



# **Safeguarding Children Abused through Sexual Exploitation**

**This procedure  
should be read in conjunction with  
the London procedure for**

## **Safeguarding Sexually Active Children**

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### **Acknowledgement**

The London Safeguarding Children Board thanks Camden Safeguarding Children Board for providing the original draft to form the basis for this London Procedure.

## **1. Introduction**

### **1.1 Definition**

- 1.1.1 The sexual exploitation of children is child sexual abuse. The sexual exploitation of children defines a broader context of abuse than formal 'prostitution'; the full spectrum of sexually exploitative situations includes children and young people exchanging sex for accommodation, food, gifts, drugs and/or safety.

### **1.2 Summary profile**

- 1.2.1 Sexually exploited children are rarely visible on the streets, and it is therefore difficult to gather meaningful data. Moreover, street based sexual exploitation of children is only a small part of the bigger picture of sexual exploitation of children by adults and other children and young people. A recent Barnardo's study<sup>1</sup> identified a total number of 507 separate cases of child sexual exploitation in London, and the total number of children likely to be at risk across London was 1,002.

- 1.2.2 A growing number of the young people are being sexually exploited by adults and older young people they met via the internet. This is referred to as 'information and communication technology (ICT)-based abuse', and the access it affords to groom children for abuse has contributed to the invisibility of the sexual exploitation of children.

*See section 5.23 Information and communication technology (ICT)-based abuse, London Child Protection Procedures (London Board, 2007).*

- 1.2.3 The age range of children who are victimised through sexual exploitation has come down in recent years from the 16 - 18 age group, to children under 16 years of age. The evidence is that children across all cultures, and including a significant proportion of children in the care of local authorities, can be at risk of sexual exploitation. Vulnerability and low self esteem are the most common factors amongst children who are at risk of being sexually exploited.

- 1.2.4 In some cases, children may be drawn into sexual exploitation by peers who are already involved. Girls in particular are frequently coerced into sexual exploitation by an older young person or man who poses as, and who they view as, their boyfriend. The girl becomes physically and emotionally dependent upon the 'boyfriend', and this may be reinforced by the use of alcohol and drugs. Over time, the girl's access to her friends and family becomes curtailed and she becomes alienated from agencies which may be able to identify and interrupt the abuse.

### **1.3 This procedure**

- 1.3.1 This procedure should be read in conjunction with the London procedure for *Safeguarding sexually active children (London Board, 2006)*. In particular, *section 3. Assessment* in the *Safeguarding sexually active children* procedure provides guidance in assessing whether a relationship presents a risk of harm to a child.

- 1.3.2 The London procedure for *Safeguarding trafficked and exploited children (London Board, 2006)* provides guidance on identifying concerns that a child may have been or is currently being trafficked and exploited.

- 1.3.3 Professionals should consult the *London Child Protection Procedures (London Board, 2007)* for concerns, decisions and actions related to, but not covered, in this procedure.

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<sup>1</sup> Mapping the Sexual Exploitation of Children in London (Barnardo's, 2005)

## 2. Principles

2.1 The principles underpinning multi-agency response to the sexual exploitation of children include that:

- Sexual exploitation incorporates sexual, physical and emotional abuse, as well as, in some cases, neglect;
- Children do not make informed choices to enter or remain in sexual exploitation. Rather, they do so from coercion, enticement, manipulation or desperation;
- Children under 16 years old cannot consent to sexual activity; sexual activity with children under the age of 13 is statutory rape<sup>2</sup>;
- Sexually exploited children should be treated as victims of abuse, not as offenders. Children under 16 will always be dealt with as actual or potential victims. For young people from 16 to 18 years old, consideration may be given, in very limited circumstances and where all other options have failed, to the use of criminal justice action;
- Many sexually exploited children have difficulty distinguishing between their own choices around sex and sexuality and the sexual activities they are coerced into. This potential confusion needs to be handled with care and sensitivity. See also *Impact on children in section 5.23 Information and communication technology (ICT)-based abuse, London Child Protection Procedures (London Board 2007)*; and
- The primary law enforcement effort must be against the coercers and sex abusers, who may be adult, but could also be the child's peers or young people who are older than the child.

2.2 Sexually exploited children are children in need of services under the *Children Act 2004*. They are also children in need of protection. A multi-agency network or planning meeting / discussion should take place for all children considered at risk of sexual exploitation (see section 4 below). The younger the child, the more likely it is that the child protection procedures set out in *section 6. Referral and assessment, section 7. Child protection enquiries, section 8. Child protection conferences and section 9. Implementation of child protection plans* in the *London Child Protection Procedures, (London Board, 2007)* (as appropriate) should be followed. Child protection procedures should be followed where:

- The child is at immediate risk of significant harm and has other additional vulnerabilities;
- There is concern that the sexual exploitation is being facilitated by the child's parent / carer;
- There is concern that the sexual exploitation is facilitated by the child's parent failing to protect; or
- There is concern that a related or unrelated adult in a position of trust or responsibility to the child is organising or encouraging the sexual exploitation.

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<sup>2</sup> Sexual Offences Act 2003

### 3. Risk-vulnerability factors, categories, indicators and responses

#### 3.1 Vulnerability factors to sexual exploitation

3.1.1 Children are more vulnerable to abuse through sexual exploitation if they have experience of one or more of the following:

- Child sexual abuse;
- Domestic violence within the family;
- Family breakdown;
- Physical abuse and emotional deprivation;
- Bullying in or out of school;
- Family involvement in sexual exploitation;
- Parents with a high level of vulnerabilities (drug / alcohol, mental health etc);
- Drug / alcohol, mental health or other difficulties themselves;
- Being looked after in residential care; and
- Going missing frequently.

#### 3.2 Risk assessment framework<sup>3</sup>

3.2.1 The framework has been developed to help professionals in all agencies assess whether a child for whom they have a concern is at risk, at medium risk or high risk of harm through sexual exploitation. Indicators of risk of harm are grouped in the categories:

- Category 1 (At Risk): a vulnerable child who is at risk of being targeted and groomed for sexual exploitation;
- Category 2 (Medium Risk): a child who is targeted for opportunistic abuse through the exchange of sex for drugs, accommodation (over night stays) and goods, etc. The likelihood of coercion and control is significant; and
- Category 3 (High Risk): a child whose sexual exploitation is habitual, often self defined and where coercion / control is implicit.

3.2.2 The framework needs to be used flexibly to take account of each child's individuality, the uniqueness of his / her circumstances and the changes that may occur for him / her over time.

3.2.3 The risk assessment framework is set out in appendices 1 and 2.

See also *section 3. Assessment*, in the London Procedure for *Safeguarding sexually active children (London Board, 2006)* for guidance in assessing whether a relationship presents a risk of harm to a child.

#### 3.3 Initial professional response

3.3.1 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, is depressed or self-harming etc.

3.3.2 The professional should discuss their concerns with their agency's nominated safeguarding children adviser (nominated adviser) and, together with the nominated

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<sup>3</sup> Pearce, J.J. with Williams, M and Galvin, C (2002) *It's Someone Taking a Part of You*, London: National Children's Bureau

adviser, they should use the risk assessment framework to make an initial assessment of risk of harm to the child.

- 3.3.3 In cases where a child is considered to be at risk of harm (category 1), a plan for focused early intervention and diversion should be made to safeguard the child. Agencies should consider, in discussion with the LA children's social care lead professional for sexually exploited children (lead professional) – if the local authority has appointed one – or the child protection / service manager, the extent to which the agency is able to meet the child's needs themselves as a single agency, and how to proceed if not (see sections 4.1 and 4.2 below).
- 3.3.4 In cases where the risk is considered to be medium or high (categories 2 and 3), the professional and/or their nominated adviser should make a referral to LA children's social care in accordance with *section 6. Referral and assessment, London Child Protection Procedures (London Board, 2007)*.

## **4. Intervention**

### **4.1 Early multi-agency intervention**

- 4.1.1 Interventions to interrupt abuse through sexual exploitation and support children to recover a healthy lifestyle are more likely to be successful if a child who is at risk can be identified and information about concerns shared within a multi-agency support network, as early as possible.
- 4.1.2 Professionals are often in a position of having to develop the child's trust, or having built it up are concerned about breaking that trust through the sharing of confidential information with other agencies. These issues should be discussed with the agency's nominated safeguarding children adviser, and efforts made to share information as soon as possible. See *section 3. Information sharing, London Child Protection Procedures (London Board, 2007)*.
- 4.1.3 A professional or agency view that a child is at risk of harm (category 1) may be inaccurate. Sharing information about the child with other agencies may reveal the child to be at medium or high risk – and in need of immediate protection. The process for gathering information from the Metropolitan Police is described in *sections 3.4 and 3.5 and appendix 1. Police Information Request / Referral Process*, of the London procedure for *Safeguarding sexually active children (London Board, 2006)*.
- 4.1.4 All professionals should maintain clear contemporaneous records of contact with the child, their concerns, all information shared and discussed (and with whom), decisions made and actions taken.

### **4.2 Category 1: Multi-agency network meeting/discussion and diversion plans**

- 4.2.1 In cases where there are indications that a child is at risk of being groomed for abuse through sexual exploitation, professionals in any of the agencies may, after consultation with their agency's nominated safeguarding children adviser, call a meeting or discussion of the network of agencies currently in contact with the child (Network meeting / discussion). The aim of the meeting / discussion should be to develop a diversion plan to enable the child to protect themselves, to recognise and avoid risky behaviours and people and to engage in positive activities and relationships.
- 4.2.2 Network meetings / discussions should be attended by / involve agencies currently providing services for the child - e.g. the child's school and/or Education Welfare Officer, health services as appropriate (school nurse, sexual health professional, GP), LA children's social care lead professional or equivalent; and any other agency which is in a position to contribute significantly to the development of a diversion plan for the child.

- 4.2.3 Where appropriate, the child and their family should be made aware of the concerns, engaged in developing the diversion plan and involved in all subsequent network meetings to review the plan. However, engaging the child and family and alerting them to the risks should be approached with a high level of sensitivity to avoid compounding risks or furthering alienation. There are circumstances where a child's parent/carer may not be invited to attend a network meeting - these are set out in *italics* in the last bullet point, paragraph 4.3.5 below.
- 4.2.4 The meeting / discussion should be minuted and the diversion plan should be shared with relevant professionals in the child's professional network.
- 4.2.5 Agencies which have access to a family group conference service may wish to consider a conference as a way to formulate a diversion plan in partnership with the child and their family.

#### **4.3 Categories 2 and 3: Multi-Agency planning meetings and safeguarding and support plans**

- 4.3.1 In cases where a child is considered to be at high or medium risk of sexual exploitation, this assessment should be reached by the professional in consultation with their agency's nominated safeguarding children adviser. The professional and/or the nominated adviser should make a referral to their local LA children's social care service in line with *section 6. Referral and assessment, London Child Protection Procedures (London Board, 2007)*.
- 4.3.2 As in all cases of suspected abuse and neglect, LA children's social care will respond in one of three ways and will advise the referrer of which plan is in place:
- An initial assessment will be undertaken to identify the child's level of risk and need for service provision;
  - The initial assessment may identify the child to be at risk of significant harm and in need of protection. This will necessitate a child protection enquiry and a core assessment of need under section 47 of the *Children Act 1989*; or
  - Where no concerns are identified, there will be no further action. In these cases, LA children's social care will advise the referrer verbally and in writing as to why the agency is to take this position.
- 4.3.3 In cases where an LA children's social care initial assessment confirms that a child is at risk of significant harm, they must convene a multi-agency planning meeting (MAP) or equivalent, in order to determine whether child protection enquiries should be made in line with *section 7. Child Protection Enquiries, London Child Protection Procedures, (London Board, 2007)*.
- 4.3.4 MAP meetings should be chaired by a LA children's social care child protection manager / team manager or lead professional. The Chair should always inform the lead professional, if there is one, that a meeting is taking place.
- 4.3.5 Attendance at the meeting should include:
- The referrer, if a professional;
  - Lead officers from education and health services (sections 8 and 9 give more specific information for education and health);
  - Social worker if allocated;
  - LA children's social care duty senior if not allocated;
  - Any other relevant person (e.g. fostering link worker, residential key worker / manager YOT worker, voluntary agency worker, GP); and

- Identified police officer from the Child Abuse Investigation Command, Clubs and Vice or the Missing Person Unit.
- 4.3.6 Attendance at the meeting of the child and their family should only be considered if attendance will not compromise the child's safety or the progress of an investigation. The final decision should be taken by the LA children's social care child protection manager or team manager for the child's case. This decision should be clearly recorded on the child's case file.
- 4.3.7 Criteria for deciding whether or not to invite the child and their family includes:
- The child's age and level of maturity, taking into account learning difficulties;
  - The child's perception and interpretation of their involvement;
  - Patterns and frequency of any behaviour causing concern;
  - Identity and role of adults involved;
  - Age and maturity of other participants;
  - Nature of sexual activity, who is controlling the sexual activity, where it is taking place;
  - The actual and potential physical and emotional effects;
  - Whether any physical injuries have been caused;
  - Existence of substance misuse and their significance for the child's behaviour;
  - Likely reaction of parents/carers;
  - Likely reaction of peers; and
  - Likely reaction of other agencies.
- 4.3.8 The purpose of the meeting should be to:
- Share and clarify information;
  - Establish exact nature of concerns;
  - Establish risk for any other children, including siblings;
  - Consider the likelihood of prosecution of relevant adults;
  - Agree on action and make recommendations to address the concern;
  - Develop a safeguarding and support plan for the child and parent/carer;
  - Work towards a recovery strategy; and
  - Identify the factors to be taken into account (these will include the indicators in the Risk Assessment Framework).
- 4.3.9 The outcome of meeting may be that:
- There is no need to proceed further at this point;
  - There is a need to invoke child protection procedures;
  - There is a need for further assessment;
  - There is a possibility of criminal action against an adult;
  - Counselling is required to divert the child from involvement;
  - There is justification for criminal action against the child;

- There is insufficient information at this stage, but concerns remain, and further work is required to clarify them;
  - A referral to a voluntary project / organisation should be made; and/or
  - A referral for a family group conference should be made.
- 4.3.10 The MAP meeting should be minuted, the safeguarding and support plan must specify who is responsible for undertaking the work, and a copy of the minutes should be retained / sent to the lead professional. Unless no further action is agreed, or child protection procedures are invoked, a date for a review meeting should be agreed, to take place no later than three months after the initial meeting. If the child's parent/carer has not been present, the meeting must consider what information to give at this point, and who should undertake this. Parents/carers should usually be notified of concerns regarding their children, and what action is being considered to address these.
- 4.3.11 As with all child sexual abuse, child sexual exploitation involves varying degrees of coercion, reward, secrecy and fear, which means that interventions to support and rehabilitate children may need to be long-term, and safeguarding and support plans should be progressed at the child's pace.

## **5. Role of LA children's social care**

### **5.1 All children**

- 5.1.1 LA children's social care<sup>4</sup> hold the lead responsibility for responding to children abused through or at risk of sexual exploitation. However, decisions on what action to take, other than emergency action, or diversion planning as a response to a child being at risk (category 1), should only be taken following discussion within a multi-agency planning (MAP) meeting.
- 5.1.2 On receipt of a referral, LA children's social care must consider whether the child is at immediate risk of significant harm, and if so, child protection procedures should apply, in line with *section 6. Referral and assessment, section 7. Child protection enquiries, section 8. Child protection conferences and section 9. Implementation of child protection plans*, of the *London Child Protection Procedures (London Board, 2007)*. Whenever possible, a discussion should be held with the LA children's social care lead professional for safeguarding sexually exploited children (lead professional), but action should not be delayed if s/he is not available. The lead professional should be invited to any child protection conferences.
- 5.1.3 If child protection procedures are not considered appropriate, the social worker, in discussion with their team manager and/or the lead professional / child protection manager, will identify the category of risk of harm to the child.
- 5.1.4 LA children's social care are encouraged to collect information to monitor prevalence, activity patterns and effectiveness of interventions for children who are sexually abused, including sexually exploited, in their area. The lead professional / child protection manager should be responsible for this.
- 5.1.5 The lead professional or child protection manager should advise on the diversion plan for category 1 cases and agree MAP meetings for category 2 and 3 cases.
- 5.1.6 Following a MAP meeting, if there is sufficient information to confirm concerns, the case will require allocation in a children in need / family support team to progress the child's safeguarding and support plan.
- 5.1.7 When a case is already allocated, concerns may be presented by another professional or by the child's social worker. The risk of harm to the child needs to be re-assessed in

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<sup>4</sup> In accordance with their responsibilities under the Children Act 1989

the light of the new information, a discussion held with the relevant team manager and lead professional / child protection manager, and the case progressed as in paragraphs 5.1.2 and 5.1.3 above.

- 5.1.8 The outcome of the assessment should be discussed within a review MAP meeting, and a safeguarding and support plan put in place. Whenever possible, the child and their parent/carer should be invited to this meeting. However, family attendance must be carefully assessed (according to the criteria outlined in 4.3.5) and only agreed if attendance will not compromise the child's safety or the progress of the investigation. The final decision should be taken by the child protection or team manager. This decision should be clearly recorded on the child's case file.
- 5.1.9 Implementing an effective safeguarding and support plan for a child may require professionals to be extremely persistent in continuing to offer support and services. It may be that a non-LA children's social care professional may best be able to provide a direct service. Nevertheless, the case should remain allocated to a social worker whilst a safeguarding and support plan is in place, in order to act as a point of contact for the child, family and professionals and to co-ordinate the plans.
- 5.1.10 Resources which may be appropriate as part of the safeguarding and support plan include:
- Use of accommodation;
  - Application to court for a care or supervision order;
  - Application for secure order;
  - Provision of counselling and health services;
  - Provision of advice, support and mentoring;
  - Opportunity to access leisure, education, employment and housing;
  - Direct provision of family support service; and/or
  - In extreme circumstances, application for a secure order.

## **5.2 Children in the care of local authorities**

- 5.2.1 When a referral is received regarding a child in care, the allocated social worker must inform their team manager and the lead professional.
- 5.2.2 A MAP meeting should be considered, in accordance with the procedures in section 5.1 above. In addition, the following factors should be taken into account:
- The risks to other children in the placement;
  - Whether the child should remain in their present placement; and
  - The feasibility of controlling the child's movements, and the likely effects of doing so.
- 5.2.3 As in paragraphs 5.1.8 and 5.1.9 above, a safeguarding and support plan should be drawn up, which will form part of the overall care plan for the child.
- 5.2.4 The MAP meeting should consider the appropriateness and method of informing the child's parents. If children are accommodated, parent/s must be informed of all significant matters. When a child is subject to a care order, generally their parent/s should be informed of such a significant matter. A decision not to inform the parent/s should be recorded on file.
- 5.2.5 The child's social worker and the carer/s should put in place a written strategy which balances the need for assertive action and the need to not unduly increase the likelihood of the child running away in response to the action being taken, and possibly

placing themselves at even greater risk. Any consideration of restriction of liberty or confiscation of property needs to be agreed by the team or service manager responsible for the child's case.

- 5.2.6 Active work should be undertaken with the child to address issues of their self-esteem, relationships, sexuality, sexual relationships and health.
- 5.2.7 Whether or not the child is moved from their placement, the other children in the placement should be monitored to identify whether they are also at risk of harm from, or are in some way supporting, the sexual exploitation.
- 5.2.8 If the child is in a residential unit, the staff should be asked to take positive action to clarify and record suspicions (see appendix 4. *Children abused through sexual exploitation referral form*) and minimise the child's involvement in sexual exploitation. If suspicions are confirmed, the following steps should be taken:
- Treating the child as a victim of exploitation, not a criminal;
  - Ensuring that all relevant information is recorded in the child's care plan and file – concerning adults and identifying information (e.g. appearance, cars etc, telephone activity, the child's patterns of going missing etc) – together with decisions and clear directions for action. See appendix 3. *Recording of child sexual exploitation concerns proforma*;
  - Making every effort to dissuade the child from leaving to engage in sexual exploitation by talking to them, involving them in alternative activities, and ensuring they have the resources to attend, including escorting where necessary;
  - Offering advice about appropriate clothing;
  - Ensuring that the child is aware of the legal issues involved, including advice that staff cannot safeguard money which is reasonably suspected to have been gained through sexual exploitation. When staff do acquire such money, they must retain it and seek legal advice;
  - Monitoring telephone calls and letters by preventing the child from receiving some incoming calls, being present when phone calls are made, confiscating a mobile phone which is being used inappropriately, opening some letters in the presence of the child and withholding letters if necessary; reasons for intercepting letters and calls should be included in the care plan;
  - Monitoring callers to the home, or adults collecting children by car. This may involve turning visitors away, or passing information direct to the police, monitoring any suspicious activity in the vicinity of the home and informing the police;
  - Using physical control where appropriate, in accordance with Social Service Inspectorate guidance, to prevent the child leaving home to engage in sexual exploitation;
  - Where these efforts fail, and the child leaves, staff need to decide whether to follow them and continue to encourage them to return;
  - If they will not return, staff should inform the local police and pass on relevant information;
  - Liaising with outreach agencies, so they can look out for a child who has gone missing;
  - Offering sensitive and welcoming responses to children returning home.

- 5.2.9 If the child is in foster care, the social worker and fostering link worker should meet with the foster carer to decide which of the above steps could reasonably be taken by the foster carer. This needs to take place in consultation with the fostering team manager.
- 5.2.10 The child's behaviour and attitude may be extremely challenging, and carers and staff will require ongoing support, advice and training in knowing how to respond. These needs must be considered and resources identified, either by the manager of the residential unit or the fostering link worker.
- 5.2.11 Professionals and carers should be aware of their own position in relation to the child, e.g. male carers or staff may be viewed with suspicion or contempt.

### **5.3 Involvement of groups of children in care**

- 5.3.1 Where there is knowledge or strong suspicion that children are involved in sexual exploitation together, or are being controlled by the same person, particularly when that person is a child, there will need to be additional planning, including consideration of the use of child protection and/or organised abuse procedures.
- 5.3.2 If a strategy meeting is not appropriate; a MAP meeting should be convened, as above. This will need to ensure that there are no inconsistencies between individual children's care plans. Where the placement is in another authority, or children from other authorities are involved, that authority's child protection manager (or equivalent) must be contacted, to discuss which authority is to take overall responsibility for convening the meeting and co-ordinating the response.

### **5.4 Leaving care / aftercare**

- 5.4.1 The same procedures as above should be followed in cases where young people in the leaving care team are considered to be at medium or high risk of abuse through sexual exploitation.
- 5.4.2 The leaving care plan for any young person where there are concerns about sexual exploitation should specifically identify their vulnerability to sexual exploitation, and address the factors known to impede successful recovery from sexual exploitation (e.g. homelessness, poverty, lack of educational and employment opportunities and lack of supportive social contacts).

## **6. Role of the police**

- 6.1 Sections 47 to 51 of the *Sexual Offences Act 2003* deal with the exploitation of children, whether through prostitution or pornography. The Act creates a number of offences that apply to both types of exploitation, see appendix 5. *Sexual Offences Act 2003*.
- 6.2 The priority for the police is the investigation and prosecution of offenders who have been involved in abusing the child through sexual exploitation. This role should be undertaken in accordance with the principle of multi-agency co-operation to safeguard children.
- 6.2 Police may become aware of children being involved in sexual exploitation through normal police work on the streets and in other criminal investigations.
- 6.3 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 LA children's social care. Following this, a multi-agency planning meeting (MAP) will be convened.
- 6.4 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 local police Child Abuse Investigation Team (CAIT) by completing a coming to notice (CTN) form on the Merlin system. The CAIT will risk assess the form and share the

information with LA children's social care. If a crime has been committed, the matter will be allocated to an appropriately trained officer to investigate from either a Sapphire Unit, Clubs and Vice or if involving a parent/carers or professional, to the Child Abuse Investigation Command.

- 6.5 At present, the Metropolitan Police is reorganising its response to public protection, and referrals from LA children's social care need to be made to their local police in the first instance.
- 6.6 Criminal action in respect of the child victim should be avoided wherever possible. Such action should not be instigated until the matter has been discussed within a MAP meeting, when it is established that all attempts at diversion have failed. Particular attention should be paid to the following:
- The age and vulnerability of the child ;
  - The return to sexual exploitation must be considered genuinely voluntary, with no evidence of physical, mental or emotional coercion; and
  - The child has been told, and understands, that criminal proceedings may take place, and the implications of this for them now and in the future.

If the matter reaches the point of referral to the Youth Offending Team, this provides a further opportunity for positive intervention.

See also *section 6.21 in Guidance on Children Involved in Prostitution (HO/DfES, 2000)*.

- 6.7 All interviews with the child as an actual or potential victim should be conducted, as far as possible, in accordance with the best evidence interview. However, flexibility needs to be applied, as it may take a number of interviews before the child is able to make, or complete a statement.
- 6.8 If the child has made a statement and/or is a potential witness, witness protection and witness support should be considered as early as possible.

## **7. Role of leisure and community services**

- 7.1 The role of leisure and community services staff in relation to children abused through sexual exploitation is in the prevention, recognition and referral stages.
- 7.2 Where staff, such as play workers, leisure centre workers or librarians, have immediate concerns (medium or high risk, categories 2 and 3 using the Risk Assessment Framework; section 3 above) they should, together with their agency's nominated safeguarding children adviser, make a referral to LA children social care<sup>5</sup>. Where the concerns are not immediate or are unclear, staff should discuss the case with their nominated adviser.
- 7.3 In the case of street activity being noted, including within parks, staff should contact the local police.

## **8. Role of education services**

### **8.1 Prevention**

- 8.1.1 Staff in schools, further education colleges and other education establishments are uniquely placed to recognise and refer children who are abused through sexual exploitation. They are also in a position to help children to avoid being sexually exploited and to support abused children to recover.

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<sup>5</sup> This should be in line with the *London Child Protection Procedures* (London Board, 2007). Staff may also act in accordance with the government guidance: *What To Do If You're Worried a Child is Being Abused* (DfES, 2006).

- 8.1.2 Personal, Social and Health Education (PHSE) programmes can help children make informed and healthy choices about issues such as sexual activity, grooming techniques, drug use and keeping themselves safe.

## **8.2 Recognition and referral**

- 8.2.1 School staff should be alert and competent to identify and act upon concerns that a child is at risk of or experiencing abuse through sexual exploitation.
- 8.2.2 The nominated teacher for safeguarding children (referred to as the nominated safeguarding children adviser in this procedure) in each school should monitor information to identify when more than one child in the school or community may be being targeted for sexual exploitation<sup>6</sup>.
- 8.2.3 Education social workers, in their assessment and ongoing work with young people and their families and liaison with school staff, can identify children who are being or are at risk of being abused through sexual exploitation. Where the child is already known to an education social worker, s/he would also be expected to attend the multi-agency planning (MAP) meetings and contribute to developing the child's safeguarding and support plan.

School and Education Welfare Service staff should see the London procedure for *Safeguarding children missing from school guidance (London Board, 2007)*.

- 8.2.4 Where school staff have immediate concerns (medium or high risk, categories 2 and 3 using the Risk Assessment Framework; section 3 above) they should, together with their nominated adviser, make a referral to LA children's social care<sup>7</sup>. Where the concerns are not immediate or are unclear, staff should discuss the case with their nominated adviser.
- 8.2.5 The nominated adviser should inform LA children's social care and the LA education safeguarding children lead. The nominated adviser will be expected to attend the MAP meeting.

## **8.3 Connexions service**

- 8.3.1 As with teachers, Connexions personal advisers are in a good position to identify children who are being, or are at risk of being abused through sexual exploitation. Personal Advisers should be alert and competent to identify and act upon concerns that a child is at risk of or experiencing abuse through sexual exploitation; and should consult their nominated safeguarding children adviser and inform LA children's social care.

## **9. Role of health services**

- 9.1 Government guidance on children involved in sexual exploitation, notes:

*'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 services, including advice and counselling for harm minimisation, health promotion, advice on sexually transmitted diseases and HIV'.<sup>8</sup>*

- 9.2 Health professionals should be alert and competent to identify and act upon concerns that a child is at risk of or experiencing abuse through sexual exploitation. They have a crucial role in providing support for the physical and mental health of these children.

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<sup>6</sup> See the *North East Lincolnshire Serious Case Review* (Ian Huntley), Sir Christopher Kelly (2004)

<sup>7</sup> These should be in line with the *London Child Protection Procedures* (London Board, 2007). Staff may also act in accordance with the government guidance: *What To Do If You're Worried a Child is Being Abused* (DfES, 2006)

<sup>8</sup> *Guidance on Children Involved in Prostitution (HO/DfES 2000)*

- 9.3 The named or designated professional for safeguarding children (referred to as the nominated safeguarding children adviser in this procedure) in each health service trust should monitor information to identify when more than one child in the community may be being targeted for sexual exploitation<sup>9</sup>.
- 9.4 Where health professionals have immediate concerns (medium or high risk, categories 2 and 3 using the Risk Assessment Framework; section 3 above) they should, together with their nominated adviser, make a referral to LA children's social care<sup>10</sup>. Where the concerns are not immediate or are unclear, staff should discuss the case with their nominated adviser.
- 9.5 Health staff should offer and/or continue to provide health education, counselling, sexual health and medical intervention to the child as an appropriate part of early intervention. The London procedure for *Safeguarding sexually active children (London Board, 2006)* provides specific guidance in relation to sharing information about children for whom a professional has concerns.
- 9.6 Health professionals who may be invited to attend MAP meetings include:
- All current health professionals involved with the child, including school nurses, nurses working with children in care, GP's, practice nurses, health workers involved with outreach clinics, sexual health and family planning resources;
  - Any previously involved health professionals (recent past) who would have a useful contribution to make to the meeting (i.e. most recent health reports and knowledge of child while at school);
  - Health professionals involved in any screening or medicals involving the child who is the subject of the meeting (e.g. Clinical Medical Officer, GP); or
  - When no other health person is involved, current or past, the trust's designated or named professional (nominated safeguarding children adviser) should attend in an advisory capacity.

## **10. Role of voluntary and community groups / agencies**

### **10.1 Support services**

- 10.1.1 Government guidelines on young people involved in sexual exploitation emphasise the importance of a multi-agency approach, which includes voluntary and community groups / agencies:

*'The child may seek to avoid statutory services. They are more likely to respond to informal contact, for example, with health outreach workers, or local non-statutory agencies. The primary concern of all those involved must be the welfare of the child, and decisions on the sharing of concerns about a child's safety must form part of local protocols between police, LA children's social care, health and education authorities and non-statutory agencies'.<sup>11</sup>*

- 10.1.2 There is a wide range of specialist (drug misuse, HIV prevention, homelessness, counselling and advice) and other voluntary and community agencies / groups (youth clubs, sport/drama groups, faith groups and churches etc) who may be well placed to identify children who are at risk of or are experiencing abuse through sexual exploitation; because:

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<sup>9</sup> See the *North East Lincolnshire Serious Case Review* (Ian Huntley), Sir Christopher Kelly (2004)

<sup>10</sup> These should be in line with the *London Child Protection Procedures* (London Board, 2007). Staff may also act in accordance with the government guidance: *What To Do If You're Worried a Child is Being Abused* (DfES, 2006).

<sup>11</sup> *Guidance on Children Involved in Prostitution (HO/DfES 2000)*

- Voluntary and community sector agencies often have a close relationship with their local communities;
- Voluntary and community sector agencies can develop relationships of trust with the children and maintain a link to the child if they become 'lost' to statutory services;
- Outreach agencies are often the first point of contact for children in risk situations;
- Specialist voluntary agencies often have the opportunity to provide vital health / harm minimisation / risk reduction support;

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

10.1.4 In the Home Office guidelines, it is made clear that *'any child who comes to the notice of an agency must be considered for immediate referral to the multi-agency group'*.<sup>12</sup>

## **10.2 Recognition and referral**

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

10.2.2 Each voluntary and community group or agency should have a nominated safeguarding children adviser (referred to as the nominated adviser in this procedure).

10.2.3 Where a professional or volunteer in a voluntary or community group / agency has immediate concerns (medium or high risk, categories 2 and 3 using the Risk Assessment Framework; section 3 above) they should, together with their nominated adviser, make a referral to LA children social care<sup>13</sup>. Where the concerns are not immediate or are unclear, staff should discuss the case with their agency's nominated safeguarding children adviser.

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Christine Christie, London Safeguarding Children Board Manager

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<sup>12</sup> *Guidance on Children Involved in Prostitution, (HO/DfES 2000)*

<sup>13</sup> These should be in line with the *London Child Protection Procedures* (London Board, 2007). Staff may also act in accordance with the government guidance: *What To Do If You're Worried a Child is Being Abused* (DfES, 2006).

## Appendix 1

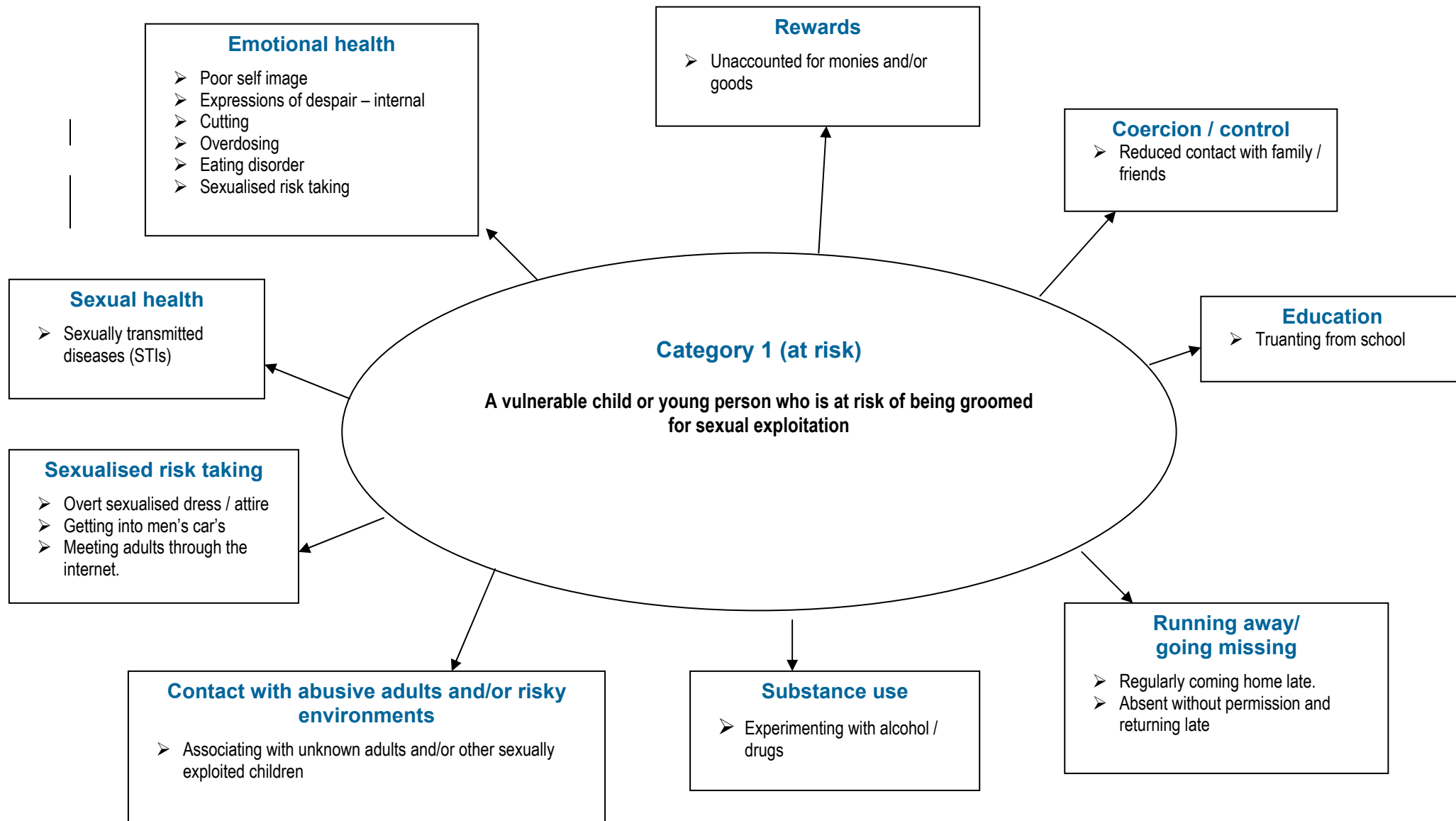
### Risk Assessment Framework for children abused through sexual exploitation

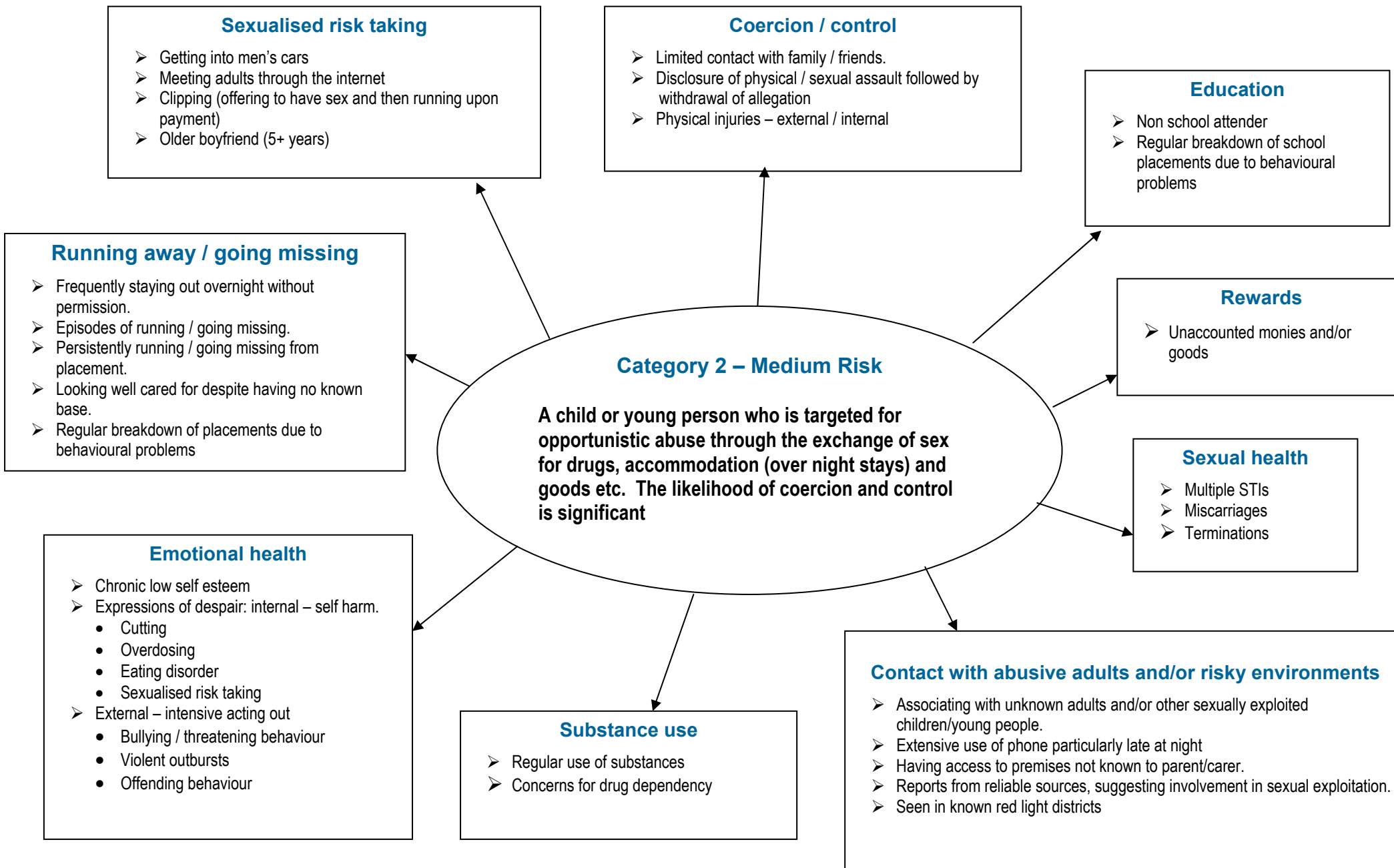
Categories	Education	Running away / Going missing	Sexualised Risk taking	Rewards	Contact with abusive adults and/or risky environments	Coercion / Control	Sexual Health	Substance Use	Emotional Health
1	Truancing from school	Regularly coming home late  Absent without permission and returning late	Overt sexualised dress/attire  Getting into men's cars  Meeting adults through the internet	Unaccounted for monies and/or goods	Associating with unknown adults and/or other sexually exploited children	Reduced contact with family / friends	Sexually transmitted diseases (STIs)	Experimenting with alcohol / drugs	Poor self image Expressions of despair  Internal (self-harm): <ul style="list-style-type: none"> <li>• Cutting</li> <li>• Overdosing</li> <li>• Eating disorder</li> <li>• Sexualised risk taking</li> </ul>
2	Non school attender / excluded  Regular breakdown of school placements due to behavioural problems.	Frequently staying out overnight without explanation  Episodes of running away / going missing  Persistently running away / going missing from placement  Looking well cared for despite having no known base  Regular breakdown of placements due to behavioural problems	Getting into men's cars  Meeting adults through the Internet  Clipping (offering to have sex and then running upon payment)  Older boyfriend (5 + years)	Unaccounted for monies and/or goods, especially jewellery and mobile phones	Associating with unknown adults and/or other sexually exploited children / young people  Extensive use of phone, particularly late at night  Having access to premises not known to parent / carer.  Reports from reliable sources, suggesting involvement in sexual exploitation  Seen in known red light districts	Limited contact with family / friends  Disclosure of physical / sexual assault followed by withdrawal of allegation  Physical injuries – external / internal	Multiple STIs  Miscarriages  Terminations	Regular use of substances  Concerns for drug dependency	Chronic low self esteem Expressions of despair  Internal (self-harm): <ul style="list-style-type: none"> <li>• Cutting</li> <li>• Overdosing</li> <li>• Eating disorder</li> <li>• Sexualised risk taking</li> </ul> External (intensive acting out) : <ul style="list-style-type: none"> <li>• Bullying / threatening behaviour</li> <li>• Violent outbursts</li> <li>• Offending behaviour</li> </ul>

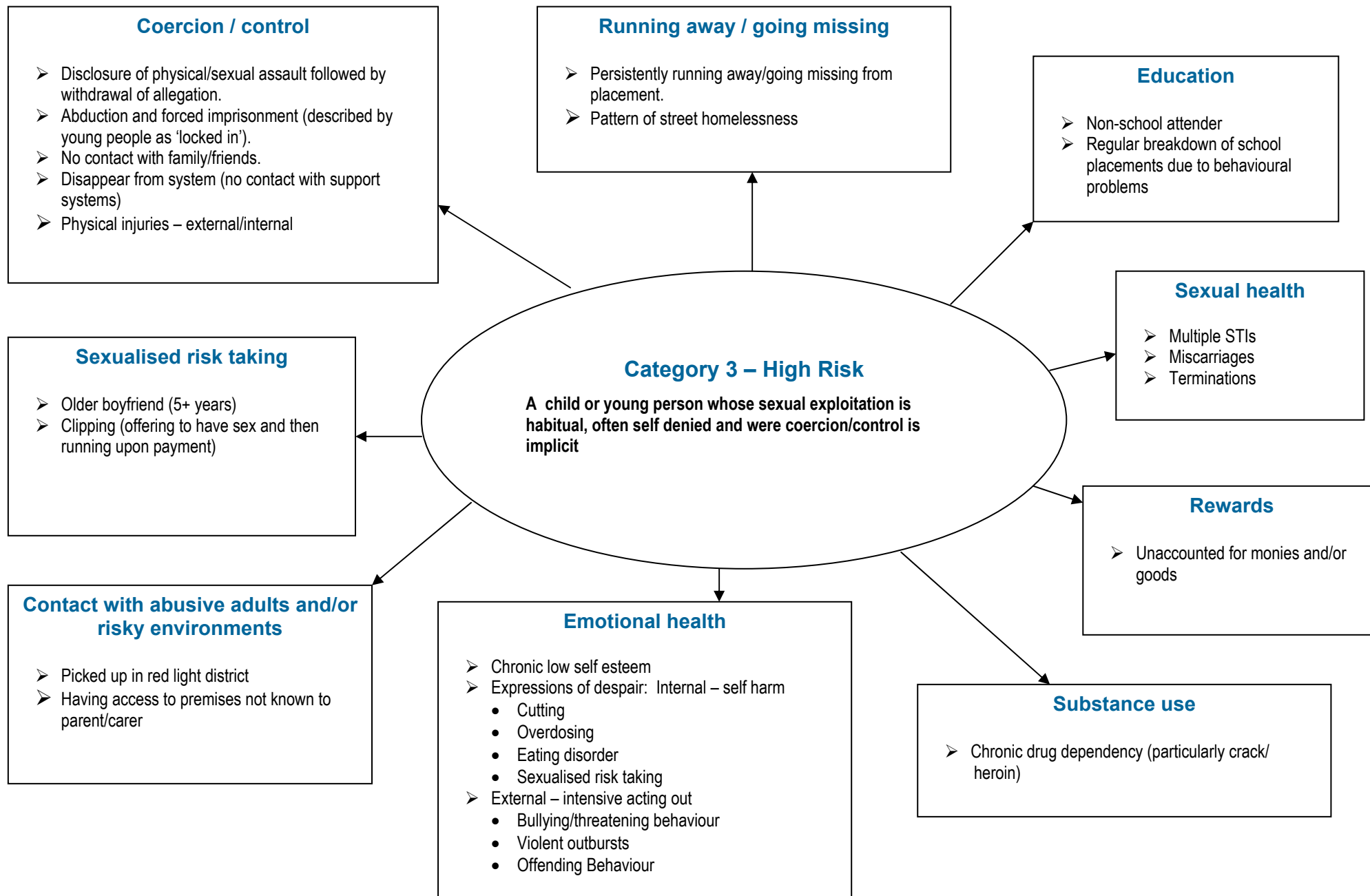
Safeguarding children abused through sexual exploitation, London Board 2006

3	<p>Non school attender / excluded</p> <p>Regular breakdown of school placements due to behavioural problems</p>	<p>Persistently running away / going missing from placement</p> <p>Pattern of street homelessness</p>	<p>Older boyfriend (5+ years)</p> <p>Clipping (offering to have sex and then running upon payment)</p>	<p>Unaccounted for monies and/or goods especially jewellery and mobile phones</p>	<p>Picked up in red light district</p> <p>Having access to premises not known to parent/carer</p>	<p>Disclosure of physical / sexual assault followed by withdrawal of allegation</p> <p>Abduction and forced imprisonment (described by young people as 'locked in')</p> <p>No contact with family / friends</p> <p>Disappear from system (no contact with support systems)</p> <p>Physical injuries – external / internal</p>	<p>Multiple STI's</p> <p>Miscarriages</p> <p>Terminations</p>	<p>Chronic drug dependency (particularly crack / heroin)</p>	<p>Chronic low self esteem</p> <p>Expressions of despair</p> <p>Internal (self-harm):</p> <ul style="list-style-type: none"> <li>• Cutting</li> <li>• Overdosing</li> <li>• Eating disorder</li> <li>• Sexualised risk taking</li> </ul> <p>External (intensive acting out) :</p> <ul style="list-style-type: none"> <li>• Bullying / threatening behaviour</li> <li>• Violent outbursts</li> <li>• Offending behaviour</li> </ul>
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### Appendix 2: Risk Assessment Framework







### Appendix 3

## Recording of Child Sexual Exploitation Concerns

**Child's name:**

**DOB:**

**Unit name:**

**Keyworker:**

Concerning adults / young adults	Information
Adults visiting unit	
Adults calling unit	
Adults meeting children outside unit	
Descriptions <ul style="list-style-type: none"> <li>• Hair:</li> <li>• Skin:</li> <li>• Ethnicity:</li> <li>• Height:</li> <li>• Clothes:</li> <li>• Jewellery:</li> <li>• Distinguished markings (e.g. tattoos):</li> <li>• Accent (even if not sure what accent state there was one):</li> <li>• Nicknames:</li> </ul>	

Mobile phone activity	Information
Time of calls	
Frequency of calls	
Number of callers	
Behaviour of YP post call (angry, upset, leave the unit immediately etc):	

<b>Cars</b>	<b>Information</b>
Model (s)	
Colour (s)	
Number Plate (s)	

<b>Absence without permission</b>	<b>Information</b>
Appearance when YP leaves unit:	
Who is the YP with:	
Date and time left unit:	
Length of absence:	
Regularly coming home late:	
Emotional and physical appearance upon return:	

<b>Missing patterns</b>	<b>Information</b>
Appearance when YP leaves unit:	
Who is the YP with:	
Date and time left unit:	
Length of absence:	
Frequently staying out late at night without explanation:	
Episodes of running away / going missing	
Persistently going missing from placement	
Emotional and physical appearance upon return	

*Barnardos, 2006*

## Appendix 4

### Children Abused through Sexual Exploitation

#### REFERRAL FORM

**Child's name:**

**Date of birth:**

**Ethnicity:**

**Address:**

**Legal status:**

**School / college:**

**Parent/carer:**

**Date of first contact with LA children's social care:**

**Date of current referral to LA children's social care:**

**Social worker:**

**Supervisor:**

**CPO comments on concern:**

**Category of risk:** vulnerable to sexual exploitation   
sexually exploited   
sexually exploited (entrenched)

**Advice:** NFA within the protocol   
Prevention work (give details below)   
MAP meeting

**Date of MAP meeting:**

**Date of advice:**

**Signed:** .....

## **Children Abused through Sexual Exploitation**

### **MULTI-AGENCY PLANNING MEETING**

#### **INITIAL AGENDA**

##### **Guidance notes**

- Information given at this meeting is confidential. Matters discussed here should only be disclosed to professional colleagues with a real need to know.
- This borough has an equal opportunities policy. It is important that everyone at the conference is treated with mutual respect giving due regard to race, religion, language, culture, gender, sexuality and disability. Discriminatory attitudes, opinions or language expressed at this meeting will be challenged.
- All participants will be invited to contribute any information they have. Information not presented openly at the meeting cannot be considered in assessing risk. It is important that it is clear from individual contributions what is fact and what is opinion.

- 1. Introduction and status of meeting**
- 2. Apologies**
- 3. Factual information / details**
- 4. Reason for convening MAP**
- 5. Indicators developed**
- 6. Sexual health concerns**
- 7. Family awareness / response to risks**
- 8. Child protection considerations**
- 9. Potentially involved adults**
- 10. Risk discussion**
- 11. Chairs summary (including level of risk)**
- 12. Decisions and recommendations**
- 13. Review date**

**Children Abused through  
Sexual Exploitation**

**MINUTES OF MULTI-AGENCY PLANNING MEETING**

**Date of meeting:**

**Venue:**

**A. Basic information**

**Child's name:**

**Date of birth:**

**Ethnicity:**

**Address:**

**Legal status:**

**School / college:**

**Parent / carer:**

**Social worker:**

**Supervisor:**

**Date of referral:**

**Agencies involved:**

**B. Record of attendance**

<b>Name of attendee</b>	<b>Agency</b>	<b>Address</b>	<b>Present / absent</b>

**C: Minutes of meeting**

**D: Chair's summary**

**E: Decisions / recommendations**

**i) Level of risk:**    At risk        Medium risk                          High risk                     

**ii) Concerns about trafficking:**

**iii) Potentially involved adults:**

- iv) Outcome:**
- Remain within this procedure
  - Consideration of initiating child protection procedures
  - No further action under this procedure

**Children Abused through  
Sexual Exploitation**

**MULTI-AGENCY REVIEW MEETING**

**REVIEW AGENDA**

**Guidance notes**

- Information given at this meeting is confidential. Matters discussed here should only be disclosed to professional colleagues with a real need to know.
- This borough has an equal opportunities policy. It is important that everyone at the conference is treated with mutual respect giving due regard to race, religion, language, culture, gender, sexuality and disability. Discriminatory attitudes, opinions or language expressed at this meeting will be challenged.
- All participants will be invited to contribute any information they have. Information not presented openly at the meeting cannot be considered in assessing risk. It is important that it is clear from individual contributions what is fact and what is opinion.

- 1. Introduction and status of meeting**
- 2. Apologies**
- 3. Changes to factual information/details**
- 4. Significant incidents**
- 5. Agency feedback**
- 6. Family situation update**
- 7. Update on involved adults**
- 8. Risk discussion**
- 9. Chairs summary**
- 10. Decisions and recommendations**
- 11. Review date**

## **Appendix 5**

### **THE SEXUAL OFFENCES ACT 2003**

#### *Abuse of children through prostitution and pornography*

#### **47 Paying for sexual services of a child**

- (1) A person (A) commits an offence if-
- (a) he intentionally obtains for himself the sexual services of another person (B),
  - (b) before obtaining those services, he has made or promised payment for those services to B or a third person, or knows that another person has made or promised such a payment, and
  - (c) either-
    - (i) B is under 18, and A does not reasonably believe that B is 18 or over, or
    - (ii) B is under 13.
- (2) In this section, "payment" means any financial advantage, including the discharge of an obligation to pay or the provision of goods or services (including sexual services) gratuitously or at a discount.
- (3) A person guilty of an offence under this section against a person under 13, where subsection (6) applies, is liable on conviction on indictment to imprisonment for life.
- (4) Unless subsection (3) applies, a person guilty of an offence under this section against a person under 16 is liable-
- (a) where subsection (6) applies, on conviction on indictment, to imprisonment for a term not exceeding 14 years;
  - (b) in any other case-
    - (i) on summary conviction, to imprisonment for a term not exceeding 6 months or a fine not exceeding the statutory maximum or both;
    - (ii) on conviction on indictment, to imprisonment for a term not exceeding 14 years.
- (5) Unless subsection (3) or (4) applies, a person guilty of an offence under this section is liable-
- (a) on summary conviction, to imprisonment for a term not exceeding 6 months or a fine not exceeding the statutory maximum or both;

(b) on conviction on indictment, to imprisonment for a term not exceeding 7 years.

(6) This subsection applies where the offence involved-

(a) penetration of B's anus or vagina with a part of A's body or anything else,

(b) penetration of B's mouth with A's penis

(c) penetration of A's anus or vagina with a part of B's body or by B with anything else, or

(d) penetration of A's mouth with B's penis.

(7) In the application of this section to Northern Ireland, subsection (4) has effect with the substitution of "17" for "16".

#### **48 Causing or inciting child prostitution or pornography**

(1) A person (A) commits an offence if-

(a) he intentionally causes or incites another person (B) to become a prostitute, or to be involved in pornography, in any part of the world, and

(b) either-

(i) B is under 18, and A does not reasonably believe that B is 18 or over, or

(ii) B is under 13.

(2) A person guilty of an offence under this section is liable-

(a) on summary conviction, to imprisonment for a term not exceeding 6 months or a fine not exceeding the statutory maximum or both;

(b) on conviction on indictment, to imprisonment for a term not exceeding 14 years.

#### **49 Controlling a child prostitute or a child involved in pornography**

(1) A person (A) commits an offence if-

(a) he intentionally controls any of the activities of another person (B) relating to B's prostitution or involvement in pornography in any part of the world, and

(b) either-

(i) B is under 18, and A does not reasonably believe that B is 18 or over, or

(ii) B is under 13.

(2) A person guilty of an offence under this section is liable-

- (a) on summary conviction, to imprisonment for a term not exceeding 6 months or a fine not exceeding the statutory maximum or both;
- (b) on conviction on indictment, to imprisonment for a term not exceeding 14 years.

**50 Arranging or facilitating child prostitution or pornography**

- (1) A person (A) commits an offence if-
  - (a) he intentionally arranges or facilitates the prostitution or involvement in pornography in any part of the world of another person (B), and
  - (b) either-
    - (i) B is under 18, and A does not reasonably believe that B is 18 or over, or
    - (ii) B is under 13.
- (2) A person guilty of an offence under this section is liable-
  - (a) on summary conviction, to imprisonment for a term not exceeding 6 months or a fine not exceeding the statutory maximum or both;
  - (b) on conviction on indictment, to imprisonment for a term not exceeding 14 years.

**51 Sections 48 to 50: interpretation**

- (1) For the purposes of sections 48 to 50, a person is involved in pornography if an indecent image of that person is recorded; and similar expressions, and "pornography", are to be interpreted accordingly.
- (2) In those sections "prostitute" means a person (A) who, on at least one occasion and whether or not compelled to do so, offers or provides sexual services to another person in return for payment or a promise of payment to A or a third person; and "prostitution" is to be interpreted accordingly.
- (3) In subsection (2), "payment" means any financial advantage, including the discharge of an obligation to pay or the provision of goods or services (including sexual services) gratuitously or at a discount.