CSE and CCE Transition to Adult Services Procedures

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Author:	Hannah Cole	Sign & Date:	08.04.2024
Interim Service Directors:	Jo England Maria Shepherd	Sign & Date:	08.04.2024
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Related Documents

Reference	Title	Tier
	The Children Act 1989	
	Children and Families Act 2014	
	The Care Act 2014	
	The Children Act 2004	
	Working together to safeguard children (updated July 22)	
	West Berkshire Council Child Exploitation (CE) (December 2020) Procedure and guidance for professionals working with children and and families vulnerable to, or at risk from Exploitation both Child Sexual Exploitation (CSE) and Child Criminal Exploitation (CCE).	

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1 Purpose

- 1.1 This document is intended to provide guidance to frontline staff on the service response to children and young people who have experienced, or are experiencing, sexual and criminal exploitation and are now approaching adulthood.
- 1.2 This document recognises that there are additional risks to young adults who have experienced Child Exploitation which include: mental health difficulties, criminal behaviours, alcohol and drug misuse, domestic abuse and having social care involvement with their own children.

It is recognised that some young adults may decline further intervention from services, and this should be recorded appropriately either by Children and Family Services or Adult Social Care, depending on the timing.

2 Applicability

2.1 What is child sexual exploitation?

Child sexual exploitation (CSE) is a form of child sexual abuse. It affects any child or young person under the age of 18 years including 16 and 17 years of age who can legally consent to have sex. It can happen in person or online or a combination of both. A key feature of child sexual exploitation is that the child may not recognise the coercive nature of the relationship and does not see themselves as victims. This is because the relationship could be framed as friendship or someone to look up to. Child Sexual Exploitation can be difficult to spot and can be mistaken for normal teenage behavior.

2.2 What is child criminal exploitation?

Child Criminal Exploitation (CCE) occurs where an individual or group takes advantage of an imbalance of power to coerce, control, manipulate or deceive a child or young person under the age of 18 into any criminal activity (a) in exchange for something the victim needs or wants, and/or (b) for the financial or other advantage of the perpetrator or facilitator and/or (c) through violence or the threat of violence. The victim may have been criminally exploited even if the activity appears consensual. Child Criminal Exploitation does not always involve physical contact; it can also occur using technology.

Young people who are victims of Child Criminal Exploitation include those who are:

- Trafficked within the UK with the intention of being used to commit criminal acts that benefit the trade of drug and criminal gangs.
- Coerced into the supply, transporting, and dealing of drugs. They may be doing this within their local area; however, they are often crossing one or more police force and local authority boundaries.
- Coerced into carrying drugs, weapons, and money to assist in the trade and movement of drugs.

3 Roles and Responsibilities

- 3.1 The Service Director for Adult Social Care has overall responsibility for ensuring that the transition process from Children and Family Services to Adult Social Care is managed appropriately in accordance with these agreed procedures.
- 3.2 All Adult Social Care and Children and Family Services staff are responsible for familiarising themselves with and ensuring that they comply with this procedure.

4 Refusal of assessment (Care Act 2014 Guidance)

- 4.1 Section 6.20 of the Care Act guidance states that "An adult with possible care and support needs or a carer may choose to refuse to have an assessment. The person may choose not to have an assessment because they do not feel that they need care, or they may not want local authority support. In such circumstances local authorities are not required to carry out an assessment. However, where the local authority identifies that an adult lacks mental capacity and that carrying out a needs assessment would be in the adult's best interests, the local authority is required to do so. The same applies where the local authorities identify that an adult is experiencing, or is at risk of experiencing, abuse, or neglect. Where the adult who is or is at risk of abuse or neglect has capacity and is still refusing an assessment, local authorities must undertake an assessment so far as possible and document this. They should continue to keep in contact with the adult and carry out an assessment if the adult changes their mind and asks them to do so".
- 4.2 Section 6.21 in instances where an individual has refused a needs or carer's assessment but later requests that an assessment is carried out, the local authority must do so. Additionally, where an individual previously refused an assessment and the local authority establishes that the adult or carer's needs or circumstances have changed, the local authority must consider whether it is required to offer an assessment, unless the person continues to refuse.

5 Where support is accepted

- 5.1 Where support is accepted, this may comprise of signposting to additional services (for issues as described above), advising and assistance with access to support, treatment and/or therapeutic services with the young person's consent.
- 5.2 There will also be a number of young people who have been identified as presenting risk to others, (persons of interest) who will also need to be identified and flagged for awareness purposes. Creating a risk entry on Care Director.

6 Children on Child Protection Plans (where CE is an additional concern) and CiN Plans

6.1 The above plans can all continue until the child's 18th birthday and then will cease. It is expected that where the allocated Social Worker has assessed the child (through the completion of a Children and Families Assessment) and identified a need for a referral to Adult Social Care, such a referral is made to the ASC Transitions Team by emailing the asctransitions@westberks.gov.uk inbox. It is also expected that before the allocated Social Worker makes such a referral, an agreement from the child, parent and the Core Group/CiN Group is sought.

- 6.2 The referral to Adult Social Care should happen before the child reaches the age of 17 and a half. The referral should consist of the relevant referral form, Children and Families Assessment, a revised CE Screening Tool, and CE Action Plan (if high risk). The allocated Worker from Adult Social Care will then be responsible for completing a Care Act Assessment prior to the young person reaching the age of 18 years.
- 6.3 Where a child is subject to a CiN Plan or Child Protection Plan, the need for involvement by Adult Social Care will be considered at the Conference Review 6 months before the child's 18th birthday, and if required a recommendation will be made in the CiN/CP Plan for a referral as described above within appropriate timescales, and the identified worker from Adult Social Care must be included and invited to the Core Group and Review Conference Meetings.
- 6.4 If this referral is accepted by Adult Social Care, it would be expected that the Adult Worker will become part of the Core Group/CiN Group as the child's 18th birthday approaches. It must be recorded on the child's record that a request has been made to Adult Social Care for ongoing support.
- 6.5 It is suggested that where appropriate the Adult Worker will be actively involved with the child and the plan at least 3 months prior to the child becoming 18. If the Transition worker identifies that there are safeguarding concerns still unresolved by the 18th birthday, then the Worker will raise a safeguarding concern with the Adult Safeguarding team.
- 6.6 The Local Authority has the power to undertake safeguarding enquiries when it would support the young person's well-being and prevent further abuse.
- 6.7 If a child is in Care Children and Family Services will remain involved to support the young person post 18th birthday. The Independent Reviewing Officer can also offer support post 18.
- 6.8 It is acknowledged that there may be a number of young people who may have been referred to Adult Social Care for further support under the CE Transition Procedure who will subsequently decline the involvement of Adult Social Care. Where possible the young person should be provided with details of how they could self-refer themselves in the future should they change their minds. There will be other circumstances where after consideration and assessment by Adult Services the most appropriate support will be an onward referral to other services, e.g. the Rahab Project.

7 Care Leavers

7.1 Children who have been in the care of the Local Authority will have an allocated Personal Advisor until the age of at least 21 (or 25 if they continue to be in full-time education). It is suggested that they retain "key worker" responsibility. However, if possible, a referral to Adult Social Care should still be made before the young person reaches the age of 17 and a half as per the process above.

8 EMRAC

Exploitation & Missing Risk Assessment Conference (EMRAC) will discuss already identified young people who are at risk of sexual exploitation or criminal exploitation. The multi- agency risk management meeting seeks to ensure children living in West

Berkshire are safeguarded and protected from harm in cases where they are or might be victims of CSE or CCE, or they are high risk missing children or children who regularly go missing. The purpose of the meeting is to:

- Consider the level and type of risk and what steps need to be taken to reduce the risks.
- Facilitate multi-agency discussion and sharing information.
- Contribute to planning for young people and children.
- Demonstrate how risks are being reduced.

High Risk (Level 3)

Young people assessed as high risk of CSE or CCE will have a CE Action Plan which will be completed following EMRAC within five working days which will be cross referenced with the relevant statutory framework meetings e.g. Strategy Meeting, CP Core Group or CIC review and will also be reviewed at the monthly EMRAC meeting. If a young person is assessed as high risk for three months or more the EMRAC chair or a relevant Service Manager will review the CE Action Plan and any other multi agency plan as a test of assurance that the case is not stuck, and risks are reduced.

Medium risk (Level 2)

Young people assessed as medium risk of CSE or CCE will be reviewed through the relevant statutory framework meetings e.g. Core Group or CIC review. Child in need cases will be reviewed through child in need or signs of safety meetings. The progress of the CE risks will also be reviewed at the EMRAC meeting, recommendations and minutes will be managed as above.

Low risk (Level 1)

For young people and children deemed at low risk of CSE or CCE if they are not subject to a statutory plan should be supported via services deemed to be universal or targeted. Services working with these young people should ensure monitoring of the case to identify any increase in risk early - The practitioner would then need to initiate the referral process. These children will remain on the monthly CE agenda as a mention only unless the risk indicator increases.

EMRAC meets monthly and it is jointly chaired by Senior Management from Safeguarding Team or the police. Criminal Sexual Exploitation Strategic group in partnership with WB Safeguarding Children's Partnership review policies, procedures, and practice standards

9 Young People who are "Persons of Interest" and adult perpetrators:

- 9.1 There are young people who are identified at EMRAC to be a risk to other young people. A decision is made at EMRAC as to whether they should be flagged as a "person of interest". There are also adults who are identified as posing a risk to children. There is a member of the Transitions Team who attends EMRAC as a core member and they are responsible for checking the adult database. Adult Social Care will add a flag as a risk on Care Director to the adult's record.
- 9.2 The details of these individuals will be sent to the Safeguarding Adults Team for them to check their records by the transition team.

10 Managing Transitions

10.1 It is important that the transfer of young people from Children and Family Services to Adult Social Care is a coordinated and managed process to ensure that no young people slip through the net and that they are supported to engage with the appropriate services (see appendix 1). EMRAC is the best placed mechanism and pathway for consideration and co-ordination of the transition process. The Transitions Team Leader attends EMRAC when requested and will follow up on referrals, co-ordinate ASC response including any necessary referrals to ASC Safeguarding.

The Leaving Care Team and OR EMRAC/OR other Children Services Teams will identify the child.

