not meet the criteria for services in their own right consideration should be given to a team approach with one worker allocated to the child and another to support the parents or carers. Clarity of roles and responsibilities and good communication will be essential.

16.6 Other parents may not have an identified additional need but may still have presenting issues which warrant support from professionals. This can be support by an Integrated Family Support Worker. Parents can also access support via Parents Against Child Sexual Exploitation (PACE).

16.7 In most families the parents and carers are best placed to protect their child and strategies should be put in place to support them in this role.

16.8 Parents, carers and other family members, including siblings are likely to be distressed by what is happening to their child and are likely to experience feelings such as anger, powerlessness and fear. This will be compounded if they do not understand what steps are being taken to protect their child and to deal with their

abusers. It is important that there are clear lines of communication and that parents and carers are kept informed at all stages of the process.

17. Victim and witness support

17.1 Victims and witnesses involved in cases of CSE are particularly vulnerable. Victim support is vital in its own right but is also an important aspect of ensuring a successful prosecution. Many of the issues facing young victims and witnesses are addressed in a CPS policy document on prosecuting cases involving children and young people as victims and witnesses and the CSE Team will provide advice and support on this. You can access the CPS guidance on this link: http://www.cps.gov.uk/legal/v_to_z/safeguarding_children_as_victims_and_witnesses/

17.2 Special measures are available for any witness under 17, and can be requested for a vulnerable or intimidated witness of any age. For those under 17 it would be usual for evidence to be video-recorded, and for a live link to be used. These measures can also be made available to vulnerable and intimidated witnesses. Other measures available include the use of screens, communications aids, and clearing the public gallery (for sexual offences). Indeed the court will consider any difficulty faced by the young witness provided that it is brought to their attention. Given the protracted nature of investigations in sexual exploitation cases it is not unusual for a young person to have reached the age of 18 before the case comes to court. It is important that consideration should be given to applying for special measures in these cases.

17.3 The CSE Team will lead on this but any professional who feels a child will need Special Measures should raise this with the CSE Team.

Special Measures for Victims/Witnesses in Court

18.4 Special measures include the following. It is important that these are considered on an individual basis and discussed with the child concerned. Assumptions should not be made for the child as, for example, some children do decide they want to actually face their abuser(s) in court rather than give evidence via video link.

- Using a video of their evidence to give their account of what happened;
- Answering questions from the defence using the live link from another room;
- In sexual cases, giving evidence in private by clearing the court of people who do not need to be there;
- Advocates and judges in the Crown Court removing their wigs and gowns;
- Aids, such as sign and symbol boards, for children who have difficulty speaking;
- Screens to prevent a witness who is in court from having to see the defendant;
- An intermediary to help explain the questions or answers if necessary.

18. The CSE Team

18.1 The CSE is multi-agency team including members of the police, DCST, Education, health and voluntary sector. It was established to tackle child sexual exploitation across Doncaster. It is based at Mary Woollett Centre.

18.2 The team provide an initial point of contact for advice and information where there are concerns about child sexual exploitation, will take referrals either directly to the police officers within the team or from the children and families assessment teams. The team work directly with children, young people and families where there are concerns about CSE, with allocated social workers and other professionals to provide advice and support to families. The team have a strong focus on achieving successful prosecutions as a key way to safeguard and protect children. They plan and deliver disruption activity and are the single point of information sharing to ensure any trends and patterns are identified and acted upon.

18.3 The CSE Team lead on the completion of the CSE risk assessment and risk management plan, convene strategy discussions and multi-agency CSE planning meetings.

The CSE Team can be contact via email CSE.admin@doncaster.gcsx.gov.uk or by telephone on 01302 737200

19. The Risk Assessment Tool

The CSE risk assessment tool indicates when intervention, support and action are required for children and young people at any given time. The assessment should be made on the basis of known risk indicators or immediate vulnerability factors, as well as recognition of a history of disadvantage or background vulnerability factors.

The Risk Assessment tool can be used to enable all professionals to be aware of the types of indicators of harm likely to be present when a child or young person is being or is likely to be sexually exploited. Identifying the presence of these risk factors can help professionals decide what level and types of interventions may be appropriate.

The Risk Assessment Tool builds on the Screening Tool and is designed to be used when the screening tool identifies risk of CSE. In most cases the CSE Team will lead on the completion of the Risk Assessment Tool but this should not prevent other professionals from completing it as part of a referral to children's social care.

The needs of children and young people who are being or are likely to be sexually exploited will change over time. Service responses need to be flexible to respond to these changes. Early intervention is essential to prevent escalation of harm.

The risk assessment tool is intended to assist professionals in deciding what types of intervention and supportive action will be required for children and young people at any given time. These decisions will follow an assessment of the needs of the young person and, in particular, the impact of the sexual exploitation they are experiencing on their welfare. The types of evidence based interventions offered should be appropriate to the child's needs, taking full account of the identified risk factors of sexual exploitation. These decisions about services provision should also address

relevant information relating to the young person's personal and family history including:-

- Social exclusion (exclusion/truancy from school, from health services).
- Poverty and deprivation.
- Prior experience of sexual, physical and/or emotional abuse.
- Familial and community offending patterns.
- Prevalence of undiagnosed mental health problems

20. Information Sharing

20.1 Sharing information is essential to protect children and young people from suffering harm from abuse or neglect and this includes where there are risks or concerns relating to child sexual exploitation.

20.2 The sharing of information amongst professionals working with children and their families is essential. In many cases it is only when information from a range of sources is put together that a full picture is created where a child can be seen to be vulnerable, in need or at risk of harm. Appropriate sharing with other practitioners and agencies is essential if children and families who may be in need of support and services are to be identified at an early stage before problems become serious. Sharing can also enable information from different cases to be put together and assist the process of assessing levels of concern and any potential risks.

20.3 In many instances a failure to pass on information, that might have prevented a child suffering harm, would be far more serious and dangerous than an incident of unjustified disclosure. It would be preferable to have to defend a decision to share information before the Information Commissioner rather than defend a decision not to share before the coroner.

20.4 Where there are concerns that a child may be being harmed or abused, there is no legal or ethical restriction on sharing information between child protection agencies. In most child protection investigations it would be highly unusual to request consent during the initial phase of an investigation because of the high risk of compromising the investigation. This is particularly the case when Police officers and social workers are conducting a joint investigation, including about CSE. Information should always be exchanged when such disclosure is necessary for the purposes of child protection.

20.5 There is an information sharing tool attached to this Handbook which will ensure information is captured and shared in such a way that the police can capture it onto their intelligence system. It is really important that all professionals use this format for sharing information.

How does this person know this information?

Did they see something first hand/hear something first hand?

What were the circumstances?

Is the information second hand i.e. has someone told them?

Who has told them and how did this person know the information?

When did they first know the information to be correct?/How old is the information?

Who else knows the information?

Was anyone else present when the information source saw/heard/was told the information?

Do other people know the same information?

Is the source willing to speak to Police?

Please email completed form to the following email addresses (The email address is only monitored 7am – 6pm)

Sheffield.intelligence@southyorks.pnn.police.uk

Rotherham.intelligence@southyorks.pnn.police.uk

Barnsley.intelligence@southyorks.pnn.police.uk

Child Sexual Exploitation Screening Tool

Form EVOLVE02: Child Sexual Exploitation Screening Tool

Doncaster Child Sexual Exploitation Multi-Agency Team

The purpose of the tool is to enable professionals to assess a child's level of risk of child sexual exploitation (CSE) in a quick and consistent manner. The screening tool can be applied to all children (male and female) under the age of 18 years and is to be used by anyone who has a concern that a child may be being sexually exploited.

Important points to remember when considering CSE:

- Both girls and boys can be victims of child sexual exploitation and are equally vulnerable.
- The coercer(s) and perpetrator(s) are usually an adult(s), but children and young people can also act in a sexually abusive way towards other young people or exert power e.g. group/gang members of either gender.
- Children and young people may exchange or sell sex as a result of constrained choices such as poverty, isolation and historic abuse.
- Although it is rare, parents/carers may be involved in the sexual exploitation of their children.
- Groups of children and multiple perpetrators may be involved (organised abuse).
- No child under 13 years should be assessed as Low Risk if behaviours indicate a risk of CSE.
- Children with additional needs require special consideration up to the age of 21 years.
- No child with a learning disability should be assessed as Low Risk if behaviours indicate involvement in or risk of CSE.
- Be aware: disclosure of information by the child may take time and evident risks may only emerge during on-going assessment, support and interventions with the child and/or family.

Guidance on the use of the screening tool

1. Completion of the Screening Tool by the professional identifying the concerns should involve liaison with other agencies to ensure that there is multiagency Information sharing and support.
2. The screening tool is intended to assist the exercise of professional judgment by assisting professionals to consider the risk of harm to a child. Professionals are encouraged to go beyond the child's presenting behaviour e.g. missing episodes and to explore what else might be going on for this child/young person.
3. If a child presents with one indicator, action is required. Early intervention improves the chances of positive outcomes. One indicator is unlikely to require Children's Social Work Services or specialist services intervention unless it is a Significant Risk category.
4. Assessing or screening for child sexual exploitation should not be seen as a one off event. Young people can move very quickly between risk categories, therefore regular assessment should be undertaken using the Screening Tool. Any escalation of risk should be dealt with in accordance with DSCB procedures.

5. Using the CSE Multi-agency Threshold Descriptors alongside the Screening tool will determine which the level of intervention required dependant on the assessed level of risk. If in doubt please contact the Multi-Agency Safeguarding Hub (MASH) Tel: 01302 737777 or by e-mail to childrenassessmentsservice@doncaster.gcsx.gov.uk .
6. Disruption and prosecution of perpetrator/s is also of significant importance therefore, any information which comes to light about the victim/s or Perpetrator/s (however insignificant this may seem) should be passed on to the Police.

IMMEDIATE SAFEGUARDING CONCERNS: If you are concerned that a child or young person is at immediate risk of harm then you should dial '999' and tell the Police. If you have any information which might help protect a child you should dial '101'.

Form EVOLVE02: Child Sexual Exploitation Screening Tool
Doncaster Child Sexual Exploitation Multi-Agency Team



Details of Person completing the Screening tool			
Name		Telephone No'	
Organisation/role		e-mail address	

Personal Details of Child / Young Person			
Family Name		Address	
First Name (s)			
Middle name (s)			
Gender			
Date of Birth <i>(dd/mm/yy)</i>	Click here to enter a date.	Post code	
CCM No <i>(CYPS only)</i>		School / Education setting	
Social care case level	Choose an item.	Assessment Date <i>(dd/mm/yy)</i>	Click here to enter a date.
Ethnicity	Choose an item.	Age at time of Assessment	

Strong Indicators of CSE (select all appropriate options)

Perpetrators Details

Family Name	First Name (s)	Middle Name (s)	Alternative Name	Date of Birth	Gender	Ethnicity	Age
				Click here to enter a date.		Choose an item.	
Family Name	First Name (s)	Middle Name (s)	Alternative Name	Date of Birth	Gender	Ethnicity	Age
						Choose an item.	

Risk Assessment

Significant risk (select all appropriate options)

Previous victim of CSE	<input type="checkbox"/>	Unexplained gifts or additional mobile phone	<input type="checkbox"/>	Visiting hotels with adults	<input type="checkbox"/>	Visiting nightclubs with adults	<input type="checkbox"/>
Recruiting others into exploitative situations	<input type="checkbox"/>	Meeting known or unknown adults inappropriately	<input type="checkbox"/>	Being groomed to meet via the internet	<input type="checkbox"/>	Transported from town to town for sexual activity with adults	<input type="checkbox"/>
Clothes / phones / money / jewellery / drugs / cigarettes	<input type="checkbox"/>	Over sexualised appearance	<input type="checkbox"/>	Associating with known CSE perpetrators or victims	<input type="checkbox"/>	Presence at hotspot CSE areas such as taxi ranks, bus stations, off licences and take away	<input type="checkbox"/>
Information of direct involvement in CSE from reliable sources	<input type="checkbox"/>	Engaging in sexual activity with adults or with peers at young age	<input type="checkbox"/>	Presence of frequenting red light areas	<input type="checkbox"/>		

Comments:

Considerable change in school performance / attendance / behaviour	<input type="checkbox"/>	Multiple callers to address	<input type="checkbox"/>	Receiving calls/text from unknown person / additional unexplained mobile phone or other mobile device	<input type="checkbox"/>	Self-harming and/or suicide tendencies / Substance misuse	<input type="checkbox"/>
Association with other victims of CSE	<input type="checkbox"/>	Multiple boyfriends/girlfriends	<input type="checkbox"/>	Sexualised risk taking (including internet)	<input type="checkbox"/>	Involvement in crime or anti- social behaviour	<input type="checkbox"/>
STI or Emergency Hormonal Contraception	<input type="checkbox"/>	Forming relationships via internet	<input type="checkbox"/>	Missing or Absent from home episodes	<input type="checkbox"/>	Entering or leaving unknown vehicles	<input type="checkbox"/>
Found in areas with no known connection	<input type="checkbox"/>	Over sexualised behaviour for age	<input type="checkbox"/>	Involvement in exploitative relationships	<input type="checkbox"/>	Involved in gang type activity	<input type="checkbox"/>
Association with risk adults	<input type="checkbox"/>	Pregnancy and/or termination	<input type="checkbox"/>	Unexplained relationships with adults	<input type="checkbox"/>	Evidence of self-harming	<input type="checkbox"/>
Older boyfriend/girlfriend	<input type="checkbox"/>	Unexplained physical injuries	<input type="checkbox"/>	Exclusion from school due to behaviour – may not have been excluded - reduced timetable/alternative provision	<input type="checkbox"/>	Change in physical appearance - weight loss/ weight gain / external signs such as extreme fatigue or sudden increase in make-up, tattoos, piercings etc	<input type="checkbox"/>
Comments:							

Early Indicators of CSE (select all appropriate options)							
Absent/truanting from school	<input type="checkbox"/>	Detached from age related activities	<input type="checkbox"/>	Lack of interest in education	<input type="checkbox"/>	Physically aggressive to other family members	<input type="checkbox"/>
Frequent poor behaviour	<input type="checkbox"/>	Secretive relationships	<input type="checkbox"/>	Returning home late	<input type="checkbox"/>	Secretive behaviour	<input type="checkbox"/>
Becoming estranged from family	<input type="checkbox"/>	Mood swings	<input type="checkbox"/>	Hostility towards other family members	<input type="checkbox"/>	Secretive about internet use	<input type="checkbox"/>
Change in appearance – including sudden increase in make-up or tattoos or piercings etc	<input type="checkbox"/>	Change in sporting or leisure activities/ interests (e.g. no longer interested in football / dancing when they used to be)	<input type="checkbox"/>				
Comments:							

Vulnerability Factors (select all appropriate options)							
Live in a chaotic or dysfunctional family	<input type="checkbox"/>	Low self-esteem or confidence	<input type="checkbox"/>	Parents with mental health problems	<input type="checkbox"/>	Live in residential or foster care or unstable adoptive placement	<input type="checkbox"/>
Drugs or alcohol abuse	<input type="checkbox"/>	Mental health problems	<input type="checkbox"/>	Sexually active	<input type="checkbox"/>	Subject of bullying	<input type="checkbox"/>
History of sexual abuse within the family	<input type="checkbox"/>	Social or learning difficulties	<input type="checkbox"/>	Recent bereavement or loss	<input type="checkbox"/>	Homeless	<input type="checkbox"/>
Parents with drugs or alcohol abuse	<input type="checkbox"/>	Migrant, refugee or asylum seeker	<input type="checkbox"/>	Unsure of their sexual orientation	<input type="checkbox"/>	Previous victim of CSE	<input type="checkbox"/>
Lack of protective factors within family unit	<input type="checkbox"/>	History of domestic abuse within the family	<input type="checkbox"/>				
Comments:							

Additional Comments			
Name(s) and Signature(s) of Professional(s) making this assessment			
Name		Name	
Role		Role	
Agency		Agency	
Signature		Signature	

Multi Agency Management Decision			
Name(s) and Signature(s) of Multi Agency Management making this Decision			
Name		Name	
Role		Role	
Agency		Agency	
Signature		Signature	

Name		Name	
Role		Role	
Agency		Agency	
Signature		Signature	

Resources

The information in this section links a range of resources for professionals own learning and development and also resources for working directly with children and young people at risk or, or being abused through child sexual exploitation. The final section is specialist organisations providing support for parents and carers. Professionals may find it helpful to consider information in all 3 sections.

This needs to be a dynamic document and as professionals identify useful resources not listed here please do send details to the DSCB (DSCB@dcstrust.co.uk) so they can be added.

Please note professionals should wherever possible work to the online document to ensure they do not miss any updates.

As a start point do look at the Doncaster Safeguarding Board Website and the multi-agency training programme as there may already be training or information available which meets your needs. For single agency training some of these resources may be worth following up.

Resources for professionals (note most of the resources for working with children and young people would be good learning materials for professionals too).

CEOP: Child Exploitation and Online Protection Centre. Provides many useful resources including training programmes for professionals. There is a short video on what to look out for in relation to grooming. There are great resources for working with children and young people too. To access training materials you have to register to use the site. It is a simple process which takes 5 minutes and is free. www.CEOP.police.uk/

Google Alerts : sign up for Google Alerts and you will receive weekly or daily (you choose) emails on topics of interest which you select. Go to www.google.com/alerts to set yours up. Useful topics might be child sexual exploitation, child trafficking etc. You may need to refine your search as these generic titles will include international alerts.

Stop It Now: Resources and training materials. Also develop bespoke training packages including child sexual exploitation. Much of the material on the site is about sexual abuse rather than CSE. There are a couple of very useful downloadable leaflets including 'The Internet and Children – What's The Problem'. This would be really useful for schools and young people's workers and for parents too. It covers the use of internet and technology for grooming. Access via the Lucy Faithful Foundation link below.

The Lucy Faithfull Foundation is the only UK-wide child protection charity dedicated solely to reducing the risk of children being sexually abused. They work with entire families that have been affected by abuse including: adult male and female sexual abusers; young people with inappropriate sexual behaviours; victims of abuse and other family members. The LFF provide bespoke training and also

specialise in work with offenders. Their focus is on sexual abuse rather than child sexual exploitation but much of their material is transferable. www.lucyfaithfull.org

NSPCC: a national organisation with a wide range of information and advice on the web site. This includes 'Casenotes' – reports on key issues including links relevant to CSE such as running away and sexual abuse. There is a professional advice section which includes some good resources linked to 'Young People With Harmful Sexual Behaviour'. www.nspcc.org.uk

National Working Group for Sexually Exploited Children & Young People: The National Working Group (NWG) is a charity and UK wide network of practitioners, policy makers and researchers working with children and young people who are at risk of, or who experience, sexual exploitation. Their primary aim is to offer support and advice to those working with children and young people affected by sexual exploitation. For more information about the National Working Group and child sexual exploitation, visit <http://www.nationalworkinggroup.org/>

Resources for working with children and young people (although they may also be useful for raising awareness in staff teams and with individual workers)

CEOP: Child Exploitation and Online Protection Centre. Provides many useful resources including training programmes for professionals. There are great resources for working with children and young people too. To access training materials you have to register to use the site. It is a simple process which takes 5 minutes and is free. www.CEOP.police.uk

My Dangerous Loverboy: a campaign to raise awareness of internal trafficking of children for the purpose of sexual exploitation. Includes a short video which can be used with young people in 1-1 or group settings to get them thinking and talking about what is happening to them. www.mydangerousloverboy.com/

The End Of My World – by Emma Jackson. This is a book written by a young woman who experienced abuse through child sexual exploitation. It is a powerful story of the author's experiences and would be good for professionals to read to raise their awareness and understanding of one model of abuse. It is also suitable for young people to read albeit powerful and explicit in relation to Emma's abuse. It would be a good book for professionals to read alongside a young person or group and discuss the issues raised. Professionals would need to use their discretion about the suitability of the content for work with an individual child and are advised to read it themselves to enable them to make that judgement.

Resources For Families - these are mainly support services and information.

Life centre: www.lifecentre.uk.com/index.html

Lifecentre is a UK based charity that supports survivors of rape & sexual abuse. It offers a national helpline

Mosac: MOSAC (Mothers of Sexually Abused Children) is a voluntary organisation supporting all non-abusing parents and carers whose children have been sexually abused. They provide advocacy, advice and information, befriending, counselling, play therapy and support groups following alleged child sexual abuse. Visit

www.mosac.org.uk for more information or call their national helpline on 0800 980 1958.

NAPAC: is the National Association for People Abused in Childhood. It is a registered charity providing support and information for people abused in childhood. Visit www.napac.org.uk/.

SURVIVORS UK: provides information, support and counselling for men who have been raped or sexually abused. Thousands of men contact them each year. Visit www.survivorsuk.org/ or call their national helpline on 0845 1221201. Helpline hours: 7pm-9.30pm Mon/Tue/Thu.

Parents Protect: General information about protecting children from sexual abuse. Focus largely on intra familial sexual abuse but some useful information on signs of abuse and impact on the child. Parents of young children abused through child sexual exploitation may find some of this material useful. www.parentsprotect.co.uk