

Child Sexual Exploitation (CSE) Operating Protocol

Authors	Grant Landon - ESCB Business Manager, Caroline de Groot - CSEP Team Manager, Linda Helliard - Cross Borough CSE Project Lead	Classification	OFFICIAL - PUBLIC	Date of First Issue	July 2015
Owner	Anne Stoker Head of Safeguarding	Issue Status	Final	Date of Latest Re-Issue	March 2017
Version	0.3	Page	Page 1 of 25	Date of Next Review	March 2018

CONTENTS

1. Introduction.....	3
2. Definitions	3
2.1. What is CSE?.....	3
2.2. Key facts about CSE.....	4
2.3. What are the signs and symptoms of child sexual exploitation?	4
2.4. Good practice – Individuals.....	4
3. Process	5
3.1. Referral.....	5
3.2. CSE risk Level 1 - Referrals to SPOE and Early Help	5
3.3. CSE risk Level 2 and 3 - Referrals from the SPOE to the CSE Prevention Team.....	5
3.4. Cases open to Children’s Social Care	7
3.5. Stepping Down.....	7
3.6. Single Point of Contact (SPOC) and the Multi-Agency Sexual Exploitation (MASE) Meeting.	8
3.7. Disruption and Enforcement.....	8
3.8. Escalation	10
4. Appendices	11
4.1. Appendix A – SAFEGUARD Risk Assessment Tool.....	11
4.2. Appendix B – Form 87A.....	17
4.3. Appendix C – MASE Agenda.....	20
4.4. Appendix D – MASE Update Template	21
4.5. Appendix E –CSE Process Flow Chart	22
4.6. Appendix F – CSE Reports, Studies, Policies, Protocols	23
4.7. Appendix G – Key Contacts	24

1. Introduction

Child Sexual Exploitation is a form of Child Abuse and causes children and young people serious harm. This operating protocol has been developed by the Enfield Safeguarding Children Board (ESCB) to assist practitioners from all agencies to make decisions and to access timely support when working with children and young people who are at risk of, or known to be experiencing Child Sexual Exploitation (CSE). It is very important that the protocol is not read in isolation. There are several other key documents designed to support practitioners working with CSE which should be referred to. These documents along with a range of supporting tools and documents can be found on the ESCB website on the CSE webpage <http://www.enfield.gov.uk/lscb/cse>. There are six key documents which should be referred to when considering appropriate action on CSE cases.

1. [The London Safeguarding Board Child Protection Procedures – Safeguarding Children from Sexual Exploitation](#) chapter which was refreshed in February 2016.
2. The Pan-London [Child sexual exploitation operating protocol](#) which has been developed by the Metropolitan Police.
3. The [Enfield Threshold Document](#) which was refreshed in March 2016
4. The [London Child Protection Procedures](#) including the Threshold Document
5. [Working Together to Safeguard Children](#) which was revised in March 2015.
6. Enfield's Missing Children Protocol

2. Definitions

2.1. What is CSE?

The statutory definition of CSE was updated in February 2017. The new definition is:

“Child sexual exploitation is a form of child sexual abuse. It occurs where an individual or group takes advantage of an imbalance of power to coerce, manipulate or deceive a child or young person under the age of 18 into sexual activity (a) in exchange for something the victim needs or wants, and/or (b) for the financial advantage or increased status of the perpetrator or facilitator. The victim may have been sexually exploited even if the sexual activity appears consensual. Child sexual exploitation does not always involve physical contact; it can also occur through the use of technology.”

The manipulation or ‘grooming’ process involves befriending children and gaining their trust. Child sexual exploitation can occur through the use of technology without the child’s immediate awareness: for example, being persuaded to post sexual images on the Internet/mobile phones, without immediate payment gain.

In all cases, those exploiting a child or young person 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 or young person’s limited availability of choice due to their social/economic and/or emotional vulnerability.

The link between children being sexually exploited and children going missing is very strong. Some 140,000 children go missing from home or care in the UK each year and it has been estimated that running away places around a quarter of these at risk of serious harm. Children and young people

who run away may be 'pushed away' following abuse or other factors or 'pulled away' wanting to be near friends or because they are being exploited by adults.

2.2. Key facts about CSE

- Sexual exploitation often starts around the age of 10 years old (but can affect much younger children) Girls are usually targeted from age 10 and boys from age 8.
- It affects both girls and boys and can happen in all communities.
- Any person can be targeted but there are some particularly vulnerable groups: Looked After Children, Children Leaving Care and Children with Disabilities.
- Victims of CSE may also be trafficked (locally, nationally and internationally).
- Over 70% of adults involved in prostitution were sexually exploited as children or teenagers.
- Sexual violence or abuse against children represents a major public health and social welfare problem within UK society, affecting 16% of children under 16. That is approximately 2 million children.

2.3. What are the signs and symptoms of child sexual exploitation?

Grooming and sexual exploitation can be very difficult to identify. Warning signs can easily be mistaken for 'normal' teenage behaviour and/or development. However, parents, carers, school teachers and practitioners are advised to be alert to the following signs and symptoms:

- inappropriate sexual or sexualised behaviour
- exhibiting sexually harmful behaviour
- repeat sexually transmitted infections; in girls repeat pregnancy, abortions, miscarriage
- having unaffordable new things (clothes, mobile) or expensive habits (alcohol, drugs)
- going to hotels or other unusual locations to meet friends
- getting in/out of different cars driven by unknown adults
- going missing from home or care or school
- having older boyfriends or girlfriends
- associating with other young people involved in sexual exploitation
- truancy, exclusion, disengagement with school, opting out of education altogether
- unexplained changes in behaviour or personality (chaotic, aggressive, sexual)
- neglect of self, withdrawn
- drug or alcohol misuse
- getting involved in crime
- injuries from physical assault, physical restraint, sexual assault (Barnardo's, 2011; CEOP, 2011; Berelowitz et al, 2012).

2.4. Good practice – Individuals

- Recognise the symptoms and distinguish them from other forms of abuse
- Treat the child/young person as a victim of abuse
- Understand the perspective / behaviour of the child/young person and be patient with them
- Help the child/young person to recognise that they are being exploited
- Collate as much information as possible
- Share information with other agencies and seek advice / refer to Social Care

3. Process

3.1. Referral

- 3.1.1. Professionals in all agencies should be alert to the possibility that a child they are in contact with may be being sexually exploited. The professional may already have concerns about the child e.g. that s/he is missing school, frequently missing from home, misusing substances or is depressed or self-harming etc. See 3.4 above for more symptoms.
- 3.1.2. If a professional has information that indicates that a child is at risk of harm or is the victim of a criminal offence through CSE a referral **must** immediately be made to the [Single Point of Entry \(SPOE\)](#) using an Early Help Assessment Form. If it is an emergency, then a referral must be made to the Police.

3.2. CSE risk Level 1 - Referrals to SPOE and Early Help

- 3.2.1. The Referral will be considered within the SPOE as part of the Multi-Agency Safeguarding Hub (MASH) process and further information will be obtained from other agencies. As part of improved cross-border working, where CSE is identified as a concern, a MASH to MASH check will be made with Haringey to see if any information is held there. If a CSE risk is identified a referral will be sent directly to the Child Sexual Exploitation Prevention (CSEP) Team.
- 3.2.2. When a child / young person is referred to the CSEP Team they will immediately triage the referral using the SAFEGUARD screening tool. Where the child / young person is considered to be at risk **Level 1** the Child Sexual Exploitation Prevention (CSEP) Team will coordinate the Team Around the Family (TAF) and other relevant agencies will be involved dependent upon need. It may be advisable to hold a **Professionals Meeting** to focus specifically on the CSE needs. Consideration should be given to whether parents and/or young people should be invited to this meeting and professionals should be mindful of issues around consent for information sharing. The overriding priority is of course the safety of the child/young person. This will be chaired by the team manager of the CSEP Team. Notes from the meeting should be shared with all attendees
- 3.2.3. If concerns persist and it is considered that there might be Safeguarding concerns the case will need to be escalated to level CSE 2/3 and Child Protection processes should be followed in accordance with the [London Guidance](#). The CSEP Team will allocate a social worker as the lead professional should the case reach level 2/3.
- 3.2.4. If at any stage professionals working with the child / young person are concerned that the situation has escalated, a discussion with the CSEP Team should be considered.

3.3. CSE risk Level 2 and 3 - Referrals from the SPOE to the CSE Prevention Team

- 3.3.1. Where the child/young person is considered to be at risk **Level 2** or **Level 3**, the SPOE worker will conduct the usual MASH information sharing checks and then make a referral to the CSEP Team which is within Children's Services division.
- 3.3.2. **Note:** If a referral is received in the SPOE for child/young person who is already open to a social worker the information will be passed directly to the allocated social worker. See 3.4 below.

- 3.3.3. When a child / young person is referred to the CSEP Team they will immediately triage the referral using the SAFEGUARD screening tool. Where the child/young person is considered to be at risk **Level 2** or **Level 3** a **strategy discussion** will be held in line with Child Protection processes (Section 47) in accordance with [London Guidance](#). For cases where the **strategy discussion** indicates that a Section 47 enquiry (Child Protection process) is required see 4.3.6 below. For cases where the strategy discussion indicates that Section 17 (Child in Need process) should be followed see 4.3.11 below.
- 3.3.4. It is important for professionals using the SAFEGUARD screening tool to pay attention to the accompanying guidance notes. The tool is intended to aid the exercise of professional judgment by assisting professionals to consider the risk of harm to a child. Professionals are encouraged to think beyond the child's presenting behaviour e.g. missing episodes and to explore what else might be going on for the child/young person. Assessing or screening for child sexual exploitation should not be seen as a one-off event. Young people can move very quickly between the risks categories; therefore regular assessment should be undertaken using the Screening Tool.
- 3.3.5. For all cases where a Social Worker will be involved an **87A Form** (see Appendix C) will be completed fully and sent to the Police Child Abuse Investigation Team (CAIT). Further detail about Police processes following this referral can be found below at **4.7**
- 3.3.6. For all cases where a social worker will be involved there should be consultation with the **Empower Project** for additional advice and support. Phone: 0207 021 0301
- 3.3.7. When a child is suspected of being at risk of significant harm through sexual exploitation a Section 47 Enquiry must be undertaken by a social worker within the CSEP Team. This will involve a **Strategy Meeting** with the Police, Health, Education and other relevant workers. It is very important that the Strategy Meeting clearly focuses on and documents the CSE issues as well as any other concerns relating to the child / young person.
- 3.3.8. The Strategy meeting in most cases will be chaired by a CSEP Team Manager. However, where this situation is particularly complex, or involves several children/young people, a senior manager from the Safeguarding and Quality Assurance Service (SQAS) can be asked to chair the meeting.
- 3.3.9. The Strategy meeting will be recorded in the Social Care ICS system as part of the Section 47 process. Notes from the meeting should be shared with all attendees.
- 3.3.10. If the decision is made that a Child Protection Conference is not required, then Child in Need (CIN) procedures will be followed. See 4.3.12 below
- 3.3.11. If the decision is made to proceed to a Child Protection Conference, agency reports should clearly document the CSE concerns. If the decision is made not to make the child / young person subject to a Child Protection Plan, then Child in Need procedures should be followed. If the child / young person is made subject to a Child Protection Plan, then the plan should clearly document the CSE issues and related actions. These should be explicitly revisited and reviewed at all subsequent Core Group Meetings and Review Child protection conferences.

- 3.3.12. In cases where Social Work intervention is required under Section 17 (Child in Need) rather than Section 47 (Child protection) a Social Work assessment will be undertaken in the usual way by the CSEP Team.
- 3.3.13. A Child in Need Plan will be developed which should clearly document the CSE issues and related actions. These will be explicitly revisited and reviewed at all subsequent Child in Need Reviews.
- 3.3.14. Social Workers will provide information to the **MASE** meetings (see 4.6.2) as required. Where they are the lead agency they will be responsible for collating information from other involved agencies using the MASE update template. (Appendix D)
- 3.3.15. Periodically, at least every six months, the Social Worker will revisit the SAFEGUARD Tool to assess risk which will inform planned interventions.
- 3.3.16. Cases will remain open to the CSEP Team until;
- a) the child/young person becomes subject to a Care Order, at which point the case should be transferred to the Looked After Children (LAC) team in line with Children's Social Care transfer guidelines or,
 - b) risks related to CSE are no longer a factor. At this point the case should either be 'stepped down' in accordance with procedure or, where social work involvement is still required, be transferred to the Child Protection / Family Support Team with Team Manager's agreement.

3.4. Cases open to Children's Social Care

- 3.4.1. When CSE concerns are identified for a child/young person already open to children's social care the allocated Social Worker should consult with their line manager and with relevant others in the team such as the CSE Champion and/or the CSE lead. The SAFEGUARD screening tool will be applied and the same processes as above (from 4.2.3) will then be followed depending on the identified level of concern. If the child/young person is Looked After or subject to a Child Protection Plan the Social Worker must inform the Independent Reviewing Officer (IRO) of the concerns. The IRO /Conference Chair will determine if an early Review is required to consider any changes to the Plan for the child.
- 3.4.2. The key difference is that in these cases the allocated Social worker will keep the case and it will **not** be passed to the CSEP Team. However, the allocated Social worker may contact CSEP Team for advice and additional support. An **87A Form** (see Appendix C) will be completed fully and sent to the Police Child Abuse Investigation Team (CAIT). Further detail about Police processes following the referral can be found below at **4.6**.
- 3.4.3. Periodically, at least every six months, the Social Worker will revisit the SAFEGUARD Tool to assess risk which will inform planned interventions.

3.5. Stepping Down

- 3.5.1. Where ongoing social work support is no longer required the case should be 'stepped down' to Early Help agencies in the usual way.

3.6. Single Point of Contact (SPOC) and the Multi-Agency Sexual Exploitation (MASE) Meeting

3.6.1. There are three CSE Single Points of Contact (SPOCs) in Enfield representing Social Care, Health and the Police. The SPOCs key functions are; to be a conduit for the flow of information regarding CSE within their service and with other services, represent their service in the coordination of CSE referrals and to triage and prioritise referrals in advance of the monthly MASE meetings to ensure there is focused, structured discussion on cases and person of concern.

3.6.2. **Multi-agency Sexual Exploitation (MASE)** meetings are police-led and convened on a monthly basis. They follow the **MASE Meeting Agenda** (Appendix C). They are attended by the strategic CSE lead for each agency. The meetings are designed to provide a forum in which to;

- Share information and intelligence to identify trends, perpetrators/persons of concern and hotspots to aid disruption, interventions and future planning and to help develop an understanding of individual cases where CSE has been identified.
- Provide a strategic approach to confronting CSE in premises or businesses, utilising preventative action (media, youth services) and enforcement (Police, Licensing etc.) where appropriate.

3.6.3. Cases will be discussed at each MASE meeting and progress updates will be provided. Cases will continue to be discussed at MASE meetings whilst the risk to the child / young person remains significant. The Lead Agency will collate responses of other involved agencies using the **MASE Update Template** (Appendix D)

3.6.4. It is important to remember that actions should not be delayed whilst waiting for a discussion at the next MASE meeting. Action to protect Children from CSE should be a priority for all agencies and the MASE meeting serves as a process to ensure that activity is taking place and is co-ordinated. MASE meetings do not replace Strategy or MAP meetings; information from one should inform the other.

3.7. Disruption and Enforcement

Police

3.7.1. The priority for the police is the investigation and prosecution of offenders who have been involved in abusing the child / young person through sexual exploitation. This role should be undertaken in accordance with the principle of multi-agency co-operation to safeguard children.

3.7.2. Police may become aware of children being involved in sexual exploitation through normal police work on the streets and in other criminal investigations.

3.7.3. The initial police response to the discovery of a child who is being, or is at immediate risk of being, abused through sexual exploitation, must be to remove them from the source of harm and ensure that any necessary evidence is secured. This action must be followed by referral to Children's social care.

3.7.4.If there are suspicions that a child is a victim of sexual exploitation, but there is no immediate or direct evidence, the police officer noting the concern should refer to the Child Abuse Investigation Team (CAIT)

3.7.5.When a referral is received by CAIT either from the Police or on an **87A** from the CAIT officer will discuss the issues and risks with the referrer. Those cases assessed as Level 1 and requiring Police intervention will be sent to the **Enfield Borough Fugitive Unit** for further work. Those cases assessed as Level 2 and 3 will be sent to the **Sexual Exploitation Team** at the Sexual Offences, Exploitation Child Abuse Command.

3.7.6. Police Officers will work closely with Social Workers and other involved professionals and will attend Strategy meetings.

Other enforcement/disruption options

3.7.7.CSE is played out in a variety of arenas governed and regulated by the local authority. The community safety, regulatory, housing tenancy and taxi licensing functions of the local authority, alongside the use of civil remedies and tools and powers to tackle nuisance, can all make very significant contributions to disrupting CSE and building evidence for criminal prosecutions. Options can include:

- **Child Abduction Warning Notice**

Section 2 Child Abduction Act 1984; Section 49 Children's Act 1989.

Authorised by a child's parent and issued by the police (or the local authority in the case of a looked after child aged 16-18) warns a suspected perpetrator to stop associating with a named child. As such, the adult is made aware that a concern has been raised about the relationship and that authorities are watching.

Abduction Notices can be used as evidence in criminal proceedings that the adult knew the age of the child, which is clearly stated on the warning notice. Moreover, breach of an Abduction Notice can become grounds for the issuing of the new Sexual Risk Order.

- **Sexual Risk Order**

Anti-social Behaviour and Crime Policing Act 2014

This order can be issued against an individual who has 'done an act of a sexual nature which suggests that they pose a risk of harm to the public in the UK or children and vulnerable adults abroad'. An 'act of a sexual nature' has not been defined in the legislation and the guidance states this 'will depend to a significant degree on the individual circumstances of the behaviour and its context', which means this order may be used by police and the NCA to disrupt grooming activity. An SRO lasts a minimum of two years and has no maximum duration. Breach of an SRO is a criminal offence, which can attract a term of imprisonment of up to five years.

- **Sexual Harm Prevention Order**

Anti-social Behaviour and Crime Policing Act 2014.

This order can be made against a person who has been convicted or cautioned in relation to a sexual offence to protect any members of the public in the UK, or

vulnerable adults and children abroad, from sexual harm, including protecting children from grooming activity. The SHPO must be made for a minimum of 5 years and can be made for an indefinite period if necessary. The order can contain any prohibitions aimed at protecting children and others. Breach of a SHPO is a criminal offence, which can attract a term of imprisonment of up to five years.

- **Closure notice**

Anti-social Behaviour and Crime Policing Act 2014.

The police can issue a closure notice in respect of premises which they have reasonable grounds for believing have been, or are likely to be, used for activities related to specified child sex offences. The changes mean that closure powers will now capture a wider range of offences relating to child sexual exploitation and the police will be able to take proactive action if they believe the premise is going to be used for child sex offences.

- **Tenancy enforcement**

Working with housing providers to use tenancy enforcement to stop or disrupt CSE activity.

- **Injunctions**

The use of civil court injunctions as enforcement against those who are perpetrators or those who allow activity to continue.

3.7.8. All these options should be considered with advice from the Community Safety Unit as they would be the applicants for most of the options above

3.8. Escalation

3.8.1. In the event of disagreements between professionals about the progress of a case and/or when there are concerns that agencies are not following agreed procedures [the ESCB Escalation Policy](#) should be referred to and followed.

4. Appendices

4.1. Appendix A – SAFEGUARD Risk Assessment Tool



CSE Risk Assessment Tool

The purpose of the SAFEGUARD tool (is to enable professionals to assess a child/young person'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.

The Tool can be used by anyone who has a concern that a child may be being sexually exploited. The screening toolkit has been adopted by all agencies in Enfield

- Completion of the Screening Tool by the professional identifying the concerns should, where possible, involve liaison with other agencies to ensure that there is multiagency information sharing and support.
- 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.
- Assessing or screening for child sexual exploitation should not be seen as a one-off event. Young people can move very quickly between the risk categories; therefore, regular assessment should be undertaken using the Tool.

Information on what action should be taken following completion of the tool can be found on the Enfield CSE web page <http://www.enfield.gov.uk/lscb/cse>

SAFEGUARD – CSE Risk Assessment Tool

Name of Child / Young Person					
DoB					
Unique Identifier					
LAC	CP	CIN	N/A	*Please indicate	
Is the child/young person disabled?			YES	NO	*Please indicate
Name & agency of person completing					
Date completed					
Category	Areas of concern (these are prompts to aid risk assessment)				Comments
<p style="text-align: center;">S</p> <p>SEXUALISED RISK TAKING</p> <p>SEXUAL HEALTH</p>	<ul style="list-style-type: none"> • Allegations of sexual harm • Overt sexualised attire, meeting adults via internet. • Getting into adult's cars • Older boyfriend/girlfriend • Clipping (offering sex then running upon payment) • Sexual transmitted Infections (STIs) • Girls - Miscarriages, terminations 				
<p style="text-align: center;">A</p> <p>ATTENDANCE (EDUCATION / TRAINING)</p>	<ul style="list-style-type: none"> • Truancing (internal or external) • Non-school attender / school refuser / excluded • Regular breakdown of school placements due to poor behaviour 				

<p>F</p> <p>FAMILIAL ABUSE</p> <p>AND OR</p> <p>PROBLEMS AT HOME</p>	<ul style="list-style-type: none"> • History of abuse / neglect (including sexual abuse) • Breakdown in family relationships • Domestic violence and/or high levels of family conflict • Parental substance misuse / Mental ill health • Highly abusive and criminal familial environment 	
<p>E</p> <p>EMOTIONAL HEALTH AND PHYSICAL CONDITION</p>	<ul style="list-style-type: none"> • Poor self-image, self-harm (cutting, overdose, eating disorder, sexualised risk taking) • Physical injuries • Chronic low self-esteem, self-harm (as above), bullying/threatening behaviour • Violent outbursts, offending behaviour 	
<p>G</p> <p>Gangs and Groups ASSOCIATIONS</p>	<ul style="list-style-type: none"> • Associating with unknown adults and/or other sexually exploited children/young people • Gang member or associating with known gang members. • Extensive use of phone (esp. at night), • Access to premises not known to carer, seen in red light districts, reports from reliable sources suggesting involvement in CSE • Picked up in red light district or in premises not known to parent/carers or premises of concern <ul style="list-style-type: none"> • Reduced contact with family and friends 	

<p>COERCION CONTROL</p>	<ul style="list-style-type: none"> • Limited contact with family/friends, disclosure/withdrawal of allegation of assault, external/internal physical injuries • Abduction and forced imprisonment (locked in), no contact with family/friends, no contact with support systems, physical injuries 	
<p>U</p> <p>USE OF TECHNOLOGY</p> <p>AND</p> <p>SEXUAL BULLYING</p>	<ul style="list-style-type: none"> • Making video recordings, using dating chat rooms / forums, circulating images and images being shown. • Threatened and/or blackmailed through media and images being shown. • Actively making and circulating sexual images. 	
<p>A</p> <p>SUBSTANCE MISUSE</p>	<ul style="list-style-type: none"> • Experimenting with alcohol/drugs • Regular use of substances and/or concern about dependency • Chronic drug dependency particularly crack/heroin • Used to facilitate the transportation of drugs (either locally or involving trafficking) 	
<p>R</p> <p>REWARDS</p>	<ul style="list-style-type: none"> • Unaccounted for money/ goods, including; mobile phones, jewellery, designer clothes/accessories, drugs & alcohol. • May also include accommodation, transportation and affection. 	

D	<ul style="list-style-type: none"> • Regularly returns home late or goes out without permission • Goes missing regularly (day or night) • Repeated placement breakdowns. • Pattern of street homelessness. • Distrust of authority figures (including parents, support workers, police) 		
DISTRUST			
RUNNING AWAY			
Any other comments			
What level of risk of Child Sexual Exploitation do you consider this child/young person is at?			
Level of Risk	1 / Low	2 / Medium	3 / High

Action to be taken

LOW RISK of sexual exploitation but may be at risk of being groomed for sexual exploitation.

Action to take: If the case is not known to Social Care, it should be referred to the Single Point of Entry (SPOE) on an Early Help Form. The case should then be allocated to a lead professional. If the case is known to Social Care, the social worker and relevant professionals should make a plan for focused early intervention and diversion to safeguard and enable the child to protect themselves, to recognise and avoid risky behaviours and people and to engage in positive activities and relationships.

MEDIUM RISK and may be being targeted for opportunistic abuse through the exchange of sex for drugs, accommodation (overnight stays), and goods etc. The likelihood of coercion and control is significant.

Action to take: If the case is not known to Social Care, it should be referred to the SPOE for the case to be assessed and allocated to the CSEP Team and managed as a child protection case, with a Strategy meeting and planning as necessary. If the case is known to Social Care, the same

process should apply to share and clarify information, and develop a safeguarding and support plan for the child and parent/carer as per the London Child Procedures Safeguarding against Child Sexual Exploitation. In both cases, an 87a form should be completed at the time the concern is raised to be sent both to the Child Abuse Investigation Team (CAIT) and the Fugitive Unit for a decision on the categorisation of CSE risk. If assessed as a Category 2 case, it will progress to the Multi-Agency Sexual Exploitation (MASE) meeting.

HIGH RISK. Exploitation is likely to be habitual, often self-denied and coercion and control is implicit.

Action to take: If the case is not known to Social Care, it should be referred to the SPOE for the case to be assessed and allocated to the CSEP Team and managed as a child protection case. A Strategy meeting should be convened and a lead agency decided upon. A Child Protection social worker should be allocated. If the case is known to Social Care, the same process of convening a MAP meeting should apply to share and clarify information, and develop a safeguarding and support plan for the child and parent/carer as per the London Child Procedures Safeguarding against Child Sexual Exploitation. In both cases, an 87a form should be completed at the time the concern is raised to be sent both to the Child Abuse Investigation Team (CAIT) and the Fugitive Unit for a decision on the categorisation of CSE risk. If assessed as a Category 3 case, it will progress to the MASE meeting.



**METROPOLITAN
POLICE**

Working together for a safer London

**SPECIALIST CRIME DIRECTORATE
Child Abuse Investigation Command - SCD5
Referral to Police**

Police Admin only

Date of Receipt:

Time:

CPU/URN

Receiver:

Sexual

Physical

Neglect

Other

(A) Referrer

Name	
Agency Address	
Tel. No.	
Email Address	

(B) Details of Child / Young Person

Family Name		Forenames	
Date of Birth		Male <input type="checkbox"/>	Female <input type="checkbox"/>
		Ethnicity	Religion
First Language		Interpreter Required?	
Home Address			
Current Location of Child			
School Address		Tel. No.	
GP Details			

(C) Family Members / Others in Household

Family Name	Forenames	DoB	MF	Ethnicity	Relationship to Child

--	--	--	--	--	--

(D) Suspect(s)

Family Name	Forenames	DoB	MF	Ethnicity	Relationship to Child

(E) Existing Risk Factors

Victim	Yes	No	U/K	Source and Reference
Repeat victim (min: 2 times in rolling 12 months)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Repeat MISPER (min: 2 times in rolling 12 months)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Subject of Child Protection Plan	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Sexualised behaviour by victim	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Victim's injury caused by weapon / implement	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Young age / Pre-mobile baby	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Substance misuse / alcohol abuse	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Disability	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Privately fostered	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Home educated	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Mental health issues	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Trafficking	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Other	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Suspect	Yes	No	U/K	Source and Reference
Evidence of grooming / control	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Suspected of / history of previous abuse	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Suspected of / history of domestic violence	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Tendency towards violence	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Substance / alcohol misuse	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Mental health issues	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Other	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Household	Yes	No	U/K	Source and Reference

Mental health issues (suspect/family)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Chaotic / co-sleeping arrangements	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Emotional stressors within the household (financial, illness, high conflict separations)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Divided family structure	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Person with new or revived access to the child	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Deprivation or poverty in home/local area	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Substance misuse (amongst family/household)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Other	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

(E) [Existing Risk Factors - continued]

Is there any evidence or reason to believe the carer is deceitful or manipulative?

(F) Reason for Referral

Summarise risk factors and current risk assessment

--

(G) Details of Strategy Discussion

Decisions:

(H) Police Only

Reference		OIC	
Supervisor			

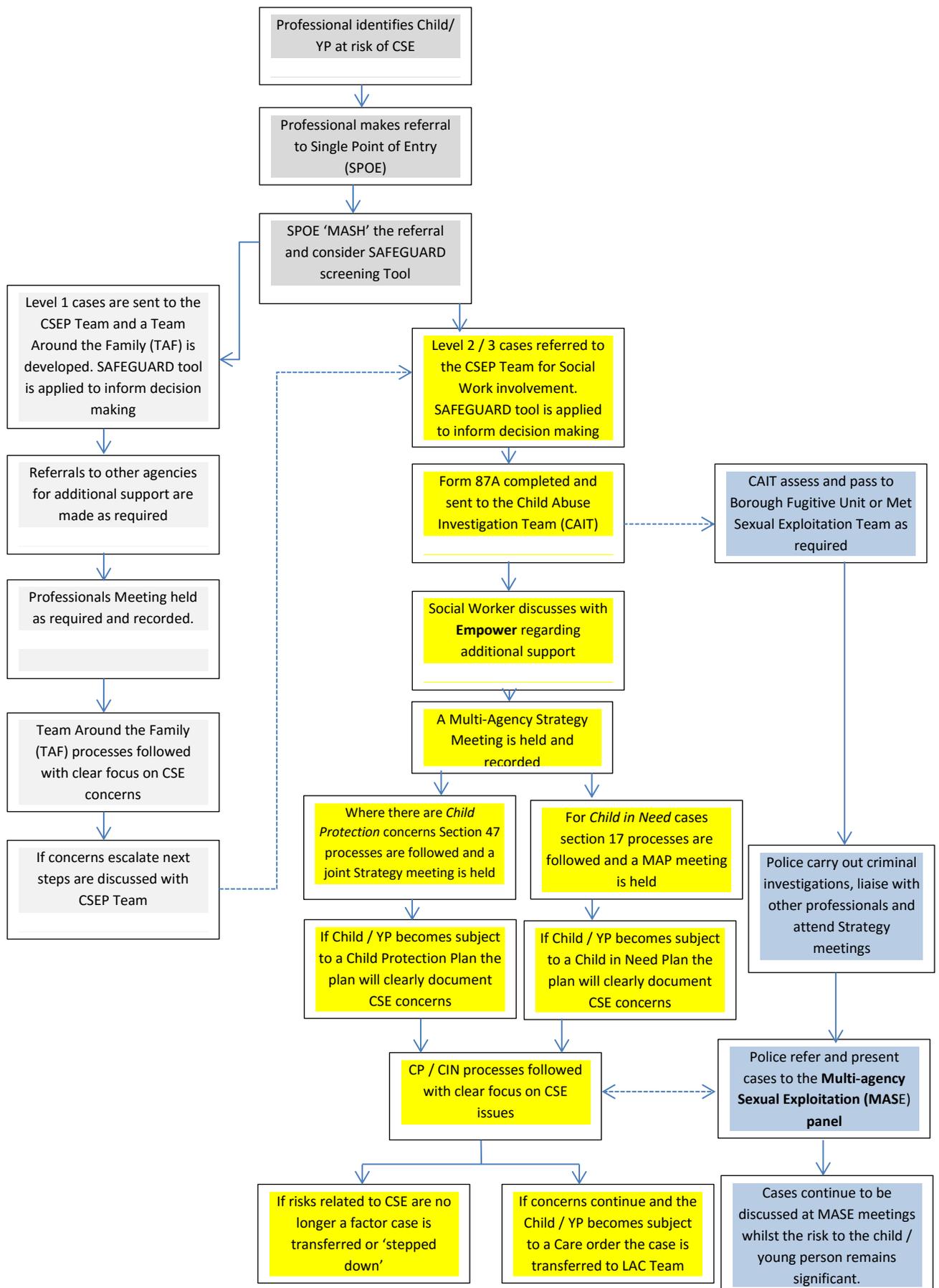
Retention Period: 7 Years
MP 716/11

4.3. Appendix C – MASE Agenda

Multi-Agency Sexual Exploitation (MASE) Meeting AGENDA

- 1. Welcome, introductions and apologies**
- 2. Minutes of previous meeting**
- 3. New cases and cases with new concerns**
- 4. Review cases**
- 5. Cases to be discussed to be closed**
- 6. Children residing out of borough** (*information from liaison with local area, review of identified risks*)
- 7. LAC placed in Enfield by other local authorities**
- 8. Cross border issues** (*identification of trends, review of contact/joined up working with neighbouring boroughs*)
- 9. Persons of Concern** (*to ensure all control/disruption measures have been taken and perpetrators have access to support programmes*).
- 10. CSE Profile/ CSE data from Met Police (Quarterly)**
- 11. Themes, Location and Trends** (*issues identified from the problem profile, progress against issues identified. Identification of other agencies/departments that may need to be involved*)
- 12. Any other business**
- 13. Date of next meeting.**

4.5. Appendix E –CSE Process Flow Chart



4.6. Appendix F – CSE Reports, Studies, Policies, Protocols

There has been considerable discussion and media coverage of the topic of Child Sexual Exploitation across the country in the last few years. A number of national and regional reports and studies have been published. Some of the key reports, together with their recommendations are listed below. (please click the blue links to access the reports).

[*If only someone had listened* - Office of the Children's Commissioner's Inquiry into Child Sexual Exploitation in Gangs and Groups Final Report \(2013\)](#)

[*If it's not better it's not the end* - One Year on. Office of the Children's Commissioner's Inquiry into Child Sexual Exploitation in Gangs and Groups Final Report \(2014\)](#)

[Independent Inquiry into Child Sexual Exploitation in Rotherham \(1997 – 2013\) - Alexis Jay \(2014\)](#)

[*It couldn't happen here could it?* - Sexual exploitation of children: Ofsted thematic report \(2014\)](#)

[Summary of Recommendations: A summary of all recommendations from a range of Reports, Inquiries, Serious Case Reviews and Research', NWG Network Tackling Child Sexual Exploitation \(2014\)](#)

[Report of inspection of Rotherham metropolitan borough council – Louise Casey \(February 2015\)](#)

[Reflections on CSE - Louise Casey \(March 2015\)](#)

[Real Voices: Child sexual exploitation in Greater Manchester \(October 2014\)](#)

[Confronting Child Sexual Exploitation in London – London Assembly Police & Crime Committee \(March 2015\)](#)

There are a two key London wide policies and protocols

[The London Safeguarding Board Child Protection Procedures – Safeguarding Children from Sexual Exploitation](#)

[Child sexual exploitation operating protocol \(pan London\) – \(March 2015\)](#)

There are a number of Enfield-specific reports and documents

[ESCB CSE briefing \(January 2015\)](#)

[ESCB CSE leaflet - A guide for Young People \(February 2015\)](#)

[ESCB Wallet Card - A guide for Young People \(February 2015\)](#)

4.7. Appendix G – Key Contacts

A list of key contacts for CSE. This list is not exhaustive.

For further information visit the ESCB website www.enfieldscb.org

Agency	Contact	function	Telephone	Email / website
Single Point of Entry (SPOE)		CSE Referrals	020 8379 5555	spoe@enfield.gov.uk
Child Sexual Exploitation (CSE) Team	Caroline de Groot	CSE Social Work Team	0208 379 5800	Caroline.deGroot@Enfield.gov.uk
Empower (Safer London)	Sarah Goodwin	Advice and support	07850630208	Sarah.goodwin@enfield.gov.uk
Young Runaways	Fabrizio Proietti	Advice and support	08000514222	FabrizioProietti@stchris.org.uk
Solace Women's Aid		Advice and Support	0808 802 5565	Advice@solacewomensaid.org
ChildLine (national)		Advice and Support	0800 1111	www.childline.org.uk
NSPCC				www.nspcc.org.uk
Thinkuknow		Advice and Support		http://www.thinkuknow.co.uk/
MASE		Referrals to MASE	0208 345 4347 (24347)	