**Child Sexual Exploitation**

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.

***(Department of Education, February 2017)***

**CSE Concern**

*(CSE is a safeguarding issue and needs to be reported to Children’s Social Care.)*

**NEW REFERRAL:**

* Complete CFAN (Child and Family Assessment Notification) outlining the CSE concerns (use CSE Screening Tool to help identify risks) and return to

[csll-socialcare@hounslow.gcsx.gov.uk](mailto:csll-socialcare@hounslow.gcsx.gov.uk)

* MASH Manager / Screening SW does screening assessment and decides whether MASH checks are needed and/or if case should progress through to Children’s Social Care.
* MASH Manager / Screening SW to liaise with CSE Police Officer to jointly review CSE risks and decide on actions.

**TRAFFICKING**

* Where there is a Trafficking case a National Referral Mechanism (NRM) should be made. <http://new.ecpat.org.uk/content/national-referral-mechanism>
* If there are Trafficking cases with CSE concerns the below steps should also be followed.

**ALLOCATED CASE:**

* Referrer to contact allocated social worker directly to share CSE concerns.
* SW to assess CSE risk using CSE Screening Tool (LCS under ‘Forms’). SW to ensure identified risks are incorporated in the CIN, CP and/or LAC Care Plan.
* SW to complete 87a police referral for a CSE Cris report to be created by police. 87a to be sent to;

[SCD5-CAITHounslow&RichmondatTF2@met.pnn.police.uk](mailto:SCD5-CAITHounslow&RichmondatTF2@met.pnn.police.uk)

**Returned Blue RAG**

**Returned Green RAG (EIS Services)**

**Returned RED RAG Children’s Social Care**

**Returned Amber RAG**

1. Information only -No further action required.

2. Referrer to be notified of outcome of the referral.

3. Referral / Contact is Closed.

* Case referred to Children’s Social Care and passed to the Intake Team for an assessment.

1. Following screening / MASH checks no current CSE concerns identified.
2. Referrer to be notified of outcome of the referral.
3. Information to be shared with referrer, young person and family on CSE support services i.e- CEOP, PACE, NSPCC, Women and Girls Network
4. Referral / Contact is Closed.

1.MASH Checks – Further information needed.

2.Joint decision to be made with partners re: risks and next steps.

3.Outcome is either – escalation to Red RAG and de-ecalation to Blue RAG and Referral / Contact is Closed.

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| **The SW team is responsible for ensuring the following safeguarding process are followed for CSE cases:** | | **Frequency:** | **Recording:** |
| **Strategy Discussion/ Meeting** | 1. A intial strategy discussion / meeting is to be held in all CSE investigations. 2. Strategy should decide if CP investigation threshold has been reached and plan the investigation. *Initial Safety Planning should also be undertaken in Strategy Meeting.* 3. Strategy discussion / meeting should include CSC (including fostering service if child is LAC), Police, Health, Education and other relevant bodies, such as referring agency. *E&V Co-ordinator to attend if possible.* | Should be held within 3 days of child protection concern being identified. *(London CP Procedures) .*  *The only exceptions are; if there is serious risk of harm to the child or allegations of penetrative sexual abuse and immediate action is required then a strategy should be held on the same day.* | Strategy forms in the main case file  ATM or above must chair all strategy meetings and agree S47 outcomes. |
| **MASE Information Form** | 1. Outcome of Strategy Discussion / Meeting will decide if MASE Information form should be completed. 2. The Mase Information form should include all CSE concerns and current investigations. An update should be obtained from all agencies involved. The MASE information form needs to include all details as it is shared with Multi-Agency’s who may not have prior knowledge of the case. 3. Updated MASE Information Form to be completed before case is reviewed at Pre-MASE meetings. | At point of referral to MASE and to provide updated information before each Pre-MASE meeting. | The MASE Information Form is on LCS under ‘Forms’ and follows on from the CSE Screening Tool. |
| **Complex Abuse Meeting** | 1. Complex Abuse Meeting to be held for one or more victims, abusers, locations or groups. 2. Manager to contact Safeguarding Advisor to decide if threshold has been met for a Complex Abuse meeting. 3. Complex Abuse Meetings should include nominated senior staff of CSC and the police. It will involve health, education and other agencies as required and, where necessary, must ensure coordination across LA boundaries. | Decision is made at an Intial Strategy Meeting whether to convene a Complex Abuse Meeting. | Strategy forms in the main case file. |
| **Safety Plan** | Safety Planning to be completed with young person around CSE risks & record actions to be taken by young person and professionals to keep the young person safe. | To be reviewed every 6 months or as risk changes. | Safety Plan on LCS under templates. |

**18+ CARE LEAVER REFERRALS**

* CSE Screening Tool to be completed.
* Planning Meeting (CSE Police to be consulted if needed) to review CSE risks / Safety planning for the case.
* Outcome of Professional Meeting to decide if MASE Information form should be completed. Mase Information form should include all CSE concerns.
* CSE Screening Tool and MASE Information form to be sent to ‘CSE/MASE Referral Tray’ (LCS).
* 18+ CSE Workspace will be opened for the PA and Manager to record CSE concerns / risks
* The MASE panel will collate the information and any intelligence and assess any risks directly to the young person or any other young people involved.

**CSE LAC OUT OF BOROUGH**

* Other Local Authority (OLA) should be notified by the SW **prior** to a child moving if there are CSE risks so they can assess localised risk.
* OLA should be notified of CSE risks and referral made to OLA MASE panel.
* Notification / Referral to Host Borough within 24 hours after a Strategy Discussion/Meeting if CSE risks arises after they are placed.

**MASE PROCEDURES**

**MASE**

Key Themes on **V**ictims, **O**ffenders, **L**ocations and **T**hemes (VOLT) to be circulated to partners to assist with planned prevention activity and strategies.

**Pre-MASE Meeting**

* MASE Information form is reviewed and a decision made if case is to be accepted onto MASE cohort.
* Pre MASE meeting will review new referrals and current CSE cases to decide if a case will be discussed at MASE meeting.
* **SW’s ARE REQUIRED TO PROVIDE AN UPDATE ON A ‘MASE INFORMATON FORM’ PRIOR TO ALL PRE-MASE MEETINGS FOR AN UPDATE ON THEIR CASE TO BE SHARED.**

-SW to send completed CSE Screening Tool and MASE Information form to ‘CSE/MASE Referral Tray’ (LCS). ***–only to be sent once above actions completed.***

**The E&V Co-ordinator will open the CSE Workspace for the social worker and manager on LCS. SW to record all CSE concerns /risks in the workspace, including case notes, safety plans.**