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# NOTICE OF MEETING

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**EDUCATION, CHILDREN & YOUNG PEOPLE SCRUTINY PANEL**

**TUESDAY, 11 JULY 2017 AT 9.30 AM**

**CONFERENCE ROOM A - SECOND FLOOR, CIVIC OFFICES**

Telephone enquiries to Lisa Gallacher, Local Democracy Officer 02392 834056  
Email: [lisa.gallacher@portsmouthcc.gov.uk](mailto:lisa.gallacher@portsmouthcc.gov.uk)

If any member of the public wishing to attend the meeting has access requirements, please notify the contact named above.

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## **Membership**

Councillor Neill Young (Chair)  
Councillor David Tompkins (Vice-Chair)  
Councillor Ben Dowling

Councillor Paul Godier  
Councillor Suzy Horton  
Councillor Will Purvis

## **Standing Deputies**

Councillor Dave Ashmore  
Councillor Alicia Denny  
Councillor Gemma New

Councillor Matthew Winnington  
Councillor Rob Wood

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(NB This Agenda should be retained for future reference with the minutes of this meeting.)

Please note that the agenda, minutes and non-exempt reports are available to view online on the Portsmouth City Council website: [www.portsmouth.gov.uk](http://www.portsmouth.gov.uk)

## **AGENDA**

- 1 Apologies for absence**
- 2 Declarations of interest**
- 3 Minutes of the previous meeting - 8 November 2016 (Pages 3 - 12)**

**RECOMMENDED that the minutes of the meeting held on 8 November 2016 be confirmed and signed as a correct record.**

**4 Review into Child Sexual Exploitation (Pages 13 - 78)**

The panel's final report is attached.

**5 Discussion on future topics for the Education, Children and Young People Scrutiny Panel**

The Education, Children and Young People (ECYP) Scrutiny Panel members are asked to suggest and give consideration to potential review topics for submission to the next meeting of the Scrutiny Management Panel

Suggestions from the Director for Children's Services include:

1. The council's offer to vulnerable adolescents
2. Attendance and part-time timetables.

Any other topics members would be interested in looking into that are within the panel's remit are welcomed.

Members of the public are now permitted to use both audio visual recording devices and social media during this meeting, on the understanding that it neither disrupts the meeting or records those stating explicitly that they do not wish to be recorded. Guidance on the use of devices at meetings open to the public is available on the Council's website and posters on the wall of the meeting's venue.

# Agenda Item 3

## EDUCATION, CHILDREN & YOUNG PEOPLE SCRUTINY PANEL

Minutes of the meeting of the Education, Children & Young People Scrutiny Panel held on Tuesday, 8 November 2016 at 6.30 pm at the Civic Offices, Portsmouth

### Present

Councillor Will Purvis (in the Chair)

Councillors David Tompkins  
Ben Dowling  
Suzy Horton

Ryan Brent (Observing as Cabinet Member for Children's Social Care)

### Officers

Alison Jeffrey, Director of Children's Services

### Witnesses

Annie Clark, Lead Nurse for Community Sexual Health Team and Safeguarding (Portsmouth and South East Hampshire)

Kelly Huggett, Health Development Officer

Amanda Littlefield, Hillside Youth Centre Manager

Michelle Evans and Claudia Villa-Hughes, Barnados

### 69. Apologies for absence (AI 1)

Apologies for absence were received from Councillor Godier and apologies for lateness were received from Councillor Horton.

### 70. Declarations of Interests (AI 2)

There were no declarations of interest.

### 71. Minutes of the previous meeting - 18 October 2016 (AI 3)

**RESOLVED that the minutes of the Education, Children and Young People Scrutiny Panel held on 18 October 2016 be confirmed and signed as a correct record.**

### 72. Review into how well Portsmouth City Council and partners are preventing and dealing with child sexual exploitation (AI 4)

The Chair invited everyone present to introduce themselves which they then did. He advised that a deputation request had been received from Mr Les Cummings and invited him to make his deputation. The Chair thanked Mr Cummings for his deputation.

The Chair then invited Annie Clark, Lead Nurse for Community Sexual Health Team and Safeguarding (Portsmouth and South East Hampshire) to give an overview of the work of the sexual health team. Annie had circulated to the panel prior to the meeting a copy of the young person risk assessment tool that they use. She explained that the service is based at St Mary's hospital and deals with all aspects of sexual health including HIV, STD's and unplanned pregnancies. All staff are trained in CSE and they will complete the risk assessment tool for any client under the age of 16. She explained there are two parts to the service; outreach nurses who provide drop in sessions at King Richard School, Portsmouth College and The Foyer hotel and referrals from agencies including Barnados and Children's Social Care. There is also a sexual health practitioner who provides training for people working with young people and a young people's drop in clinic on Thursday's from 3-5:30pm.

Amanda Littlefield, Hillside Youth Centre Manager advised that her staff had received training from one of the sexual health practitioners which had been very useful.

In response to questions, the following points were clarified:

- King Richard School is one of the locations for the outreach nurses due to its locality in the north of the city and also because it used to be a health living centre. King Richard School are champions and do a lot of work and training on sexual health in their school.
- There are two members of staff working as outreach nurses that each work 22 hours a week and there is one school nurse for Portsmouth.
- There are currently 18 people on the waiting list for training. Training is provided free of charge however due to budget cuts no one is administering the requests for training. Kelly Huggett, Health Development Officer explained that historically this was undertaken by the Independence and Wellbeing Team and Children and Young Person Services within Public Health however this role has now been made redundant and organisations now need to provide their own admin support. Alison Jeffery said that this needed to be resolved and she would look into this.
- The risk assessment tool used by the sexual health team had been developed in house and the MET Operational Group had not commented on this. Annie advised that if staff have concerns about a child they will follow the protocol and it's very important that all practitioners have training. Alison Jeffery said that it would be useful for the MET to have sight of this. Claudia Villa-Hughes, Barnados and member of the MET Operational Group said that the MET had discussed the short SERAF tool which had been rolled out to other areas of health, and had felt that this was not appropriate however they had not discussed the risk assessment tool used by the sexual health team. She said this could be added to the agenda for the next MET operational group as it is important that the prompts used are understood by all practitioners and this could be a piece of work for the MET Operational Group to undertake.

The Chair then invited Amanda Littlefield to give an overview of the work of the youth service at PCC. Amanda advised that they have over 60 young people attend the Hillside Youth Centre each day, and have 4 youth workers each evening. The centre works closely with schools and will identify any changes of behaviours. If any are identified these will be reported to the police, social worker or CSC. Staff within the youth service have completed all the safeguarding training available through PCC. Youth workers will talk to individual young people to make sure they are happy and build strong relationships with them. Youth workers also attend the MET operational meetings.

In response to questions the following matters were clarified:

- Leading up to school holidays' Amanda explained that she will contact Sorted, Barnados Motiv8 etc. to see if there is capacity for them to visit the youth centre to hold workshops for young people aged between 11 and 19. An example was for the recent October half term leading up to Halloween a workshop was held about how to be safe around alcohol and staff will make sure these are well understood and received.
- The youth workers also discuss with children how to stay safe online and will warn them about the risk of sending explicit photographs. However she felt that the majority of the young people are very 'switched on' when it comes to what information they should be sharing online as they know about CEOP. She advised that a lot of children using her youth centre group chat with their friends online rather than sit alone talking to online friends.
- Youth centres in the city have agencies such as PARCS to come in to specifically talk to children about CSE. Michelle Evans, Barnados added that it is helpful to have conversations with young people about raising awareness of CSE as they can sometimes be too savvy about the online world and 'sexting is a huge issue that Barnados are struggling with currently.
- It is sometimes hard to get other agencies to come into youth centres as everyone is so busy. Amanda advised though that if there is no-one to come in to run a session, staff who have been trained will often run the sessions themselves. Claudia Villa-Hughes added that Barnados have held four evening sessions on LGBT (lesbian, gay, bisexual, transgender) in youth clubs recently and they have an e-safety specialist who is a project worker however due to time constraints their availability to hold sessions is low. Kelly added that everyone is working under tight resources but try to work collaboratively to provide support for young people in the city. Schools are also under pressure and will approach Sorted to ask for training workshops etc. however attendance at these can be poor due to them having targets to reach within education subjects. Unfortunately there is not the capacity to send professionals into every school who requests training so it's about giving them the tools to deliver the sessions themselves.
- With regard to how a new professional to the city would know what resources are available, Kelly advised that there is a SLA available for schools and she will meet head teachers to obtain the details of the link person which is usually someone from the pastoral team and she will promote the services that she and her team can offer. Michelle

advised that this is the same for Barnados and they will promote the services they can offer to all those who work with young people. There is no a structure in place where people working with young people can see a 'menu of options' of training and support available.

The Chair then invited Michelle Evans, Project Worker for Barnados Misuse and U turn service to give an overview of her work. She advised that she works with young people at medium and high risk of CSE both on a one to one and group basis and this can be long term. She also works with young people who have gone missing then return home and will visit them within 72 hours of their return to discuss the push and pull factors why they went missing. A plan for the young person will be created and they will be referred back to the MASH team.

In response to questions, the following matters were clarified:

- Barnados identified a significant link with missing young people and CSE and they have identified incidents of CSE after carrying out missing assessments
- The missing service within Barnados is vital and there are 18.5 hours dedicated to the missing service.
- In July there was a local protocol change so that CSC now carry out the return interview now complete assessments if the young person has a social worker. This has really helped ease the pressure on Barnados. Previously they were receiving 150-200 reports every 3 months but due to the change these numbers have reduced immensely allowing Barnados to complete follow up work as necessary. Last month 4 young people at risk of CSE out of 49 young people they visited so shows tool is working.
- Claudia Villa-Hughes advised that she attends the national meeting of Barnados and the issues across the country are very similar. Hampshire and the Isle of Wight also have a similar picture to Portsmouth. It is very hard to reach young people who have gone missing in the past. The key is to offer the young person an interview within 72 hours of their return and keep persisting with this until they accept the help on offer.

The Chair advised that Kelly Huggett had recently met with three young people to talk about their experiences and journey in relation to CSE. He invited Kelly to give the feedback.

Kelly advised that the three young girls were no longer at risk of CSE and had been pleased to be able to share their experiences to assist with this review. She gave a background to each of the children and then read out their response to the questions that had been put to them.

#### Questions put to the three young people

1. What services have helped and supported you?
2. Thinking of your experience with [name of organisation] how did this help you? And could anything have been improved?

3. Who do you feel has supported you most throughout your journey?
4. Did you have any support/guidance from school staff about CSE? Did you feel you could talk to teachers etc about your situation?
5. Prior to your experiences, were you aware of any of the CSE campaigns such as Chelsea's Choice or the Alice in Wonderland campaign? If yes what did you think of these? Is enough being done to make young people aware of CSE?
6. What is the key message you would like Portsmouth City Council to be aware of following your experiences?
7. Anything else you would like to add?

#### Child T

- Had been identified at medium risk of CSE
- School attendance was a concern
- She received help from the Sorted team.
- Received education outside of mainstream school
- This child used the ITYSS service which we no longer have
- CSC were involved in undertaking her initial assessment
- Police were involved in retrieving her when she went missing.
- Child was discussed at the MET Operational meetings.

Her answers to the questions:

- 1) The services that helped and supported me were ITYSS, Sorted and the Police.
- 2) Working with Sorted I found this really helpful because she showed me what dangers could have happened in the situation I was in. It would have been nice to have met a young adult who has been through a similar situation.
- 3) I feel that it was 50% sorted and 50% ITYSS they supported me in different ways.
- 4) I had a good relationship with a teacher from the lodge who would ask about my problems but I'd never speak to her as I could only talk to an educated person who didn't work in a school.
- 5) Because my attendance was poor I didn't have much PSHE and I didn't attend assembly.
- 6) I think it would have been helpful if there were more police on patrol, it would have prevented the risks. If there was more support from my family I wouldn't of wanted to stay out and away from home. I found it really intimidating for all the professionals to attend my meetings. It would have been better if only one professional teacher would attend.  
\* (Kelly clarified that she was referring to the Team around the Child (TAC) meetings.)
- 7) I hope I have helped put my point across.

### Child H

- Had been identified as medium risk of CSE.
- Issues with school attendance and had a package of lessons outside of mainstream.
- CSC assessed her
- Received help from the Sorted team
- Police retrieved her when she went missing - 3 times in 90 days
- Used Barnados family intervention programme supported her and her family members - this was a recommendation from the MET group.
- Discussed at MET operational meetings.

Her answers to the questions:

- (1) Police, school, Barnados, Sorted, Social Services.
- (2) I know that the police were only doing their job but it I didn't want to be found they wouldn't find me whereas if I did want to be found I made sure I stood out. I found that sorted helped me because they made me know about all the dangers that were involved and made me know about self-esteem and help me improve my confidence.
- (3) I feel that sorted helped me the most because it made me look at things differently whereas I also feel that Barnados helped me as well because if they didn't help me with my family problems I wouldn't of stayed at home.
- (4) I feel that I could trust a few teachers because they kept it confidential but with the right people that could help they explained it in my point of view which help them understand me more. Teachers wouldn't ever say about CSE but they pointed out that what I was doing was risky and they said they were worried about me.
- (5) I was not aware of any campaigns. I fell that school should make more school children more aware of CSE and make them feel as someone is there to talk to.
- (6) My personal journey didn't need any change because help got called at the right time for me to change.
- (7) I feel that meetings with everyone helped getting my point of view across but I feel there should have been less people in the room because it made me feel intimidated.

### Child P

- Had been identified as medium risk of CSE
- Services she used were CSC, Barnados U Turn service, Sorted, Police, Boost and school.

Her answers to the questions:

- (1) Switch, Barnados, U Turn, Social Services, Police, School.
- (2) Barnados were helpful in many ways. We build up a good relationship that was more like a friendship. The service ended without notice and I was not in a position for the service to end\*. The way it ended made me feel worse and behave worse. Switch was also a really good service, I was seeing my worker for about 2 years once a week,



towards the end of the support I was receiving we started seeing each other twice a fortnight and had an arranged date to say goodbye and we still have each other's number so if I feel I need the support I know I have it. \* *(Kelly explained that rather than the service ending, it was a change to the Barnados worker. The service continued but as the child felt that she didn't get to say goodbye when the new worker came in she did not want to engage.)*

- (3) I feel that throughout my journey no one has helped me as much as I have helped myself. I feel like people can advise you and help you but no one can change you until you are willing to change yourself. Social care were very supportive and tried their hardest to advise me and show me a path but I was not willing to accept the help.
- (4) I felt I could talk to teachers from school but I wouldn't respond in a polite way other than to one particular teacher. At one point in my life school was the only place I felt I had to go when things were difficult for me at home. Some days I would be at school until 6pm talking to my teacher because I didn't want to face the outside world. The person I confided to in school didn't use the words CSE, however she would point out the risks I was taking. She also referred me to other services and got specialist support.
- (5) In school I watched the Alice in Wonderland campaign production of child exploitation. It made me emotional and did change the way I looked at things. On the school I attended I feel enough has been said about CSE but not enough is being done. \* *(Kelly explained that the child was referring to Chelsea's Choice rather than Alice campaign.)*
- (6) The message I would like to give Portsmouth City Council would be services need to now look back at my experience through social services, I feel like my family didn't get the support they needed when I was the one preventing 60% of the drama within the family home.

Kelly summarised by saying that all three of the children had different situations at home which were push factors to their risky behaviours. Substance misuse was a huge factor for one of the young people. If things were better for them at home they would have been less likely to go missing. All three children were clear that they could get the attention of the police if they wanted to be found. The panel commented that with all the various services available to young people, it was heartening that the perception of the police remains that they will 'rescue' a vulnerable child needing help. Of the children and when they hit rock bottom and are reliant on substances this is when CSE can occur.

In response to questions the following points were clarified:

- One of the children was at significantly high risk of CSE and one suffered peer to peer CSE.
- Hampshire Constabulary has now introduced the Goldstone Team, a specialist unit to tackle CSE that consists of police officers and staff, assisted by a dedicated analyst. The team works closely with other agencies such as Children's Services, health, schools, and third sector organisations such as Barnardos. The team is located within Multi-Agency Safeguarding Hubs, allowing for greater joint working, information sharing and greater use of both criminal and civil remedies

to help the victims, but also disrupt locations used by offenders. The Goldstone team is focussing its work on perpetrator's which is very positive.

- Barnados held a workshop for PCSO's on CSE and have created a training programme for new recruits.
- The Chair said that he has met with a police sergeant recently regarding neighbourhood policing and he was pleased that one of their three priorities was CSE.

The Chair thanked all the witnesses for their evidence.

The Chair advised that Ofsted had recently published a document 'Time to listen' - a joined up response to child sexual exploitation and missing children, which was a combined report with HM Inspectorate of Probation, HMIC and the CQC. Members of the panel had received a copy of this document prior to the last meeting and he invited Alison Jeffery, Director of Children's Services to give a brief summary of the document.

Alison advised that the report followed up on a series of five targeted area inspections. The report found that plans were variable across the areas. It also found that in some areas there was poor management of frontline decision making by CSC and police was resulting in poor practice in a number of CSE cases. Alison commented though that in Portsmouth the Goldstone team moving the focus to perpetrators was a very good thing.

The report raised concerns about frontline health professionals and not all had the skills needed to identify CSE and not all children have easy access to sexual health services.

One of the reports other key findings was that the local authority, police, health and other key agencies such as probation and youth offending must share information and intelligence to fully understand the local patterns of child sexual exploitation, to disrupt and deter perpetrators and to identify, help and protect children. She advised that analysing reasons why go children go missing when child identified as missing response is robust in the city.

Alison advised the panel that there is an analyst from Hampshire police now attending MET meetings. Claudia Villa-Hughes added that the MET are pooling this data but there is still some way to go. The analyst has only attended one meeting so far so the MET will keep working on brining this information together.

Finally, Alison drew the panel's attention to the recommendation that individual agencies and organisations use their powers in a range of ways to protect children. These should all be exerted to their full extent, such as local councils' role in granting taxi licences.

The Chair thanked Alison for this summary.

The panel agreed that their next meeting should be an informal meeting to review the information and evidence received so far to see whether any further formal meetings are required.

The meeting concluded at 8.05 pm.

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Councillor Will Purvis  
Chair

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# Agenda Item 4



# Portsmouth CITY COUNCIL

EDUCATION, CHILDREN AND YOUNG PEOPLE  
SCRUTINY PANEL

**A REVIEW INTO HOW WELL PORTSMOUTH CITY COUNCIL AND PARTNERS ARE PREVENTING AND DEALING WITH CHILD SEXUAL EXPLOITATION.**

**Date published: 3 July 2017**

**Under the terms of the Council's Constitution, reports prepared by a Scrutiny Panel should be considered formally by the Cabinet or the relevant Cabinet Member within a period of eight weeks, as required by Rule 11(a) of the Policy & Review Procedure Rules.**

## PREFACE

The Education, Children and Young People Scrutiny Panel undertook a review into how well Portsmouth City Council and partners are preventing and dealing with child sexual exploitation (CSE).

During the review which was carried out between June 2016 and December 2016, the Panel received evidence from a number of sources and learned about the excellent work taking place in the city to tackle CSE. The panel used this to draw up a series of conclusions and recommendations to Cabinet to ensure that this excellent work is continued and built upon.

The panel noted that although there are multiple services and partners involved in helping to tackle CSE, continued vigilance and care needs to be taken that any changes to service due to budget decisions do not affect the support available to young people at risk.

I would like to convey, on behalf of the panel my sincere thanks to all the officers and external witnesses who contributed to making this review a success. In particular I would like to thank the three young people who provided the panel with details of the support they received and the Director of Children's Services who has supported the panel during this review.

.....  
Councillor Will Purvis  
Chair, Education, Children and Young People Scrutiny Panel.

Date: 3 July 2017

## **CONTENTS**

	<b>Page</b>
<b>Executive Summary.</b>	<b>4</b>
<b>Conclusions.</b>	<b>5</b>
<b>Recommendations.</b>	<b>7</b>
<b>Purpose.</b>	<b>9</b>
<b>Background.</b>	<b>9</b>
<b>To understand and evaluate the work of the MET Operational Group.</b>	<b>10</b>
<b>To understand and evaluate how effectively young people in Portsmouth at risk of CSE are identified and to evaluate the interventions offered to young people who have been exploited sexually or who are at risk of being exploited.</b>	<b>17</b>
<b>To consider how effectively the risks of exploitation are being minimised both by the Council and other partners on an individual basis and across the city, and what evidence supports this taking into account experience in other areas of the country.</b>	<b>21</b>
<b>To review feedback from service users.</b>	<b>36</b>
<b>To investigate how effectively the local authority works with other agencies to tackle sexual and other forms of exploitation of children and how they ensure prosecution of perpetrators.</b>	<b>39</b>
<b>Equalities Impact Assessment.</b>	<b>47</b>
<b>Legal Implications.</b>	<b>47</b>
<b>Finance Comments.</b>	<b>47</b>
<b>Budget and Policy Implications of the Recommendations.</b>	<b>49</b>
<b>Appendix 1 – A list of meetings held by the Panel and details of the written evidence received.</b>	<b>54</b>
<b>Appendix 2 - A glossary of terms used.</b>	<b>56</b>
<b>Appendix 3 - numbers (and %) of contacts to the MASH by each agency</b>	<b>57</b>
<b>Appendix 4 - outcome of the MASH process</b>	<b>58</b>
<b>Appendix 5 - Preliminary Equalities Impact Assessment</b>	<b>59</b>

## EXECUTIVE SUMMARY

### **1. To understand and evaluate the work of the MET operational group.**

The panel received evidence from strategic managers about the work of the Portsmouth Safeguarding Children Board (PSCB) and the Missing, Exploited and Trafficked (MET) operational group. The panel learned that the group has multi-agency representation with the aim of ensuring that they work together to prevent children and young people being sexually exploited by understanding the issues associated with this activity and raising awareness. It reviews the information they have to ensure that the response is appropriate to the level of risk and will share intelligence on hotspots of activity, parties, perpetrators etc.

The panel were pleased to note that all members of the MET have a real commitment to attending meetings and ensuring that interventions are put in place to minimise the potential for harm for those children on the MET at risk list. The group are now considering how best to use the Barnados BME worker to get the messages across to these communities. The MET are also using the database developed by the Youth Offending Team (YOT) to map young people in the city and are using this to look at dispersing groups.

The CSE peer review that took place at the end of 2016 found that the Council's MET strategy is a live strategy with multi-agency ownership and oversight. The peer review also concluded that the MET operational group is robust and there is good commitment across agencies.

### **2. To understand and evaluate how effectively young people in Portsmouth at risk of CSE are identified and to evaluate the interventions offered to young people who have been exploited sexually or who are at risk of being exploited.**

A number of different agencies provided evidence to the panel about the excellent work they are doing to identify young people at risk and how they are supporting young people who have been sexually exploited. The panel learned that there are a number of interventions offered to young people at risk or young people who have been exploited and excellent work is taking place.

### **3. To consider how effectively the risks of exploitation are being minimised both by the Council and other partners on an individual basis and across the city, and what evidence supports this taking into account experience in other areas of the country.**

The panel learned during the review that the PSCB offers an extensive training programme for people working directly with children which has been well received. The council's part time online safety officer also has



organised a number of training sessions for school staff and training for parents. The Operation Makesafe training held last year was well attended by a number of representatives from different organisations and positive feedback was received from this. They also heard about a number of CSE awareness campaigns including Alice's diary and 'Is this Love?' All witnesses involved in the review considered that cross city working relationships were strong.

#### **4. To review feedback from services users.**

Three young people who had previously been at risk of CSE met with the Health Development Officer to talk about their experiences and which organisations had supported them. Their responses were valuable to the panel for understanding first-hand the experiences and support available to young people identified at risk of CSE. The panel learned that one of the drivers for the young people leaving home was that there was not a good relationship within the family unit. The panel therefore considered that this needed to be improved and noted the importance of the whole family dynamic in addressing CSE. The feedback also highlighted that young people considered intimidated by the number of professionals involved in the Team around the Child (TAC) meetings.

#### **5. To investigate how effectively the local authority works with other agencies to tackle sexual and other forms of exploitation of children and how they ensure prosecution of perpetrators.**

The panel received evidence about the work of the Multi-Agency Safeguarding Hub (MASH) which consists of several agencies including Hampshire Constabulary, Education and Children's Social Care and means they can quickly share information. They also heard about the work of Hampshire Constabulary and Barnados and how they are working with the council to ensure that CSE is minimised in the city. The panel were impressed with the work of the MASH and considered that there is a real multi-agency approach to tackling CSE. The recent peer review also concluded that the MASH is functioning well and information is being shared across agencies appropriately.

### **Conclusions**

Based on the evidence and views it has received during the review process the Panel has come to the following conclusions:

1. Following high profile cases in some other local authorities, the panel was keen to hear about the local response to CSE. Overall the panel was impressed by the evidence it saw of work to prevent and deal with CSE in the city and commended the work of all the witnesses. The panel was clear, however, that continued vigilance is important and the positive work it heard about needs to continue. (paragraphs 3.9-3.16).

2. The panel was pleased to note that when partners are aware of a child at risk, they are responding to this quickly and steps are put in place to protect the child. The panel were encouraged by the work of the Multi-Agency Safeguarding Hub (MASH) and noted that the feedback from the recent peer review of CSE about the MASH was complimentary. The panel noted however that the sexual health service is using a different risk assessment tool. They also noted continued reflection on whether there might be unmet need among the BME community given the low numbers of BME young people on the at risk lists monitored by PCC and partners. (paragraphs 3.22, 5.51, 7.1-7.10, 7.18 and 7.32 ).
3. The effective tackling of CSE requires the full participation of all partners. The MET operational group appears robust and the peer review feedback supported the impression of the panel that there is good commitment across all agencies. The panel received evidence to suggest that engagement with CSE issues amongst schools can be variable and felt that it is therefore important that all schools are encouraged to take CSE seriously. The panel also felt that in some organisations, the level of engagement might be driven by individuals rather than the organisation (paragraphs 3.1-3.25, 5.53-5.64)
4. The panel noted that the protection of vulnerable children is one of the priorities of the Safer Portsmouth Partnership (SPP). It also noted the feedback from the peer review that links between the PSCB and SPP should be strengthened. (paragraphs 7.36 & 7.38).
5. The panel noted that a lot of positive work is taking place in terms of awareness campaigns and praised the partners involved with this. The monitoring of the effectiveness of the campaigns however will be important. The panel noted that Hampshire Constabulary will be completing a detailed evaluation of the Alice's diary campaign in early 2017 and felt this would be interesting to receive when available (paragraphs 4.9, 4.10, 5.33-5.40, 5.42, 5.47).
6. Personal, Social, Health and Economic (PSHE) provision is not a statutory requirement for schools and there is currently no data on which schools provide PSHE provision. Data is also not held on how many children are opting out of PSHE lessons. The panel considered however that whilst schools have a crucial role to play in educating about the risks of CSE, there should be equal emphasis on youth workers, taxi drivers and hoteliers. There should be an aim to educate a broader pool of people who have contact with children that it is acceptable to raise concerns without the fear that harm will be caused to any innocent person (paragraph 5.63).
7. It is important that children develop an appreciation of what a healthy relationship feels like and all partners have a role to play in promoting healthy relationships. (paragraph 5.38, 5.48, 5.50).

8. The recent Operation Makesafe training was attended by 217 participants including bar staff, taxi drivers, hoteliers, security staff and PCC Public Health and licensing colleagues. Excellent feedback was received from this session from participants. (paragraph 5.14 & 5.15)
9. The panel noted that the granting of taxi licences is not dependent on receiving training on CSE. Currently CSE is part of the taxi drivers' compulsory test but this is a reading exercise only to give awareness, with a link if drivers wish to obtain further information. (paragraph 5.25, 5.31)
10. The online world is largely unregulated and the online risks of CSE are a huge issue. The landscape is always changing and new technology, social media etc. will always be introduced. It is therefore not about tackling one medium but tackling all areas. (paragraph 5.50, 5.54, 7.3 & 7.9)
11. The feedback from the three young people highlighted that one of the drivers for them leaving home was that there was not a good relationship within the family. The panel felt that the council and partners need to improve working with families and noted the importance around the whole family dynamic in tackling CSE. (paragraphs 6.6 and 6.8).
12. The feedback from the young people also highlighted that young people felt intimidated by the number of professionals involved in the Team Around the Child (TAC) meetings. (paragraphs 6.4 and 6.6).
13. The co-ordination of the joint training offer from sexual health and public health services has ceased due to savings made in administrative support, so that no response is currently made to training requests. (paragraph 4.23).

### **Recommendations**

1. Although good work is taking place to tackle CSE within Portsmouth, partners should not be complacent and should continue to raise awareness. CSE should be seen at all times as a corporate council and wider Children's Trust responsibility. In addition, as protection of vulnerable children is one of the priorities of the Safer Portsmouth Partnership (SPP), the Partnership should take a greater role in addressing CSE. It would be helpful for the SPP to include a representative from children's services. (conclusions 1 &4).
2. That the PSCB ensure that consistent information on children at risk is obtained and shared between partners. All partners should maintain efforts to ensure that all sectors of the city receive the support they need. PCC and commissioned services should draw on all possible sources of support in order to link well with all young people. (conclusion 2).
3. That all schools devote time to issues of emotional and mental wellbeing and healthy relationships and promote consistent approaches to

identifying and prevention of CSE. (conclusion 3 & 7).

4. That careful evaluation and continued thought be given on the way that children can raise concerns about CSE. The PSCB should work with schools to raise awareness of the NSPCC app which will refer concerns directly to the relevant local authority. The CSE publicity campaigns should continue to encourage children to report concerns to an adult and these should be evaluated and continue to be monitored. Schools should be forthright and have a dialogue with parents and guardians about CSE and the importance of relationship education at school. (conclusion 6).
5. That the PSCB continues its focus on online safety and getting key messages across to families about the risks of the online world. (conclusion 10).
6. That as part of judging the effectiveness of the Stronger Futures Strategy, regular discussions should take place with schools about the nature of the support available and the role of both the council and schools in supporting families. This will also help to remind schools about the services available to children and schools in their work in supporting families. (conclusion 6)
7. That the PSCB and Hampshire Constabulary consider holding further Operation Makesafe training sessions for all taxi drivers, hoteliers and employees of licenced premises. This will be subject to monitoring the continuing feedback of the effectiveness of the sessions. (conclusion 8).
8. That PCC makes CSE training mandatory for taxi drivers and investigate how other local authorities have achieved this and explore the best model for Portsmouth. (conclusion 9)
9. That a whole family approach be undertaken to understand the whole family unit in order to support families and children at risk of CSE (conclusion 11).
10. That there is a lead professional for children and young people who have been identified as at risk of CSE as continuity of contact and the relationship with an individual worker is important. This should be in a form that is empowering not intimidating to vulnerable young people. (conclusion 12).
11. That the PCC Cabinet should be encouraged to pay close attention to the information about CSE in the annual report by the PSCB and that aggregate information on cases open to Children's Social Care should be included within quarterly performance reports to the Governance Audit and Standards Committee. (conclusion 1).
12. To review the delivery of workforce training around sexual health. (conclusion 13).

13. That a report on the progress against the above recommendations be monitored and a report received by the Scrutiny Management Panel six months after the report has been signed off. (conclusion 1).

The budgetary and policy implications of these recommendations are set out in section 12 on page 49.

**1. Purpose.**

The purpose of this report is to present the Cabinet with the recommendations of the Education, Children and Young People Scrutiny Panel following its review into how well Portsmouth City Council and partners are preventing and dealing with child sexual exploitation (CSE).

**2. Background.**

2.1 The Scrutiny Management Panel agreed on 31 July 2015 that the Education, Children and Young People Scrutiny Panel's second topic for the previous municipal year should be to review how well Portsmouth City Council and partners are preventing and dealing with child sexual exploitation.

2.2 The review was undertaken by the Education, Children and Young People Scrutiny Panel, which comprised:

Councillors Will Purvis (Chair)  
David Tompkins (Vice Chair)  
Ben Dowling  
Paul Godier  
Suzy Horton  
Gemma New

Standing Deputies were: Councillors Dave Ashmore, Ken Ellcome, Hannah Hockaday and Matthew Winnington.

2.3 Following Annual Council on 16 May 2017 Councillor Neill Young was appointed chair and the panel comprised

Councillors Ben Dowling  
Paul Godier  
Suzy Horton  
Will Purvis  
David Tompkins (Vice Chair)

2.4 At its meeting on 21 June 2016, the Panel agreed the following objectives:

- To understand and evaluate the work of the MET Committee and the MET operational group
- To understand and evaluate how effectively young people in Portsmouth at risk of CSE are identified and to evaluate the interventions offered to young people who have been exploited sexually or who are at risk of being exploited.

- To consider how effectively the risks of exploitation are being minimised both by the Council and other partners on an individual basis and across the city, and what evidence supports this taking into account experience in other areas of the country.
- To review feedback from service users
- To investigate how effectively the local authority works with other agencies to tackle sexual and other forms of exploitation of children and how they ensure prosecution of perpetrators.

2.5 The Panel met formally to discuss the review on seven occasions between 21 June 2016 and November 2016.

2.6 A list of meetings held by the Panel and details of the written evidence received can be found in *appendix one*. A glossary of terms used in this report can be found in *appendix two*. The minutes of the Panel's meetings and the documentation reviewed by the Panel are published on the council's website [www.portsmouthcc.gov.uk](http://www.portsmouthcc.gov.uk).

### **National Context**

2.7 CSE became an issue of national concern following a number of high profile cases (including Derby, Rochdale, Rotherham, Oxfordshire and Torbay) that highlighted serious shortcomings in the response to this particular type of child sexual abuse.

2.8 In February 2017 the Department of Education (DfE) published updated guidance defining child sexual exploitation as a distinct form of sexual abuse:

*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.*

### **3.0 To understand and evaluate the work of the MET Operational Group.**

3.1 As part of their review of how well Portsmouth City Council and partners are preventing and dealing with CSE the panel members heard evidence on the work of the MET operational group from strategic managers.

#### Background

3.2 The Portsmouth Safeguarding Children Board (PSCB) Business Manager explained that the PSCB has overall responsibility for ensuring there is a coordinated, multi-agency response to children at risk of sexual exploitation, going missing or being exploited and/ or trafficked.

3.3 The PSCB established its own CSE strategy group to oversee the work of agencies in Portsmouth to ensure there was sufficient cooperation locally. It

used the learning that was happening operationally to develop a CSE risk assessment toolkit designed to best measure risk as well as support practitioners in this process. Other local authorities use the SERAF (Sexual Exploitation Risk Assessment Framework) tool but Portsmouth decided to develop its own which is easier to explain.

- 3.4 In March 2015, the former 4LSCB MET Strategic Group was disbanded as each area had developed its own group as this was seen as duplication. The Portsmouth CSE group broadened its remit in response to this to include oversight of the issues arising from children who go missing from home or care and those who may be trafficked.
- 3.5 The Deputy Director of Children's Services explained that the Missing, Exploited and Trafficked (MET) Group, was established to provide strategic oversight of missing, exploited and trafficked children. This group has multi-agency representation and is responsible for the policy and performance of the work to address these issues and improve practice.

#### MET Strategy

- 3.6 The PCSB's MET Strategy runs from April 2016 to March 2019. Its vision is to safeguard children and young people from harm as a result of going missing; child sexual exploitation; or trafficking (or exploitation arising as a consequence of being the victim of trafficking). To achieve this 5 key practice pillars underpin the local response:
1. Scrutiny and Oversight
  2. Understanding & Identifying
  3. Preventing
  4. Intervention & Support
  5. Disruption & Justice

These activities are monitored through a working action plan that is scrutinised and updated on a regular basis to determine progress.

#### Membership of the MET Operational Group

- 3.7 The Chair of the MET operational group advised the panel that the MET Group brings together all the main organisations who work with children and families in Portsmouth, with the aim of ensuring that they work together effectively to keep children safe. There are now 20 different agencies who attend MET meetings. Partners include Children's Social Care (CSC), Hampshire Constabulary, Barnardo's, Portsmouth CCG, Solent NHS Trust, probation, an education representative and Portsmouth Abuse and Rape Counselling Service (PARCS).
- 3.8 More recent representatives invited to attend meetings include the youth service, as they work with young people on a daily basis, a housing representative and a police analyst who attends to advise on patterns and areas that might need dispersal.
- 3.9 There are also now better links with special schools and the risk assessment toolkit has been disseminated to them. Harbour School now regularly attend

MET meetings and the Group are considering whether other agencies dealing with vulnerable young people should be invited to attend meetings.

### Current Practice and Performance

- 3.10 The Chair of the MET operation group and Deputy Director of Children's Services advised the panel that the MET Operational Group meets monthly to look at all children identified as being at risk of CSE and to monitor and develop the front-line practices across Portsmouth in relation to the five key pillars. Strategically the aim of the MET Group is to prevent children and young people being sexually exploited by understanding the issues associated with this activity and raising community awareness, so as to equip our neighbourhoods, schools and workforce with the knowledge and tools to tackle the problems.
- 3.11 All members of the MET Group have a real commitment to attending meetings. Partners want to continue to identify those children and young people who are at risk of sexual exploitation so as to intervene robustly to minimise the potential for harm, disrupt the problematic behaviours and use criminal procedures as appropriate.
- 3.12 A better understanding of the indicators of CSE by frontline practitioners has resulted in a steady increase in the number of children being identified and monitored by the group. Children are categorised as being at one of three levels of risk:
- High - the child will be open to CSC;
  - Medium - the child will have a lead professional;
  - Low - the child will be known to and checked on by professionals.

As the children at high risk are already open to CSC, discussion at MET meetings focusses on those children at medium and low risk. The Deputy Director of Children's Services advised that at the end of October 2016 there were 46 children at risk of CSE being discussed at the MET (1 high, 25 medium and 20 low). Updated figures were requested from the Deputy Director of Children's Services and as of 24 March 2017 the figures were 0 high, 12 medium and 9 low risk.

- 3.13 When the group meets, it reviews the information they have to ensure that the response is appropriate to the level of risk and will share intelligence on hotspots of activity, parties, activity of perpetrators/subjects etc. The group focuses on ensuring sufficient and robust safety plans are in place for those children at high risk and those at medium risk who are nearing high risk. The risk assessment tool is then used along with other data to assess whether the work they are doing is effective in terms of identifying at risk children.
- 3.14 The group maintains a list of all children and young people who have been identified as missing, trafficked or at risk of CSE that includes:
- The number of high, medium and low risk flags;
  - Gender split;
  - Age profile;
  - Ethnicity;



- Accommodation (whether the child/young person is with family or in foster/residential care);
- Missing person hotspots;
- Information on victims, perpetrators, locations and intelligence gaps.

### Statistics

3.15 The Chair of the MET operational group advised the panel that:

- The majority of children discussed at the operational group are open to CSC.
- 75% of children identified as at risk of CSE are female.
- The average length of time a child is on the 'at risk' list is 3-4 months. A child will only be removed from the list once the risk has gone.
- The majority of children discussed at meetings are at medium risk.
- There have never been more than five high risk children on the list, it is currently at two.
- 50% of children identified as at risk of CSE are aged between 13 and 15 years.
- 90% of children identified as at risk of CSE are white British.
- A high number of the children are experiencing education difficulties or are not in school. The team are linking with the education team on this.
- There has been a reduction in cases where psychoactive substances are involved.
- There has been an increase in the number of children at risk of online CSE - this is a national issue.

### Progress and ongoing work

3.16 The Deputy Director of Children's Services explained that Portsmouth's CSE Strategy was deemed to be 'good' when Ofsted inspected the local authority in 2014, although the report noted that 'work must continue to ensure that all practitioners across the city are appropriately trained and made aware of the issues.'

3.17 Since then, Ofsted has developed a thematic inspection to evaluate the effectiveness of local authorities' (and their partners') response to CSE, identifying a number of key issues and making a series of recommendations that have informed the ongoing development of our MET Strategy and strengthened our action plan. These include:

- The need to cross-reference information and soft intelligence relating to children who are frequently absent from school with work to identify children and young people at risk of CSE;
- Ensuring that local strategies and plans are informed by the opinions and experiences of those who have been at risk or victims of CSE;
- The importance of evaluating training and awareness-raising with a focus on how it makes a positive difference to keeping children and young people safer;
- The need to improve victims' experience of court where a prosecution is brought;

- The need to audit CSE case files (LA and multi-agency) to identify deficits in practice and develop plans to improve practice;
- The need to start awareness-raising in schools at primary phase;
- The need for targeted work to raise awareness amongst particular communities including Black and Minority Ethnic (BME) communities and the lesbian, gay and bisexual transgender (LGBT) community.

3.18 The Chair of MET operational group advised that she had recently attended the 'Regional Problem Profile' workshop which looked at issues other LA's are experiencing with regard to CSE to see if they are relevant to Portsmouth and if so look to put plans in place. Examples included issues with criminality so the MET now has a YOT worker on the group and children not in education, employment and training (NEET's) who are being missed and the MET now is addressing this through its education representatives.

3.19 A bespoke piece of work mapping which schools are most at risk of CSE is being undertaken by the MET group. The MASH education worker is the link to schools and supports them with the risk assessment toolkit. The PSCB have been providing training to schools and individuals working with families on CSE and the signs to look out for.

3.20 The database developed by YOT which maps young people at risk of CSE is now being used to look at gaps in the city and dispersing groups. The MET group are now looking to use this to do more targeted work to map children's friendships and relationships across the city. Officers are looking at moving the database across and adding in the historic information and this will be used to create reports. The MET group also discuss which groups of children know each other and how to address this. An example may be to have a group meeting to discuss group activity and disruption activity.

3.21 Further work the MET group are considering includes further training with schools which will be more targeted, training for housing providers for the hostels and engaging with colleges further to ensure that once a young person at risk has left college they are not 'lost' - this could possibly be done through neighbourhood policing. Work is taking place with the inclusions team on which children are missing school and the reasons for this as they are at risk. The MET group are also looking to continue the work of the guardian angels and ensuring a better linkup of training of street pastors.

3.22 The under reporting of CSE within the BME community is discussed at MET meetings. The MET are considering what is delivered through schools in the PHSE lessons as some young people in BME communities might not be able to attend these due to cultural reasons. Barnado's have a BME worker so the MET group are looking to use this person to consider how to improve this by talking to members of these communities. One option would be for the BME worker to talk to church groups - a piece of work was previously carried out with the Pentecostal Church. The MET Group is actively looking at this.

3.23 In relation to strategic partnership working, the Deputy Director of Children's Services said that she considered that the partnership works well but there is still room for improvement. She considered that the education and health data

could be used more effectively and work was being done to capture additional information such as whether school attendance improved following interventions etc. With regard to data from academies, it was confirmed that the authority had good links into the academies and they already supply school attendance figures. CSC have taken the lead in working with the most vulnerable children and has worked hard to improve awareness of CSE in order to enable best responses.

#### Head of Safeguarding and Patient Safety Portsmouth CCG

- 3.24 The Head of Safeguarding and Patient Safety advised that she started her role in February 2016. The CCG have reviewed other roles and have appointed an Associate Designated Nurse for Safeguarding Adults (F/T) and an Associate Designated Nurse for Safeguarding Children and Looked After Children (P/T). This increases the safeguarding representation and will enable improved engagement with the MET Operational Group in the future. It is vital that a CCG representative regularly attends MET meetings and appropriate attendance from the Child and Adolescent Mental Health Service (CAMHS) should be explored on the MET Committee.
- 3.25 PCCG's key contacts are GPs, CAMHS, school nursing and sexual health. They would expect to come into contact with young people via those services for example, as a result of providing contraception advice or for the treatment of injuries. It was very difficult to assess how effective information sharing currently was. A significant amount of work to upskill GPs was taking place to advise them what they should be looking for. Although useful initiatives were already taking place there was a need to build on these.
- 3.26 With regard to sexual health, service practitioners were skilled in asking the right questions as were those dealing with adolescent mental health issues. However there was a need to do more training with GPs. If signs were spotted that a child was at risk of CSE, the child would be referred to MASH or the child's social worker if one is allocated.
- 3.27 Targeted training takes place once a month for GPs and there is also monthly training to a larger group. The CCG are also exploring the use of the shortened risk assessment adopted by Hampshire Safeguarding Children Board for some professionals. With regard to national resources for GPs, a booklet from NHS England has been produced and there is a GP toolkit concerning safeguarding. The Head of Safeguarding and Patient Safety considered that training delivery and uptake by GPs and other health professionals could be improved. NHS England (Wessex) is currently undertaking some work around MET and CSE and this could be investigated.
- 3.28 As part of the induction process, staff are required to train in safeguarding up to level 3 which includes CSE. Safeguarding training is also provided through the agency and before a person can be employed they must go through the correct checking procedure. Portsmouth Hospital Trust uses the SERAF tool which is a national tool concerning safeguarding and they also have an in-house safeguarding team.

Barnardo's

- 3.29 The CSE & Missing Team Manager at Barnardo's as part of the Strategic and Operation MET Group, was asked to comment and contribute to the overall MET strategy. All other agencies part of MET Strategic and Operational group have also been invited to contribute and comment on a number of occasions to the MET Strategy.
- 3.30 The MET Strategy is relevant to the current city response and follows national guidelines on how to prevent, disrupt and identify CSE and offers information on the multi-agency support network that is available in the city to young people who are at risk of CSE or are being identified as Missing, Exploited or Trafficked (MET).
- 3.31 Deadlines and 'action owners' are identified and regularly reviewed at MET strategic meeting to ensure progress and take into consideration any possible changes (e.g. change of available support due to cuts, etc.). Barnardo's has been involved in piloting the Portsmouth risk assessment tool and the outcome (risk level identified) was the same outcome as the one obtained completing a SERAF.
- 3.32 In the annual report provided by Barnardo's (April 2015-March 2016) table 1 below offers a brief analysis of all the Barnardo's U-turn closed cases and cross-referencing the cases with the (then) current (March 2016) MET operational list. It can be seen that all the young people supported had a low or no risk of CSE. Although this refers to Barnardo's U-turn cases, a number of other agencies were involved in supporting the young people and this is a reflection of how the work that is done at Strategic and Operational MET filters down to benefit young people who are then safeguarded.

*Table 1 - closed cases CSE risk*

No of Young people	Initial risk level	Risk level at closure	Explanation if no/low risk
1	High	Medium	Young person disengaged, it was felt Sorted* (please see further information at paragraph 5.49) was best placed to support young person.  YP currently (March 2016) on MET list as Low.
1	High	Med	Young person disengaged however at strategy meeting it was agreed that young person had enough professionals involved (YOT, SCS, residential Support Staff, SWITCH, College, CAMHS).  YP not currently (March 2016) on MET list. Which indicated no longer at risk of CSE
1	High	High	Young person was moved to secure accommodation so our involvement stopped.  Young person not currently (March 2016) on MET list. Which indicated no longer at risk of CSE

6	Medium	Low	One young person still on MET list as Low. All other young person are no longer on MET List
6	Medium	None	no longer on MET List
2	Low	None	no longer on MET List

**4. To understand and evaluate how effectively young people in Portsmouth at risk of CSE are identified and to evaluate the interventions offered to young people who have been exploited sexually or who are at risk of being exploited.**

4.1 The panel heard valuable evidence from a number of sources on how young people at risk of CSE are identified and the interventions in place to help those who have been exploited sexually or who are at risk.

Portsmouth Abuse and Rape Counselling Service (PARCS)

4.2 The panel received evidence from the PARCS prevention service worker. The Panel were informed that PARCS provides free specialist counselling and psychotherapy to everyone aged 5+ who are resident in Portsmouth and South East Hampshire and who have experienced any form of sexual violation at any time in their lives. Between April 2015 and March 2016 the PARCS prevention team worked with 3,512 young people in Portsmouth.

4.3 PARCS has 8 paid staff and over 50 volunteers who are all fully trained counsellors. The charity delivers a number of prevention workshops (to young people, teachers and carers) covering the impact of sexual bullying, sexting, internet safety (delivering CEOP Ambassador training), and developing empathy and listening skills. The prevention worker has also designed 'bespoke' workshops responding to the particular needs of individual schools using a variety of methods including art and drama. These workshops are delivered to all Portsmouth schools.

4.4 The prevention service has been running for 19 years with the aim of preventing sexual abuse. There is one full time post, funded from a grant from the Tudor Trust and this allows the member of staff to undertake more long term work. The postholder is able to follow up with the young people and offer practical support for however long it is required. The staff will also work with young people who have been targeted and hold group sessions which are productive as they can hear that they are not alone and all support each other following their disclosure.

4.5 There is also a part time post within the prevention service funded by PCC. PARCS have been providing support to schools for the last 15 years including holding workshops, attending assemblies and PHSE lessons. This gives the opportunity for young people to talk about their experiences and they often receive one or two disclosures per session. Schools will approach PARCS to ask them to hold a session for their school and they also work with private schools. PARCS work to a co-productive model so will ask what issues schools are concerned about and what they would like them to cover. Research indicates that if a child has concerns then in most cases they will tell their

friends rather than an adult. PARCS will work with what the young people tell them and use the bystander model which equips the young person to deal with disclosing. The bystander model views the target audience as potential allies in preventing gender based violence and abuse and it challenges 'bystanders' to develop what have been called prosocial behaviours; behaviours that benefit others.

4.6 The prevention worker said that it is very difficult to obtain information for minority groups as the crimes are often under reported. PARCS work with the hard to reach groups but this must be done sensitively so that they allow PARCS into their communities and will 'sidestep' into the communities to find a way to engage with them. An example of this was their work with the Afro Caribbean community a couple of years ago.

4.7 The waiting list for phone referrals varies. As of 30 November 2016 the reported waiting list was:

- Adult Service (specialist counselling) – 6 months
- Young People (aged 13-24 years) – 2 months (shorter if young people are flexible regarding when they can attend)
- Children (aged 5-10 years) – no waiting list.

Adult clients are assessed for counselling within two weeks and are offered a number of options whilst they are waiting for counselling. These include:

- a) Emotional telephone support (ETS) 6 – 8 weeks of telephone counselling. (The cost of calls are met by the service)
- b) A closed group called 'Beyond Trauma' (which runs for 8 weeks – women only) and is aimed at developing coping skills and developing resilience
- c) Access to a group (women only) that is held on a Wednesday morning. The group is open ended (women can join and leave at any time) and is facilitated by two members of the PARCS team but the group agenda is set by the women
- d) Access to a helpline that operates on a Monday (1-3pm) Wednesday and Friday (7 -10pm).
- e) They also offer occasional/specialist groups including a singing and a drumming group.

4.8 The prevention worker said that if PARCS had more funding available it could offer more services as more staff could be employed. At present there are too many referrals to cope with. Funding is currently received from various sources including the Ministry of Justice, Children in Need and Portsmouth City Council. Staff also organise numerous fund raising events and donations are also received from different parties which is a great help.

4.9 With regard to what more could be done by the Council or the wider structure to improve the way that CSE is being dealt with, the prevention worker felt that more joined up thinking is required. PARCS sit on the MET operational group and joined up working is improving, but there have been situations when they are unaware what other organisations are doing, for example when new campaigns are launched. It is therefore vital that all organisations who are

involved in tackling/preventing CSE share the work they are doing with the other organisations. Training on CSE is very important and PARCS are very grateful to PCC for providing their safeguarding training. PARCS staff also attend disclosure training. In addition, some people are still not aware that PARCS exist and the support that is offered so more can be done by both PARCS and other organisations to promote the service.

- 4.10 PARCS have found that many people they work with will not engage with a poster so they need to find other ways of getting the message across to young people. It is also important to measure the effectiveness of campaigns. Positive feedback was received following the domestic abuse 'Is this love' campaign which used the bystander model.

#### Social Worker

- 4.11 The panel received evidence from one of PCC's social workers who attends MET operation group meetings. She supported PCC when the CSE Guardian Angels campaign was launched last summer, and supported PSCB with the training programme which was mainly aimed at schools to raise awareness of CSE.

- 4.12 All social workers are advised to complete the CSE e-learning modules and the risk assessment toolkit is followed. Any children identified as being at risk are subject to an assessment and then supported with a plan or signposted out. Any new nominations of children identified as being at risk within the team will be added to the MET discussion.

- 4.13 The social worker suggested that the following could be considered to further improve how CSE is dealt with in the city:
- Very little is currently known about which apps children are using through which perpetrators can target children so she considered that more could be done around this.
  - There is valuable information obtained from the online safety officer and it would be good to share this with frontline practitioners.
  - Barnardo's undertake direct work with children but this information is not widely shared with frontline practitioners
  - It would be useful to understand and evaluate the effectiveness of MET meetings.
  - The CPI forms are used by the police and frontline practitioners to obtain information on CSE cases, however these are not widely used particularly in schools. It was suggested that these should be promoted in schools as they have a better knowledge of behaviours in children and recognising signs of CSE as they are working with them daily.

- 4.14 Although some schools are attending safeguarding training, the social worker considered it would be good to cross reference these with the schools whereby children have been identified as being at risk. It takes a long time to build relationships with schools; every school is different and has different training requirements.

- 4.15 The Panel followed this up with the Deputy Director for Children's Social Care, who advised that the current system allows them to determine referrals made by schools. Between April and September CSC received 175 referrals from schools. These can be cross referenced with children at risk of CSE and two children in this cohort have been considered at risk of CSE.
- 4.16 The data suggests that there have been no referrals to CSC as a result of CSE. However, this may be because schools are discussing concerns with MASH without it becoming a referral to CSC. The Deputy Director of Children's Services said that unfortunately the CSC team do not record referrals by specific schools.

#### Youth Offending Team (YOT)

- 4.17 The panel received evidence from a PCC Youth Justice Officer about the work of the YOT team in relation to CSE. She advised the panel that young people are referred to the team via the police or the courts as they have committed an offence. The team use the CSE toolkit and have all received CSE training through Barnado's. They work closely with the police and also have a member of the team who attends the MET operational group.
- 4.18 The initial assessment covers social welfare areas and through one to one sessions the YOT officers will discuss CSE areas and relationships so there is always the opportunity for them to disclose anything else going on in their lives. During every school holiday the YOT team hold a 'take a risk day'. These cover various topics and they have had disclosures arising out of these sessions. The YOT team is very good at referring children to the best organisation who can help them.
- 4.19 Many CSE cases are already identified before YOT becomes involved. At the MET meeting on 17 November there were 39 CSE cases discussed. Five of these are currently open to YOT (all five were also open to Children's Services as a Child in Need or are on a Child Protection Plan). In addition to this there were 18 trafficked cases discussed: one of which is currently open to YOT, and 37 Missing cases were on the list: eight of these are currently open to YOT.

#### Sexual Health Team

- 4.20 The Lead Nurse for Community Sexual Health Team and Safeguarding (Portsmouth and South East Hampshire) gave the panel an overview of the work of the sexual health team. She explained that the service is based at St Mary's hospital and deals with all aspects of sexual health including HIV, STD's and unplanned pregnancies. There are two members of staff working as outreach nurses, each working 22 hours a week and there is one school nurse for Portsmouth. All staff are trained in CSE and they will complete their own risk assessment tool for any client under the age of 16. If staff have concerns about a child they will follow the protocol and it is very important that all practitioners receive training.
- 4.21 The Lead Nurse advised that the risk assessment tool had been developed in house. She said that the MET Group had not commented on this. The CSE &



Missing Team Manager at Barnardo's said that the MET had discussed the short SERAF tool which had been rolled out to other areas of health, and considered that this was not appropriate. However they had not discussed the risk assessment tool used by the sexual health team. The Director of Children's Services said that it would be useful for the MET to have sight of this and suggested this be added to the agenda for the next MET meeting as it is important that the prompts used are understood by all practitioners

- 4.22 The Lead Nurse for the Community Sexual Health Team explained there are two parts to the service; outreach nurses who provide drop in sessions at King Richard School, Portsmouth College and The Foyer hotel and referrals from agencies including Barnardo's and CSC. King Richard School is one of the locations for the outreach nurses due to its locality in the north of the city and also because it used to be a health living centre. King Richard School are champions and do a lot of work and training on sexual health in their school. There is also a sexual health practitioner who provides training for people working with young people and a young people's drop in clinic on Thursday's from 3-5:30pm.
- 4.23 The panel were advised that there are currently 18 people on the waiting list for training. Training is provided free of charge however the Lead nurse advised that due to budget cuts no one is administering the requests for training. The Health Development Officer explained that historically this was undertaken by the Independence and Wellbeing Team and Children and Young Person Services within Public Health. This role has now been made redundant and organisations are now required to provide their own admin support.
5. **To consider how effectively the risks of exploitation are being minimised by both the council and other partners on an individual basis and across the city, and what evidence supports this taking into account experience in other areas of the country.**

#### PSCB Business Manager

#### CSE training

- 5.1 The PSCB Business Manager explained that the PSCB training programme offers a safeguarding training pathway for people working directly with children and parents to develop their skills and knowledge and also ensure that specialist areas are covered through workshops and seminars. The PSCB has developed a number of workshops during 2016. Two CSE and Trafficking workshops were held in January and February with 22 attendees on each, targeting key professionals. Since March an online CSE module has been made available and a Missing, Exploited & Trafficking training session had been embedded into the PSCB Training Programme. Up to July 2016, 128 practitioners had been through workshops or online training on MET. There have been a range of different attendees who have attended the workshops so far across a range of agencies, including social workers, school staff, a couple of neighbourhood police officers and health colleagues.

5.2 There has been a very good response to the training sessions on CSE and trafficking. PSCB is now doing a piece of work looking at which schools are registering for training online and cross referencing this with schools with pupils identified at risk of CSE. The Deputy Director of Children's Social Care advised that community wardens do not receive CSE training, but the on-line CSE training module will shortly be rolled out to them.

5.3 The Deputy Director of Children's Services explained that at the operational meetings, soft intelligence is shared for example where parties were going to be held where alcohol or drugs may be used to groom young people. Alerts were provided where known, and concerning who was meeting up with whom. This intelligence could be taken back to the teams and shared.

#### PCC Council's Safeguarding Children Trainer

5.4 Written information was received from the Council's Safeguarding Children Trainer about the PSCB Safeguarding Children Training Programme - Working with Vulnerable Children (Child Sexual Exploitation, Missing and Trafficked) course. The Council's Safeguarding Children Trainer has emailed all Heads and designated safeguarding leads twice over the past 6 months, to highlight the PSCB course and recommending them to attend. The course aims are to:

- Describe CSE, Missing and Trafficking
- Recognise indicators of children at risk and models of behaviour
- Use local evidence based tools to identify children at risk and be able to follow local 4 LSCB procedures
- Describe ways of supporting children at risk and local organisations who can help.

5.5 This course is included within the Traded Services package of PSCB training so there will be no additional cost for schools who have signed up. For schools who use the training programme on a PAYU basis, the charge for the courses is £50 (full day) and £25 (half day).

5.6 To date only representatives from four schools have attended training offered by the Council's trainer. Two schools received specific CSE training and two received PSCB/basic awareness training. The basic awareness training provided by the PCC to schools is provided to all school staff which includes lunchtime supervisors, caretakers etc. The schools safeguarding lead should then organise regular follow up training with staff. The PSCB trainer advised that she is aware some schools have accessed training offered by Barnado's.

#### PCC Online Safety Officer

5.7 Written evidence was obtained from the Council's online safety officer about the work she is undertaking to educate on online safety. This is currently a one day a week post and included:

#### **Newsletter to schools**

- A Termly Online Safety Newsletter to Schools is provided which links to local and national information and best practice and to raise awareness of support available to Professionals. The Newsletter delivers a clear message to

schools regarding their responsibility to deliver online safety education, safeguarding and training to all teaching staff as per OFSTED guidelines. The Newsletter is circulated via the Education Newsletter, Sorted website and PCSB website to teachers and other professionals working with children in the city. In preparing the newsletter the online safety officer will liaise with Portsmouth University, Hants Constabulary, Sorted, Barnardo's, PCSB, Education and the CSC team.

### **Training**

- Two twilight online safety workshops were delivered with teachers in the South and North of the City - June and October 2016. Workshops were co-delivered with Barnardo's, Sorted and Hampshire Constabulary. The sessions started at 3.30 and were due to finish at 5pm. Both sessions actually finished at 5.30. The objectives of the session were to raise awareness and share concerns/best practice and included:
  - Online Safety Strategy Local and National
  - Sexting Strategy and Case studies
  - Break out Groups Primary and Secondary: what are the risks and what next
  - Training/Resources available
- Feedback from the 19 attendees of these 2 workshops on an evaluation scale of 1-5 with 5 the highest rating resulted in consistent scores of 4/5. Comments included; "opportunity for further discussion" , "lots of resources", "Can plan for future training", "Ideas for parent workshops", "great as new to the post", "In response to how we could improve this workshop "Could be later in the day" "more case studies" "more discussion". The online safety officer considered that the session should be extended to half day sessions which would allow more time for participants to observe relevant resources online and structure the training to cover different areas of online safety other than sexting. Although both trainers have completed the NSPCC online training it would be helpful if they could undertake CEOP Ambassador training.
- Five awareness raising sessions have been held with Sure Start Centres as part of Safe guarding week in May 2016 talking to parents about online safety issues. A presentation and discussion with Portsmouth South Hub - Social Care Team was held which helped to raise this team's awareness of online Safety.

### **Online Safety Committee Meeting x 4**

- Co-ordination of the PCSB Online Safety Committee: key managers within the local authority represent and ensure that Online Safety is considered and delivered within their service. Terms of reference for the committee, an Online Safety Strategy and Implementation Plan were established.

### **Anti-Bullying Meeting x 2**

- The Online Safety Officer attended and contributed to this committee meeting to ensure that schools and agencies have robust systems in place to respond to cyberbullying reflecting Portsmouth City Council's Anti-bullying strategy

2015-17

### **Portsmouth Library Service**

- Attendance at Annual Reading Challenge with Troll Character to distribute leaflets to parents regarding Online Safety- September 2016.

### **Work with Schools**

- Supported St Edmunds Cyberbullying Competition by being a panel judge. April 2016. Also attended Southsea Infant School parents event in October 2016 and responded to online safety questions.

### Training for the Night time Economy

- 5.8 The panel heard from the CSE & Missing Team Manager at Barnardo's that although training had previously been offered to taxi drivers by Barnardo's to recognise signs of CSE, take-up of this had been very poor. Liaison with the children's board had taken place in order to encourage more taxi drivers to become involved. The PSCB team are therefore working with the licensing officers, who have a good relationship with taxi drivers, to promote the training and they are hopeful that there will be a more positive response.
- 5.9 Hampshire Constabulary were tasked with making sure that taxi drivers are aware of the training offered. The provision of CSE training for various relevant groups including taxi/private hire trade has been picked up by Hampshire Constabulary as part of a wider county initiative. The panel were advised by the PSCB Business Manager that it is becoming more common for local authorities to make CSE training mandatory for taxi drivers, before they are granted their licence.
- 5.10 The panel were advised by Hampshire Police that the neighbourhood policing teams are very proactive and police have been into a number of hotels where it has been drawn to their attention there may be children at risk, and the level of success has been phenomenal.
- 5.11 The PSCB are now looking at training the night time economy workforce in CSE. Hampshire Constabulary informed them of Operation Makesafe which is a campaign that was rolled out in the London boroughs to raise awareness of CSE in the business community including hotels, taxi companies and licensed premises. The PSCB team worked alongside the licensing department within the council and organised training on Operation Makesafe on 26 and 27 September 2016 in Portsmouth Guildhall. There were six workshops held over the two days, to learn what CSE is, what the warning signs are that might help them identify a child who may be being groomed and what to do if they become aware of a vulnerable child.
- 5.12 Posters promoting the Make Safe campaign are available that can be displayed; one for children's care homes, one for taxis, one for licensed premises, one for hotels. Copies were available for all attendees of the training event. Members of the public would be unlikely to see these posters as it was thought the organisations would put these posters on their staff noticeboards

etc.

5.13 There have been some success stories following the introduction of operation Make Safe in the area. The panel were informed of an example where a member of staff in a hotel had been concerned about a 14 year old girl drinking champagne with a man and reported this. The police followed this up and it emerged the child was a person at risk and the police intervened. The panel were informed by Hampshire Constabulary that the police are looking to extend the Make Safe Training to festivals, hospitals and custody centres. The training will also be rolled out to other local authorities and they are considering whether to offer this training to parents.

5.14 An evaluation of the Operation Makesafe event was received from the PSCB Business Manager. She advised that there were 217 attendees over the two days with a mixture of attendees including bar staff, taxi drivers, hotel staff, security staff and PCC Public Health and licensing colleagues. The evaluations from the attendees were very positive. All attendees said that following the training they had a basic understanding of CSE. All attendees said they would be able to recognise the signs of CSE and all said they would know what to do to report their concerns.

5.15 Of those who made a comment, these fell into the following main categories:

Very Informative	46
Very Good	38
Interesting	12
Raised Awareness	15
Videos helped understanding	11
Well presented	17
More likely to report	11

5.16 The PSCB Business Manager advised that they are reconvening the team that delivered this training to see if a plan can be agreed to deliver more sessions to various target groups.

5.17 The PSCB Business Manager informed the panel that the Operation Make Safe training was a very low cost operation as the Portsmouth Cultural Trust allowed them to use the Guildhall free of charge, so the only costs were for refreshments and printing. This was approximately £600 to train just under 250 people. All of the materials were either provided free of charge from Hampshire Constabulary or produced by the PSCB Team. There was no charge for any of the trainers and facilitators as they were either members of the team or one of the Board's partner agencies.

5.18 If this training is repeated in the future there may be a charge for the venue costs however it is still a very cost effective option. All the evidence comparing training to online learning shows that being part of a multi-disciplinary learning event is more effective. The PSCB are looking at further sessions next year for the licensed trade and taxi drivers aimed at managers/owners where they will give them a training package they can go away and deliver to their staff.

5.19 The Board already has an online CSE course that is available for staff that regularly work with children in our partner agencies, as well as their taught course on vulnerable children that covers issues of CSE, missing and trafficking.

#### Taxi Licensing

5.20 The Licensing Officer advised that the council's licensing team is responsible for probably the largest combined private hire and hackney carriage undertaking<sup>1</sup> on the south coast. The current numbers are as follows:

- Private Hire Operators 19
- Private Hire Vehicles 972
- Private Hire Drivers 1076
- Hackney Carriages 234
- Hackney carriage drivers 288

5.21 The Licensing Service is situated in a self-contained area on the lower ground floor of the civic offices and has an extensive public counter and reception area together with dedicated interview rooms used by both licensing and police staff. There are notices advising of the signs of CSE displayed prominently within the licensing public reception areas and these have been in place since June 2016.

5.22 The service "co-shares" space with the Hampshire Constabulary Licensing and Alcohol Harm Reduction team and whilst those police officers are mainly dealing with alcohol premises and the late night economy - the ability to mutually share information and/or intelligence and to respond quickly to matters has proved to be invaluable in protecting the public interest.

5.23 Underpinning the work of the service is the recently approved statement of licensing policy for the control, supervision and enforcement of the hackney carriage and private drivers in the city. The licensing policy is a strict policy for taxi drivers and can be used for drivers who do not act appropriately. The policy recognised and reflected (at para 1.8 on page 5) on the disturbing and troubling CSE matters affecting Rotherham Metropolitan Council<sup>2</sup> together with other high profile cases involving Milton Keynes and South Ribble and recommended changes and improvements across the board to ensure all persons in the taxi trade are "fit and proper".

5.24 The policy has been adopted by members and officers alike and the important main changes which relate to CSE matters are as follows:

- Clear guidance on disciplinary action against drivers involved in sexual contact with passengers after being raised by councillors - para 1.7 at

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<sup>1</sup> Source - issued licences on licensing Uniform database - September 2016

<sup>2</sup> The "Casey report" by Louise Casey CB dated February 2015 which examined in detail the conduct of the council's licensing unit so far as the licensing control of the taxi undertaking was concerned in relation to widespread CSE concerns. This followed on from the Jay report.

page 4

- A new power for officers to revoke driver licences where the immediate interests of public safety are apparent - para 24 at page 19
- The re-confirmation of the legal principles for assessing "fit and properness" on the civil burden of the "balance of probabilities" and training to members and officers alike each and every year on the use of these extensive powers - para 1.6 at page 41
- New policy guidelines on the relevance of convictions (or conduct) at para 5.2 and pages 47/48.
- DBS criminal record checks to an enhanced standard AND to require all checks to be against the position of child and adult workforce in line with the workforce regulated activity requirements - para 8.1 at page 90.
- Criminal record checks for ALL persons over the age of 10 and who have lived overseas by way of "certificates of good conduct" - para 8.1 at page 50
- The use of spent convictions (on individual merit) and the use of "soft intelligence" where necessary in determining whether an applicant or driver is deemed to be "fit and proper" - para 4.1 at page 55
- The use of CCTV (front and rear) in licensed vehicles effective from 01 April 2016 for new cars and to be phased in by 1 September 2017 for all vehicles - this will provide empirical evidence - para 5.3 at page 102
- The strengthening of operator and driver conditions to require operators to keep a record of all complaints made for a period of 6 months together with a requirement to report immediately any complaint against a driver that affects the public safety; together with a requirement to keep GPS vehicle tracking records for 6 months -with the driver compelled by licensing condition to report any arrest, detention, charges etc. within 24 hours - pages 108 and 115
- The absolute expectation of collating and analysing complaint trends against drivers with weekly meetings held between licensing enforcement and management to discuss any and all safety issues with an emphasis on safeguarding matters - para 11.3 at page 139<sup>3</sup>

5.25 The Licensing Officer advised that the granting of taxi licences is not dependent on receiving training on CSE. The policy requirements for testing applicants are as follows:

1. Applicants have to demonstrate a good knowledge of the local area. This test covers the following matters:
  - General knowledge and basic law on hackney carriage and private hire matters;
  - Driving theory and highway code;
  - Building locations, local landmarks and shortest routes;
  - Complaints and general rules

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<sup>3</sup> As contrasted with the apparent divided licensing system in Rotherham where the "policy and enforcement" teams did not meet, communicate or even share the same computer database to discuss complaints against drivers. They had no policies in place to determine the concept of "fit and proper" and felt action could only be taken upon conviction of a person. Source - Casey Report - February 2015

2. Applicants will need to successfully complete and pass driving assessment, disability and wheelchair access training. (this came into effect on 1 July 2016) This test will cover:
  - Driving standards and practical assessment (to include eco driving assessment);
  - Disability and wheelchair awareness training.
3. In certain situations where it is considered appropriate to do so, an applicant may be required to undertake English language and proficiency testing.

5.26 The licensing team have worked alongside Hampshire Constabulary and Barnado's to help promote Operation Make Safe. The team have encouraged and ensured the use of strap lines by taxi operators to all their drivers with the electronic message: '*Young person in taxi? Who are they with? Where are they going? Are they safe? Any concerns call police on 101 quote OP MAKESAFE.*'

5.27 With regard to the Operation Make Safe training on 26<sup>th</sup> and 27<sup>th</sup> September, The Licensing Officer advised that approximately 75 drivers had signed up to the training which was encouraging and an improvement on previous years. The team however had received some negative comments from drivers who felt that they did not need to attend.

5.28 The Licensing Team do not believe there is a prevalent CSE risk within the Portsmouth hackney carriage or private hire trades but accept that, on occasion, individual circumstances have arisen with drivers having consensual sex with passengers of adult age. This has led to driver licences being revoked by the Licensing Sub Committee notwithstanding the absence of any alleged criminality and subsequent appeals to the Magistrates' have been dismissed.

5.29 Equally, the team accept that it should not be complacent and continue to work closely with the appointed trade representatives and established operators on all subject matters including CSE concerns. From a licensing point of view, Portsmouth is a "tight and compact" city and the respective hackney carriage and private hire trades keep their ears to the ground and persons in the trade would not knowingly tolerate any suggestion of exploitation.

5.30 The licensed operators and fleet garage proprietors know their respective licences would be at immediate risk if they were associated in anyway with drivers using licensed vehicles to carry out any illegal activity.

5.31 The Licensing Officer advised that there is no intention to make CSE training compulsory for drivers and/or operators and hope that the voluntary attendance at the "Make Safe" seminars will go some way to ensure that the licensing authority are working in partnership with Hampshire Constabulary. CSE is part of the taxi drivers' compulsory test but this is a reading exercise only to give awareness, with a link if drivers wish to obtain further information.

CSE awareness campaigns



5.32 During the review the panel heard from the PSCB Manager and Hampshire Police about the various CSE campaigns to promote awareness of CSE.

### **Alice Campaign**

5.33 Hampshire Constabulary launched the Alice CSE campaign in May 2016 and this has been rolled out to all secondary schools and colleges in Hampshire. This is linked to the Hampshire Constabulary CSE campaign. It is targeted at parents, young people, teachers, social workers, and other volunteers and professionals working with potential victims of CSE. It is based on the Alice in Wonderland story and the campaign's striking artwork aims to make people surrounding a victim of CSE aware of the signs. As part of the campaign Alice's Diary blog is also being launched; written by 15-year-old 'Alice', her friends, family and teachers goes into detail about how CSE occurs and is identified. The Police worked with young people who had been at risk of CSE to develop the Alice campaign.

5.34 The Head of Public Protection and Force Strategic and Tactical Lead for CSE at Hampshire Constabulary advised that Alice's blog will be revived again in September 2017 once children return to school and will be aimed at year 7 pupils in particular as they may be more vulnerable as they are in a new school and meeting new friends.

5.35 Hampshire Constabulary advised that they have not yet fully evaluated the campaign and an external consultancy have been tasked with completing a detailed analysis around referrals etc. Full evaluation will take place early next year. The latest social media hits since the campaign launched on May 25<sup>th</sup> are as follows:

Facebook - Total impressions (the number of times it appeared on timelines) – 215,534 and Twitter – Total impressions – 412,392

### **Chelsea's Choice**

5.36 Chelsea's Choice was first presented in the city at a joint E-Safety / CSE event in October 2013 which was a multi-agency event to raise awareness amongst professionals. This was a theatre production run by a theatre production company and showed an example of a young girl being groomed and highlighted the signs to look for.

5.37 The PSCB Board wrote to schools offering them a Chelsea's Choice production free of charge (funded by DfE and PSCB) for their year 9 pupils. Schools that took up this opportunity were Admiral Lord Nelson, Mayfield School, Portsmouth Academy for Girls, King Richard's School, Redwood Park School and the Harbour School.

### **Feedback from Admiral Lord Nelson on Chelsea's Choice**

We had this production in to see Year 9. The performance was great even though we had to put this in the sports hall as the main hall was being used.

It covered safety for both male and female (some productions just tend to focus on females). I spoke to many students several days after the event

- a) They remembered it ..... always a good sign.
- b) They were able to tell me what the production was about.
- c) They thought it was a good way to get the message across, it raised their awareness of the many dangers regarding the internet and meeting people they get 'talking' too. The reality is that you have no idea who it is. How people can be manipulated to become isolated from family and friends becoming dependent on one person. For the boys the young lad going off to meet his online girlfriend who turned out to be a man was a reality check for them.
- d) They know where they can get help, or how to help someone if in a similar situation.

We would welcome more of these performances; it fitted in well with our Personal Development Programme as Year 9's have been discussing relationships etc. this half term.

### **Is This Love? Campaign**

- 5.38 The panel was advised that the Safer Portsmouth Partnership(SPP) working alongside the PARCS prevention Team created the awareness campaign for young people on domestic abuse called 'Is this Love?' The theme was created alongside a group of young people who advised the SPP and PARCS that many people struggled with recognising what a healthy, respectful relationship looked like.
- 5.39 PARCS and the Safer Portsmouth team decided that as this was a resource for young people the campaign needed to be as digital as possible although posters for bus shops and post cards were created for schools to hand out.

### **Lurking Trolls - PCC e-safety Campaign**

- 5.40 The recent PCC e-safety campaign 'Beware of Lurking Trolls!', was aimed at raising awareness to children aged between 5 and 11 of the dangers they face when online, using social media or mobile phones, which was very successful. An online safety officer has gone into children's centres to work with younger children to highlight the potential risks of using social media, online gaming etc.

### **Health Development Officer and Public Health Portsmouth, Sorted - Targeted Intervention Programme**

- 5.41 The Health Development Officer advised that her role initially involved outreach work with schools to reduce numbers of teenage pregnancies through the Sorted programme which she co-ordinates and manages. This programme has been very successful and is in its sixth successful year. This has since led

onto a targeted assessment and intervention tool to support young people aged between 12 and 16 to enable honest and practical conversations about sex and relationships. Early identification of young people is the key in tackling potential problems. Young people who are displaying risk taking behaviour or who have low self-esteem are the target group. Young people can be referred by their school or an external agency for either single sex group workshops or one-to-one group sessions. The referral criterion is attendance issues, behaviour issues and vulnerability. The programme consist of targeted Sex and Relationships Education (SRE) focussing on sexual activity, risk taking behaviour, goals and aspirations, confidence and self-esteem.

- 5.42 The health development officer advised that she is a member of the MET operational group and regularly attends meetings. This is very important as her service is involved with many of the young people or they may have referred young people to the MET. At these meetings, actions can arise and all partners have a responsibility to follow these up. City wide gaps are discussed and it allows for networking and a greater understanding of each other's services and their challenges and successes. There is a respect for each other's services and strategies and local and national CSE campaigns are shared and discussed. Attendance at these meetings is very good and she said there was excellent multi-agency working. The Health Development Officer advised she shares the information learned at these meetings with her team.
- 5.43 The health development team adhere to the Fraser guidelines which is an ethical framework which look at whether doctors should be able to give contraception advice or treatment to under 16 year olds without parental consent. It is important if a child is sexually active that they have access to contraception and sexual health services and are kept safe from those who could potentially exploit or harm them. Best practice is always to involve the parents and it is important to build the confidence of children. There are often challenging parents who do not want their daughter to be receiving contraceptive advice and in these situations the welfare of the child is centre and the parent will be supported by the team. If a parent refuses to let the Health Development Officer work with their child, this will be escalated to CSC. On the other hand there have been cases where the parents do not care that their teenage child is staying out all night etc. and this is when CSC team would get involved. It is important to educate and empower the young people so that they can make good choices.
- 5.44 Young people have a choice on whether to attend these sessions. There are six sessions available. The first session is usually low key as staff are aware that this can be a big deal for the child. They will discuss confidentiality and it is up to the child whether they wish to disclose anything. There is a waiting list for the service and the public health team will prioritise cases depending on their level of seriousness.
- 5.45 Ongoing support is required after the six sessions as the long term impact of their suffering might lead to other risk taking behaviours such as substance misuse. If the substance misuse leads to criminal activity, sometimes this will come out at front and the reasons behind it are not appropriately investigated.

Agencies are now mapping substance misuse across the city to establish the reasons behind this.

- 5.46 The Health Development Officer advised that she also supports colleagues within schools to ensure they are complying with the risk assessment tool kit. The work of the health development team cannot be done in isolation and without schools providing her team with the information so it is a team effort across the city. CSE training has been provided to school staff by the team which was supported by Barnado's and excellent feedback has been received from this.
- 5.47 The Health Development Officer advised that she attends team meetings for the other areas within the public health service to raise awareness of CSE and extend the message to her colleagues who may be working with at risk children. The health development team have also been supporting the Operation Make Safe campaign.
- 5.48 It is important to note that CSE does not just refer to men exploiting women/girls, although this is more common. The Health Development Officer advised that as part of the Sorted sessions she is educating boys to think about what they need to do to keep themselves safe and to realise the consequences of their actions so that they do not go on to become perpetrators. She has also had cases where a young person is both a perpetrator and victim of CSE at the same time. This needs to be managed and it can be very complex.
- 5.49 If there is no evidence of CSE prosecution cannot be taken forward, however partners can still safeguard young people without a conviction. Sometimes the school will bypass the parent if they are concerned that the young person is being abused by a family member - it is a judgement call and they will discuss their concerns with the MASH team as they are the experts. It may be that the CSC team are aware of the family already. Every case is different and they ensure they have researched the background first before taking action.
- 5.50 There has been an increased prevalence with online CSE and this is more difficult to manage. The Sorted team has received numerous referrals for online CSE and new guidance on online risks has been sent to schools. The Health Development Officer advised that often it is the quieter children who feel more confident talking to people online who are at risk and the information they are prepared to reveal can be frightening. As part of her role she is educating young people about what a 'healthy' relationship should feel like. Young people are normalising things such as naked 'selfies' and graphic images. As a school it is difficult to manage as the young person will deny sending/receiving these images. Parents often will have no idea about the world of social media and often do not know what their children are doing online. Schools would welcome any advice on training on how to deal with online risks to young people. Children also need to be educated and empowered so they are aware of the risks involved in what they are doing and are more cautious about what they do online.

- 5.51 The evidence in Portsmouth is different to Rochdale and Rotherham as there is no firm evidence that the BME community are being under represented. This has been discussed at MET meetings. However there is evidence to suggest that 16-18 year olds not in employment, education or training and some Looked After Children are at risk of poor outcomes and this is a risk factor of CSE. This age group may be missed as they are not in statutory education. Whilst a child is at school there are protocols in place which may identify safeguarding concerns.
- 5.52 The Health Development Officer advised that the public health intelligence team had provided her with information of different ethnic groups in Portsmouth secondary schools. The aim is to ensure that prevention work is delivered to reach all young people in Portsmouth. The Health Development Officer advised that she had delivered a sex and relationship workshop with trainers from different ethnic backgrounds to women. The aim was that the women would share this knowledge with their communities. She advised that she had been surprised at how little knowledge the women had in this area which was a concern.

#### The role of schools

- 5.53 The Panel received evidence from two representatives from pastoral teams in schools about educating children about CSE within a school setting, as these people are often the first to spot signs of CSE in their pupils. The Year 10 Learning Manager at Charter Academy with responsibility for Safeguarding and the Student Services Manager at Portsmouth Academy, both advised that they work closely with the Health Development Officer and share data.
- 5.54 They described how different the current environment is in which children grow up in today with the most significant difference being the internet. Whilst this is beneficial to children's learning and development there are risks associated with this. The online world is largely unregulated and the use of online fake profiles can mislead children. Websites and smartphone applications allow the sharing of photographs and information that can later be used to exploit children. What then makes the issue worse is that the information is effectively there forever. There are new websites, social media platforms and applications emerging frequently making it difficult for teachers and parents/carers to keep track of what their children are doing online.
- 5.55 Both advised that they work closely with the PCC MASH (Multi-Agency Safeguarding Hub) team, who they described as the 'front door' for schools as they will contact the MASH team when they have referrals or need advice. The MASH team also contact schools to obtain information about children and this working relationship works very well. Both school representatives advised that they also work closely with the CSC team and other agencies and considered that a lot of the best work is done in an ad-hoc manner.
- 5.56 The two school representatives said that both children and teachers prefer to have external organisations come into the school to teach pupils about sexual health. Children feel uncomfortable talking to their teachers about things and as teachers have a disciplinarian role in schools, pupils often do not feel

comfortable talking to them about these matters. They have found the most proactive approach is to invite the Sorted team and other external organisations into the school to help with these sessions. School staff also do not have the time to provide this education and support to their pupils. The school representative advised that she has never had a pupil not want to attend a Sorted session. Each school has safeguarding procedures which they will adhere to; however it is difficult for school staff to find the time to provide one to one support sessions for their pupils. The support from the health development team with running these sessions is therefore vital and the relationship with the team and schools is very good.

5.57 The school representative advised the panel that training on CSE had recently taken place for her new staff and she had recently held some CSE awareness training for the student teachers. Both training sessions had been well received. If a member of staff becomes aware that a pupil is sexually active, they will complete the risk assessment toolkit to make sure they are assessed against the CSE criteria. It is important to listen and that staff are aware to go on their gut instinct, so it is vital that all school staff have received specialist training.

5.58 School staff are skilled at sharing information about the children in their school and are known as the 'eyes and ears'. When schools have concerns that a child might be being sexually exploited they will always contact the parents of the child. If the parent(s) are uninterested the school will contact CSC team as it might be that the family are already known to them.

5.59 The school representatives advised that due to the relationships that have built up over time between schools, the health development team and other agencies, it is very difficult when a member of staff leaves to maintain the relationships with the other agencies in the city. There is however support available from the other agencies in the city.

5.60 With regard to sharing information, the school representatives advised that information about children at risk of CSE is shared at the MET operational group. A representative for each child will attend so that everyone knows what school the child attends and who to contact with regard to a family member/carer. If there is an occasion someone cannot attend a meeting, all members of the MET operational group will receive the minutes and the contact details for each child at risk are listed within these. The strategy meetings on CSE is where all information is shared between agencies including data on peer association and any safeguarding concerns would be shared with agencies. The team around the child and parents/carers will attend meetings and the young person can also attend. The cross city working partnerships are therefore very strong.

5.61 With regard to how a new professional to the city would know what resources are available, the Health Development Officer advised that there is a SLA available for schools and she will meet head teachers to obtain the details of the link person which is usually someone from the pastoral team and she will promote the services that she and her team can offer. There is no structure in place where people working with young people can see a 'menu of options' of

training and support available.

- 5.62 When asked what more could be done to help schools, the school representatives said that more resources for early preventative work would be welcomed. Also the Sorted team used to run a session for whole of year 10 but as council resources have been cut these sessions have been cut.
- 5.63 Both Portsmouth Academy and Charter Academy run PSHE sessions in their schools. There is no data available on which schools in the city run PSHE lessons in schools as there is no statutory requirement to hold these. Data is also not held on how many children are opting out of PSHE lessons. Portsmouth academy has cut down the amount of PSHE lessons and also merged this with IT. Due to the pressure of teaching targets, teachers are reluctant for a pupil to miss a lesson if they want to attend a one-to-one session with the Sorted service. They prefer the child to do this during the PSHE lesson instead. That means that they miss whatever is being taught in that lesson which is just as important. The school representatives added that the quality of the PSHE is not adequate and there is limited support available to schools. The Health Development Officer advised that she has delivered bespoke sessions to staff to raise the awareness of the programme so that staff will have an understanding of the reasons the pupils may be missing a lesson.
- 5.64 With regard to how the Alice's diary campaign has been received by young people, both school representatives said that they are unfortunately quite blasé about it and think it won't happen to them so are often uninterested. The panel noted though that if messages are coming across in multiple forms, as long as the campaign gets through to one child, that means one more young person who will be protected.

#### PCC Youth Service

- 5.65 The panel heard from the Manager of the Hillside Youth Centre who advised that they have over 60 young people attend the Centre each day, with four youth staff on duty each evening. The centre works closely with schools and will identify any changes of behaviours. If any are identified these will be reported to the police, social worker or CSC. Staff within the youth service have completed all the safeguarding training available through PCC. Youth workers will talk to individual young people to make sure they are happy and build strong relationships with them. Youth workers also attend the MET operational meetings.
- 5.66 The Youth Centre Manager explained that leading up to school holidays she will contact Sorted, Barnado's Motiv8 etc. to see if there is capacity for them to visit the youth centre to hold workshops for young people aged between 11 and 19.
- 5.67 Youth workers discuss with children how to stay safe online and will warn them about the risks of sending explicit photographs. However she felt that the majority of the young people are very 'switched on' when it comes to what information they should be sharing online as they know about CEOP. She advised that a lot of children use her youth centre group chat with their

friends online rather than sit alone talking to online friends.

5.68 Youth centres in the city have agencies such as PARCS to come in to specifically talk to children about CSE. The Barnado's project worker added that it is helpful to have conversations with young people about raising awareness of CSE as they can sometimes be too savvy about the online world and 'sexting' is a huge issue that Barnado's are struggling with currently.

5.69 The Youth Centre Manager explained that it is sometimes difficult to get other agencies to come into youth centres as everyone is so busy. If there is no-one available to run a session, staff that have been trained will often run the sessions themselves. The CSE & Missing Team Manager at Barnardo's added that Barnado's have held four evening sessions on LGBT awareness in youth clubs recently and they have an e-safety specialist who is a project worker however owing to time constraints their availability to hold sessions is low. The Health Development Officer added that everyone is working under tight resources but try to work collaboratively to provide support for young people in the city. Schools are also under pressure and will approach Sorted to ask for training workshops etc. Attendance at these can be poor due to them having targets to reach within education subjects. Unfortunately there is not the capacity to send professionals into every school that requests training so it is about giving them the tools to deliver the sessions themselves.

## **6. To review feedback from services users.**

6.1 The Health Development Officer met with three young people to talk about their experiences to assist with the review. The children had all been identified as being at risk of CSE and interventions were in place to help them so that they are no longer at risk of CSE and had been pleased to be able to assist with the review. She gave a background to each of the children and then read out their response to the questions that had been put to them.

### **6.2 Questions put to the three young people**

1. What services have helped and supported you?
2. Thinking of your experience with [name of organisation] how did this help you? And could anything have been improved?
3. Who do you feel has supported you most throughout your journey?
4. Did you have any support/guidance from school staff about CSE? Did you feel you could talk to teachers etc. about your situation?
5. Prior to your experiences, were you aware of any of the CSE campaigns such as Chelsea's Choice or the Alice in Wonderland campaign? If yes what did you think of these? Is enough being done to make young people aware of CSE?
6. What is the key message you would like Portsmouth City Council to be aware of following your experiences?
7. Anything else you would like to add?

### **6.3 Child T Background**

- Had been identified at medium risk of CSE
- School attendance was a concern



- She received help from the Sorted team.
- Received education outside of mainstream school
- This child used the Integrated Targeted Youth Support Service (ITYSS) service (which no longer exists)
- CSC were involved in undertaking her initial assessment
- Police were involved in retrieving her when she went missing.
- Child was discussed at the MET Operational meetings.

#### 6.4 Child T answers to the questions:

- 1) The services that helped and supported me were ITYSS, Sorted and the Police.
- 2) Working with Sorted I found this really helpful because she showed me what dangers could have happened in the situation I was in. It would have been nice to have met a young adult who has been through a similar situation.
- 3) I feel that it was 50% Sorted and 50% ITYSS they supported me in different ways.
- 4) I had a good relationship with a teacher from the lodge who would ask about my problems but I'd never speak to her as I could only talk to an educated person who didn't work in a school.
- 5) Because my attendance was poor I didn't have much PSHE and I didn't attend assembly.
- 6) I think it would have been helpful if there were more police on patrol, it would have prevented the risks. If there was more support from my family I wouldn't have wanted to stay out and away from home. I found it really intimidating for all the professionals to attend my meetings. It would have been better if only one professional teacher would attend\*. (*\*It was clarified that Child T was referring to the Team around the Child (TAC) meetings.*)
- 7) I hope I have helped put my point across.

#### 6.5 Child H Background

- Had been identified as medium risk of CSE.
- Issues with school attendance and had a package of lessons outside of mainstream.
- CSC assessed her
- Received help from the Sorted team
- Police retrieved her when she went missing - 3 times in 90 days
- Used Barnado's family intervention programme supported her and her family members - this was a recommendation from the MET group.
- Discussed at MET operational meetings.

#### 6.6 Child H answers to the questions:

- (1) The services that helped and supported me were the Police, school, Barnado's, Sorted, and Social Services.
- (2) I know that the police were only doing their job but if I didn't want to be found they wouldn't find me whereas if I did want to be found I made sure I stood out. I found that sorted helped me because they made me

- know about all the dangers that were involved and made me know about self-esteem and help me improve my confidence.
- (3) I feel that Sorted helped me the most because it made me look at things differently whereas I also feel that Barnado's helped me as well because if they didn't help me with my family problems I wouldn't of stayed at home.
  - (4) I feel that I could trust a few teachers because they kept it confidential but with the right people that could help they explained it in my point of view which help them understand me more. Teachers wouldn't ever say about CSE but they pointed out that what I was doing was risky and they said they were worried about me.
  - (5) I was not aware of any campaigns. I fell that school should make more school children more aware of CSE and make them feel as someone is there to talk to.
  - (6) My personal journey didn't need any change because help got called at the right time for me to change.
  - (7) I feel that meetings with everyone helped getting my point of view across but I feel there should have been less people in the room because it made me feel intimidated.

#### 6.7 Child P Background

- Had been identified as medium risk of CSE
- Services she used were CSC, Barnado's U Turn service, Sorted, Police, Boost and school.

#### 6.8 Child P answers to the questions:

- (1) The services that helped and supported me were Switch, Barnado's, U Turn, Social Services, Police, School.
- (2) Barnado's were helpful in many ways. We built up a good relationship that was more like a friendship. The service ended without notice and I was not in a position for the service to end\*. The way it ended made me feel worse and behave worse. Switch was also a really good service, I was seeing my worker for about 2 years once a week, towards the end of the support I was receiving we started seeing each other twice a fortnight and had an arranged date to say goodbye and we still have each other's number so if I feel I need the support I know I have it. \* *(\*The Health Development Officer explained that rather than the service ending, it was a change to the Barnado's worker. The service continued but as the child felt that she didn't get to say goodbye when the new worker came in she did not want to engage with them.)*
- (3) I feel that throughout my journey no one has helped me as much as I have helped myself. I feel like people can advise you and help you but no one can change you until you are willing to change yourself. Social care were very supportive and tried their hardest to advise me and show me a path but I was not willing to accept the help.
- (4) I felt I could talk to teachers from school but I wouldn't respond in a polite way other than to one particular teacher. At one point in my life school was the only place I felt I had to go when things were difficult for me at home. Some days I would be at school until 6pm talking to my teacher because I didn't want to face the outside world. The person I

confided to in school didn't use the words CSE, however she would point out the risks I was taking. She also referred me to other services and got specialist support.

- (5) In school I watched the Alice in Wonderland campaign production of child exploitation. It made me emotional and did change the way I looked at things. On the school I attended I feel enough has been said about CSE but not enough is being done. \* (*The Health Development Officer explained that the child was referring to Chelsea's Choice rather than Alice campaign.*)
- (6) The message I would like to give Portsmouth City Council would be services need to now look back at my experience through social services, I feel like my family didn't get the support they needed when I was the one preventing 60% of the drama within the family home.

6.9 All three of the children had different situations at home which were push factors to their risky behaviours. One of the children was at significantly high risk of CSE and one suffered peer to peer CSE. Substance misuse was a huge factor for one of the young people.

6.10 The panel noted that if things were better for the three children at home they would have been less likely to go missing. All three children were clear that they could get the attention of the police if they wanted to be found.

## **7. To investigate how effectively the local authority works with other agencies to tackle sexual and other forms of exploitation of children and how they ensure prosecution of perpetrators.**

### Education Worker, Multi-Agency Safeguarding Hub (MASH)

- 7.1 The Panel received evidence from the MASH education worker. She advised that the MASH is a team including Police, Health, Education, CSC and Safeguarding, Probation, Adult Social Care, Mental Health and others. The benefit is that they can quickly share information and make decisions as to the required level of intervention.
- 7.2 The MASH contributes to improving outcomes for vulnerable children at risk of poor outcomes by collating and sharing information held by various agencies. Through improved communication and better integrated working, the MASH facilitates the right service response for children and their families in a timely way; either through referral to CSC or by triggering early help processes through the single assessment team around the Child processes and outcome focussed planning.
- 7.3 The MASH started to record patterns leading to CSE and are looking at the reasons more referrals coming in for example, is it because there is more CSE or that people are more aware of the signs of CSE. There is also a lot more publicity around CSE now but further education work is needed. There is also a huge shift now to online CSE risks. The education worker added that compared to 5 years ago, there is now more confidence to recognise vulnerability factors such as a change in behaviour and these are picked up earlier as there is more awareness.

- 7.4 The MASH has identified the importance of protecting children with special education needs from the risks of CSE. Harbour School, one of the special schools in Portsmouth, has a lot of children on reduced timetables and therefore these children are more vulnerable. The MASH team are doing targeted work with them, particularly Harbour Fratton who are the most vulnerable children. The MASH team have regular informal conversations with the early help support team at the school and also assist with the CSE toolkit. A Harbour representative attends the MET which helps to raise awareness. The Health Development Officer has also provided some training to the head teacher of Redwood Park School and the school will now contact the team to check that their thresholds are correct.
- 7.5 As children as young as 9 or 10 now have mobile phones with internet access, it was recognised that these children need to be educated on the risks of CSE. Nationally there is the Child Exploitation and Online Protection Centre (CEOP) Think U Know programme that provides resources, training and support for professionals who work directly with children and young people. The MASH team will be targeting Junior Schools to educate staff and children and promoting this resource.
- 7.6 The MASH education worker advised that there are some secondary schools that the MASH team do not have such good engagement with and officers will be contacting them to offer training. There have been occasions where schools have paid for training and not realised that they have signed up to the traded services package so can access this as part of the package.
- 7.7 The risk assessment toolkits are completed by the pastoral team members who are best placed as they have the skills and confidence to do this. The PSCB offers training sessions to schools on how to complete the risk assessment toolkit and schools are becoming more confident in using them. Feedback on using the toolkit is shared with other schools. If a child is identified as high risk this immediately triggers a section 47 assessment. This involves discussion with all professionals on the best way of dealing with the situation and is escalated if needed.
- 7.8 Young people at risk of becoming perpetrators were initially identified through a police report rather than MASH identifying them. The education worker then ensured that MASH identified the schools that they attend to ensure there is not a pattern. A worker from Sorted completed some work with the individuals.
- 7.9 Hampshire Constabulary has recently introduced the Goldstone Team, a specialist unit to tackle CSE that consists of police officers and staff, assisted by a dedicated analyst. The team works closely with other agencies such as Children's Services, health, schools, and third sector organisations such as Barnardos. The team is located within the MASH, allowing for greater joint working, information sharing and greater use of both criminal and civil remedies to help the victims, but also disrupt locations used by offenders. The Goldstone team is focussing its work on perpetrators which is very positive. Police are now attached to the three hostels in the city to monitor any possible CSE concerns. The Goldstone Team has also been tasked to provide training

to hostel staff on CSE.

- 7.10 She advised that it is possible to report concerns about a child online through the NSPCC website and app. This information then gets sent to the local authority CSC teams and police. It was felt a PCC app would not have this broad reach as the NSPCC is a national organisation with a higher profile. However this perhaps could be further promoted by the Council.
- 7.11 With regard to barriers to CSE in Portsmouth The MASH Education worker said the main issue is the secrecy of a teenager's lifestyle and being able to work around this to recognise the early signs of CSE. Children today are much more technology savvy and professionals are always playing 'catch up' with the latest social media and apps that young people are using and the lingo. Professionals need to ensure that parents are aware of what their children are accessing and also need to get messages across to children of the risks involved in what they are using and that images they send do not go away and can be recirculated, as they often feel they are safe as they are accessing the internet from home.
- 7.12 The Deputy Director of Children's Services said that MASH can break down the reasons for referrals or can give a breakdown of the numbers of referrals by each agency - but as yet cannot do both. *Appendix 3* outlines the numbers (and %) of contacts to the MASH by each agency. The tables also detail the outcome of the contacts - whether there is a child protection enquiry under S47 Children Act 1989, whether it is passed to early help services to follow up, whether it is passed back to universal services for information only, or whether the contact is passed through the MASH to ensure they are sharing information that each agency knows about the situation in order to make a robust decision about how to support the family. *Appendix 4* shows the outcome of the process - whether there is an early help offer through team around the child or whether a referral is made to CSC.

*Table 2 - Reasons for contacts to MASH Referrals (Feb'16-Jun'16):*

<b>Linked Contact Reason</b>	<b>Total</b>	<b>%</b>
C Behavioural Issues	11	1.06%
C Concern For Emotional Wellbeing	24	2.32%
C Concern For Physical Wellbeing	60	5.81%
C Concern For Welfare	409	39.59%
C Concern Regarding Neglect	71	6.87%
C Cyp/R Youth At Risk Report	330	31.95%
C Disabled Registration	2	0.19%
C Housing Issues	12	1.16%
C Information/Advice	87	8.42%
C No Recourse To Public Funds	2	0.19%
C Risk Of Sexual	14	1.36%

Abuse/Exploitation		
C S37 Ca Report Request	2	0.19%
C S7 Ca Report Request	3	0.29%
C Social Services (Pcc) Check	2	0.19%
Not Recorded	4	0.39%
<b>Grand Total</b>	<b>1033</b>	<b>100.00%</b>

### Barnado's

- 7.13 The panel received evidence from the CSE & Missing Team Manager at Barnardo's about their working relationship with Portsmouth City Council. Barnardo's offer a therapeutic type of service and focus on healing relationships and give advice on how to keep safe. Advice is also provided on how to avoid exploitative situations and they suggest safety strategies. The case would be closed when the young person is either able to use safety strategies or if they are referred on to another service.
- 7.14 Barnardo's believes it has a strong and good relationship with the council; they are in regular communication and offer constructive feedback to each other. This is done formally via MET Operational and Strategic meetings as well as contract review meetings, but also informally through regular communication amongst practitioners and senior member of staff. A strong example of this can be found in the difficulties in meeting targets for return interviews due to the high number of children and young persons (CYPs) received and their staffing ratio.
- 7.15 The CSE & Missing Team Manager at Barnardo's said that funding is the biggest barrier for her organisation. There are currently only 1½ FTEs comprising 1 full time (37h) post for CSE and 1 part time (18.5h) post for missing children to tackle CSE and missing children in Portsmouth. The need is far greater than they can cope with. There are other services and Barnardo's works closely with them but refers work to others because of capacity issues. The help Barnardo's could give to individuals would be much more comprehensive if they could afford to employ more people.
- 7.16 At Operational and Strategic MET meetings it is also clear and evident how communication amongst agencies is high on the agenda, information on vulnerable children, 'hot spot' and possible or known perpetrators are shared. Discussions on what agency is best placed to support a young person also take place with the only aim to best safeguard a young person. This is clearly a good example of multi-agency work.
- 7.17 In the period April 2015 to March 2016 there were a total of 287 referrals to the Barnardo's services (Miss-U and U-Turn), a total of 273 young people engaged with the service and support was provided to 192 young people. For those young people there were a total of 598 face to face interventions and 136 failed sessions/visits making a total offer of support of 734 sessions. With regard to Miss-U and U-Turn, Barnardo's would ask the individuals about the missing episode and would assess whether or not the child was safe. During those interviews it was possible that additional people at risk would be identified.

- 7.18 The BME population was hard to reach and a plan was currently being drafted in order to enable improved communication with that group. It was likely that the numbers known to Barnardo's do not reflect the true situation. Attempts were being made to try to contact and speak with hard to reach groups and this was being done by trying first to gain the confidence of the leaders in those communities.
- 7.19 Where people fail to attend their interview appointments, Barnardos will go to the address of the individual concerned and will keep going back until they manage to speak to the individual concerned or see them. Barnardos persist for as long as it takes to contact the person involved. This does cause capacity issues as there are too many referrals for the size of the service but referrals on to other services such as Social Care enables Barnardos' staff to be freed up to concentrate on those not eligible for Social Services. The CSE & Missing Team Manager at Barnardo's explained that after a number of meetings and a pilot run in February it was decided that CSC would carry out the return interview for all children open to them. This has really helped ease the pressure on Barnardo's. Previously they were receiving 150-200 reports every 3 months but due to the change these numbers have reduced immensely allowing Barnardo's to complete follow up work as necessary. Last month 4 young people at risk of CSE out of 49 young people they visited so shows tool is working.
- 7.20 When a child first presents to Barnardos, the meaning of confidentiality is explained to them in terms of what Barnardos will and will not share with other agencies. Even where a child specifically says they do not wish the information to be shared, in certain circumstances when the child, or someone they know is at risk, the information would still be shared even though that might cause a problem with the individual. Barnardos would persist in trying to see the young person. If the person completely disengages, details would be taken back to the MET group to identify another agency that could potentially support the young person.
- 7.21 Barnardo's had seen a massive improvement over recent years in the way police respond to incidents of CSE as it is now much better understood. There is a great willingness in the city to understand and help. There is a very open and sharing environment and Barnardos also have noticed that young people are more trusting of the police than was previously the case.
- 7.22 The CSE & Missing Team Manager at Barnardo's felt that more creativity around helping those at risk of CSE would be useful. She referred to the Guardian Angel initiative that had run for six months involving the police and Children's Social Services whereby information was distributed in the evenings which gave people a number to call. There was also a real need to work with the parents of the young people involved. Following the CSE Guardian Angel project useful feedback had been provided.
- 7.23 The risk assessment tool is constantly being reviewed and more and more professionals are joining the operational group. More people are alert to local issues. Close liaisons between the various professional bodies meant that it

was easy to bring up an issue quickly. The CSE Missing Team Manager said that liaisons were good in Portsmouth perhaps because of the geographical nature of the city.

- 7.24 The CSE & Missing Team Manager at Barnardo's advised that she attends the national meeting of Barnardo's and the issues across the country are very similar. Hampshire and the Isle of Wight also have a similar picture to Portsmouth. It has been very hard to reach young people who have gone missing in the past. Barnardo's held a workshop for PCSOs on CSE and have created a training programme for new recruits.
- 7.25 The Project Worker for the Barnardo's Misuse and U turn service advised that she works with young people at medium and high risk of CSE both on a one to one and group basis and this can be long term. She also works with young people who have gone missing then return home and will visit them within 72 hours of their return to discuss the push and pull factors why they went missing. A plan for the young person will be created and they will be referred back to the MASH team. The key is to offer the young person an interview within 72 hours of their return and keep persisting with this until they accept the help on offer. Barnardo's identified a significant link with missing young people and CSE and they have identified incidents of CSE after carrying out missing assessments

#### Hampshire Police

- 7.26 The Panel received evidence from the Head of Public Protection and Force Strategic and Tactical Lead for CSE within Hampshire Constabulary. She advised that Hampshire SE regional group is constantly looking at threats to Hampshire and IoW. Over the last two years CSE has scored as one of the greatest threats and is currently one of the force's priorities.
- 7.27 Hampshire Constabulary is looking to improve community partnership information intelligence sharing. Information is obtained from Community Partnership Information (CPI) forms, but the Police do not always receive intelligence from partner agencies and it is very important to obtain health, education etc. data. Hampshire Constabulary works very closely with the council's CSC team where there is good data sharing but they now need to ensure it pulls all data together including intelligence reported from councillors which is not currently being shared.
- 7.28 The panel were advised that work is taking place to improve datasets and the Hampshire Constabulary are considering different ways to extract data to be able to identify children and show that the risk is reducing. All 4 LSCBs have been asked what data they need and Hampshire Constabulary have compiled a list of data requirements and is looking at how a standard data system can be created. It was hoped that improvements with sharing data and intelligence would be made.
- 7.29 In January 2016, Hampshire Constabulary hosted the Intervene to Protect Child Conference for police officers and all partner agencies including the voluntary sector which 500 people attended. As it was impossible to get all



police officers there due to their shift patterns, the conference was videoed and training is being provided to police officers/ staff who were unable to attend. This has shown to have had a positive impact as there have been occurrences where members of the road policing unit have stopped a perpetrator with a child in the car, which shows the importance of raising awareness amongst the road policing unit about recognising the signs of CSE. A number of the CSE victims undertake low level crimes so it is important to give training to police officers so they can start identifying children who might be at risk of CSE.

- 7.30 The CSE Guardian Angels pilot ran by Hampshire Police, PCC and Barnardo's that took place in Portsmouth in 2016 is being evaluated and Hampshire Constabulary are looking to roll this out across the force. The patrols consisted of police officers, Barnardo's workers and council social workers who targeted areas of the city where it is known that children congregate such as outside parks or convenience stores. The idea is to engage with people and pass on information about CSE. The pilot was run from 7-9pm however following the evaluation it is recognised that this needs to run later in the evening.
- 7.31 There have only been a small numbers of trafficking cases in Portsmouth, compared to other port cities. Hampshire constabulary are exploring options with border force colleagues to train them on CSE, as currently they are not trained and do not have a CSE team.
- 7.32 There is a big gap in identifying emerging victims and perpetrators particularly in respect of hard to reach groups including the BME, travellers, blind and deaf children and home educated children. Hampshire Constabulary is looking at how to work with these groups and it was anticipated that towards the end of 2017 there would be a plan in place to ensure greater inclusion with hard to reach groups.
- 7.33 Hampshire Constabulary is aware of a number of online vigilantes who have provided information, which have led to a number of successful prosecutions and convictions. There are no known CSE organised crime religious groups, however Hampshire Constabulary are aware of some gangs/groups operating together that the police are identifying and targeting. Many of the drug gangs are exploiting children which can lead to CSE as they become reliant on drugs, so the police are actively targeting these gangs.
- 7.34 Hampshire Constabulary has intelligence of locations within Portsmouth where perpetrators are living. The profile of perpetrators within Portsmouth is predominantly 16-24 year old white British males and they are not aware of any offenders in the city of other ethnicities.
- 7.35 Hampshire Constabulary will be introducing a CSE perpetrator programme at the end of August 2017 and will be the first force in the country to do this. This will focus on 16-18 year olds who have not committed criminal offences but information has indicated that they may go on to offend and are bordering on or linked to perpetrators. It will not be used for any person who has committed a criminal offence. The programme will look at supporting these individuals to advise them that what they are doing could amount to a criminal offence as currently there is not a lot of support available for child perpetrators. There is a

team within Hampshire constabulary looking at online risks of CSE and identifying potential perpetrators.

#### Safer Portsmouth Partnership

7.36 The Safer Portsmouth Partnership (SPP) is responsible for reducing crime and substance misuse in Portsmouth. It is chaired by the Cabinet Member for Environment and Community Safety and brings together local organisations including PCC, Hampshire Constabulary, Hampshire Fire and Rescue, National Probation Service and Portsmouth NHS Clinical Commissioning Group. One of the SPP's priorities is young people at risk and it oversees the work of the YOT. Superintendent Schofield sits on the SPP and is also the Chair of the YOT Management Board.

#### CSE Peer Review 28-29 November 2016

7.37 The Panel were advised by the Director of Children's Services that a peer review took place in November 2016 by a group of South East colleagues to review the council's response to CSE. The peer team was very focused and through the work that was done the council received some very helpful feedback to be able to continue its improvement journey to outstanding. Some positive highlights included their reflections that:

- The MASH is functioning well and information is being shared across agencies appropriately.
- The MET strategy is a live strategy and there is multi-agency ownership and oversight.
- The MET operational group is robust and there is good commitment across all agencies to addressing CSE.

7.38 The things the peer review group felt the council need to work on included:

- Strengthening links between PSCB and the Safer Portsmouth Partnership (SPP). The chair of the Partnership has agreed that a report on the review will be brought to the SPP meeting on 26 January and that the Children's Services Department should be represented on the SPP, initially by the Director of Children's Services.
- Looking more broadly at exploitation in all its different forms, not just sexual.
- Stepping up the strategic dialogue with schools, academies and multi-academy trusts around CSE and wider well-being issues for children and young people. The Director of Children's Services advised that they will also be ensuring that the new Portsmouth Education Partnership is used to aid that dialogue alongside its focus on educational attainment. In addition the Deputy Director for Education will be joining the Portsmouth Children's Safeguarding Board, something which will be easier to manage now that the management team in Education is fully staffed.
- In general ensuring that CSE is seen at all times as a corporate council and wider Children's Trust responsibility.

## **9 Equalities Impact Assessment.**

A Preliminary Equalities Impact Assessment (EIA) has been completed and the recommendations do not have a negative impact on any of the protected characteristics as described in the Equality Act 2010. A full EIA is not required at this stage however if schemes/actions within the recommendations are taken forward from the scrutiny panel, individual EIAs may need to be completed.

## **10 Legal Implications.**

10.1 The report is robust with respect to conclusions and recommendations and does not present risk with respect to any particular challenge in terms of how the investigation was dealt with or in terms of the individual groups included and involved. The report is reflective of collegiate practice consistent with the ideals associated with "*working together*" as an overriding principle. The report complies with the obligations under sections 10 and 11 of the Children Act 2004 it being a duty to consider the need to safeguard and promote the welfare of children and young persons.

## **11 Finance Comments.**

11.1 The financial resource implications of the proposed recommendations are highlighted within the table in section 12 of the report (*Budgetary and Policy Implications*).

11.2 Where additional financial resources are potentially required to enable the implementation of the proposed recommendation by Portsmouth City Council, the funding will need to be identified through re-prioritisation and re-distribution of the Children and Families Portfolio cash limit allocation.

### **Appendices:**

Appendix 1 - List of meetings, witnesses and documents received

Appendix 2 - Glossary

Appendix 3 - numbers (and %) of contacts to the MASH by each agency

Appendix 4 - Outcome of the MASH process

Appendix 5 - Preliminary Equalities Impact Assessment

### **Background list of documents: Section 100D of the Local Government Act 1972**

The following documents disclose facts or matters, which have been relied upon to a material extent by the author in preparing this report:

<b>Title of document</b>	<b>Location</b>
Portsmouth Safeguarding Children Board Missing, Exploited and Trafficked (MET) Strategy	<a href="http://www.portsmouthscb.org.uk/wp-content/uploads/PSCB-Missing-Exploited-and-Trafficked-Strategy-2016-19-v10.pdf">http://www.portsmouthscb.org.uk/wp-content/uploads/PSCB-Missing-Exploited-and-Trafficked-Strategy-2016-19-v10.pdf</a>
Department for Education guidance on CSE February 2017	<a href="https://www.gov.uk/government/publications/child-sexual-exploitation-definition-and-guide-for-practitioners">https://www.gov.uk/government/publications/child-sexual-exploitation-definition-and-guide-for-practitioners</a>

## 12 BUDGETARY AND POLICY IMPLICATIONS.

The following table highlights the budgetary and policy implications of the recommendations being presented by the Panel:

Recommendation	Action by	Policy Framework	Resource Implications
<p>1. Although good work is taking place to tackle CSE within Portsmouth, partners should not be complacent and should continue to raise awareness. CSE should be seen at all times as a corporate council and wider Children's Trust responsibility. In addition, as protection of vulnerable children is one of the priorities of the Safer Portsmouth Partnership (SPP), the Partnership should take a greater role in addressing CSE. It would be helpful for the SPP to include a representative from children's services.</p>	<p>Alison Jeffery to discuss with the PCC Strategy Unit how best to enhance the understanding of the SPP around CSE and how risks can be addressed, with a view to enlisting support from the Partnership as appropriate.</p> <p>SPP to consider adding a representative from Children's Services</p>	<p>Protection of vulnerable young people is already a priority for the SPP and CSE is a high priority for the Constabulary. This action would be about increasing awareness and strategic engagement among SPP partners</p> <p>No change required</p>	<p>None immediately; the action is about extending understanding and engagement around CSE. Additional actions by partners would be subject to their own prioritisation/resource capacity.</p> <p>None, other than the time of a Children's Services representative on the SPP</p>
<p>2. That the Portsmouth Safeguarding Children Board (PSCB) ensure that consistent information on children at risk is obtained and shared between partners. All partners should maintain efforts to ensure that all sectors of the city receive the support they need. PCC and commissioned services should draw on all possible sources of support in order to link well with all young people.</p>	<p>Chair of the PSCB Chairs of the PSCB Missing, Exploited and Trafficked (MET) Strategic and Operational Groups PSCB Business Manager</p>	<p>No change required; this is about effective implementation of the existing policy framework</p>	<p>PSCB/MET Groups already keep under review the potential impact of any budget changes by PCC and/or partners; the recommendation does not require additional spend by PCC.</p>

Recommendation	Action by	Policy Framework	Resource Implications
3. That all schools devote time to issues of emotional and mental wellbeing and healthy relationships and promote consistent approaches to identifying and prevention of CSE.	Alison Jeffery	Schools take their own decisions about their curriculum, and how they promote emotional well-being and prevent CSE. New resources and proposals for collective action have been drawn up as part of the CAMHS Future in Mind programme and these proposals will be championed by PCC within the new Portsmouth Education Partnership	A new post has been created, initially with PCC funding, to support the work of the Portsmouth Education Partnership and to support work on inclusion/emotional well-being in particular. This capacity will be partly directed to support this recommendation. In addition a new traded offer of support for schools around PSHE is being developed, which is expected to be cost neutral by the school year 2018/2019.
4. That careful evaluation and continued thought be given on the way that children can raise concerns about CSE. The PSCB should work with schools to raise awareness of the NSPCC app which will refer concerns directly to the relevant LA. The CSE publicity campaigns should continue to encourage children to report concerns to an adult and these should be evaluated and continue to be monitored. Schools should be forthright and have a dialogue with parents and guardians about CSE and the importance of relationship education at school.	PSCB Business Manager and Training Lead  MET Strategy Group Chair	These recommendations can be taken forward in the context of the existing PSCB CSE awareness and training policy framework, and through existing work with schools on restorative practice	CSE publicity campaigns have been funded by Hampshire Constabulary, which is reviewing impact and cost effectiveness.
5. That the PSCB continues its focus on online safety and getting key messages across to families about the risks of the online world.	Alison Jeffery - to encourage review by the PSCB	Existing framework	Will need to be reviewed; expansion of activity would need additional

Recommendation	Action by	Policy Framework	Resource Implications
			resources.
6. That as part of judging the effectiveness of the Stronger Futures Strategy, regular discussions should take place with schools about the nature of the support available and the role of both the council and schools in supporting families. This will also help to remind schools about the services available to children and schools in their work in supporting families.	Alison Jeffery	As part of the strategy, feedback from schools on the effectiveness of services will be sought on an ongoing basis	None
7. That the PSCB and Hampshire Constabulary consider holding further Operation Makesafe training sessions for all taxi drivers, hoteliers and employees of licensed premises. This will be subject to monitoring the continuing feedback of the effectiveness of the sessions.	PSCB Strategic MET Committee	This is one of the priorities on the PSCB Business Plan however the three locality teams are organising this themselves and the PSCB is only intervening when necessary. The PSCB Strategic MET Committee will be supporting this.  Another training session is planned for 2017/18	The only resource implications are the time of staff to monitor and oversee this.
8. That PCC makes CSE training mandatory for taxi drivers and investigate how other local authorities have achieved this and explore the best model for Portsmouth.	Director of Culture and City Development/Licensing Manager/Licensing	Other local authorities in Hampshire and IOW have not yet done this but this can be explored through the	The licensing team have, through the "knowledge tests" now incorporated a number of CSE questions and if mandatory training

Recommendation	Action by	Policy Framework	Resource Implications
	Committee Chair	<p>Hampshire and IOW licensing officers group.</p> <p>The introduction of mandatory CSE training would have to be approved by the Licensing Committee as this would be a change to policy.</p>	<p>on CSE matters were to be implemented it is proposed that this would be the most cost effective way of delivering that training both resource wise for the statutory agencies and enabling the cost to be kept to a minimum for applicants.</p> <p>The cost implications of providing such training should be given careful consideration.</p>
9. That a whole family approach be undertaken to understand the whole family unit in order to support families and children at risk of CSE.	Alison Jeffery	Whole family working is already a key part of the Early Help strategy, for social workers and early help staff	Current resources are not sufficient to work with families other than those in need of statutory support or close to that level of need.
10. That there is a lead professional for children and young people who have been identified at risk of CSE as continuity of contact and the relationship with an individual worker is important. This should be in a form that is empowering not intimidating to vulnerable young people.	Sarah Newman	Existing Early Help strategy provides for a lead professional for all young people identified as at risk of CSE who need statutory or targeted support.	None



Recommendation	Action by	Policy Framework	Resource Implications
11. That the PCC Cabinet should be encouraged to pay close attention to the information about CSE in the annual report by the PSCB and that aggregate information on cases open to Children's Social Care should be included within quarterly performance reports to the Governance Audit and Standards Committee.	PSCB Chair; Alison Jeffery	The information requested is already covered in the PSCB annual report, and can be included in GAS Quarterly reports	None
12. To review the delivery of workforce training around sexual health	Director of Public Health	Provision of training has historically been a part of the contract between public health and Solent, however these contracts have just changed. There are two roles in the Early Help team at Specialist level to make sure all the team are aware of sexual health and CSE for young people – there is a lot of expertise in the team already in this area.	Meetings taking place in May/June 2017 between public health team and Solent NHS Trust to finalise what elements of the sexual health offer, if any will still remain in the new service. This will then become clear.
13. That a report on the progress against the above recommendations be monitored and a report received by the Scrutiny Management Panel 6 months after the report has been signed off.	Deputy Director of Children's Services	Within policy framework	None

Meeting Date	Witnesses	Documents Received.
<b>21 June 2016</b>	Sarah Newman, Deputy Director of Children's Services	Scoping Document Brief Overview of arrangements to tackle Child Sexual Exploitation in Portsmouth
<b>19 July 2016</b>	Tina Scarborough, Portsmouth CCG Claudia Villa-Hughes, CSE & Missing Team Manager at Barnardo's Sue Sainsbury, Barnado's Sarah Newman, Deputy Director of Children's Services	Portsmouth CCG response to ECYP Panel Barnado's Annual Report April 2015-March 16 Barnado's Miss-U data Barnado's Miss-U report for Quarter 4 Multi-Agency Scorecard: Missing, Exploited and Trafficked children 2016-17 Paper from Barnado's - comments on the meeting objectives.
<b>8 August 2016</b>	Detective Superintendent Vicky Dennis, Head of Public Protection and Force Strategic and Tactical Lead for CSE Lucy Rylatt, PSCB Business Manager, PCC	Sample Operation Makesafe posters
<b>5 September 2016</b>	Chantelle Lemmon, PCC Social Worker Helen Saunders, YOT Worker Gemma Green, Portsmouth Abuse and Rape Counselling Service (PARCS)	PARCS Annual Report
<b>26 September 2016</b>	Leyton Higgins, Charter Academy Clare Rhodes, Portsmouth Academy Ross Lee, Licensing Officer Kelly Huggett, Health Development Officer	Licensing service response to child sexual exploitation risks - hackney carriage and private hire matters
<b>18 October 2016</b>	Jude Findlay, CSC Service Manager and Chair of the MET Operational Group Natasha Charles, MASH	

	education worker	
<b>8 November 2016</b>	Annie Clark, Sexual Health Service Michelle Evans, Barnado's Project Worker Amanda Littlefield, Hillside Youth Centre Manager Kelly Huggett - to provide the panel with the feedback from service users on the support received in relation to CSE.	Toolkit used by the sexual health service
<b>June 2017</b>	Sign off meeting	

**GLOSSARY**

BME	Black and Minority Ethnic
CAMHS	Child and Adolescent Mental Health Service
CSC	Children's Social Care
CSE	Child Sexual Exploitation
CPI	Community Partnership Information
CYP	Children and Young Person
LGBT	Lesbian, Gay, Bisexual and Transgender
LSCB	Local Safeguarding Children's Board
MASH	Multi-Agency Safeguarding Hub
MET	Missing, Exploited and Trafficked
PARCS	Portsmouth Abuse and Rape Counselling Service
PSHE	Personal, Social, Health and Economic
PSCB	Portsmouth Safeguarding Children Board
SERAF	Sexual Exploitation Risk Assessment Framework
YOT	Youth Offending Team

Appendix 3 - numbers (and %) of contacts to the MASH by each agency

	1 C&F Initial Decision MASH	1 C&F Initial Decision MASH	2 C&F Initial Decision Pass to S47 MASH	2 C&F Initial Decision Pass to S47 MASH	3 C&F Initial Decision Pass to Early Help MASH	3 C&F Initial Decision Pass to Early Help MASH	4 C&F Initial Decision Case remains with universal services	4 C&F Initial Decision Case remains with universal services	Total Percentage	Total Numbers
All Contacts (not on open cases) 1st Feb - 30th June 2016	Percentage	Numbers	Percentage	Numbers	Percentage	Numbers	Percentage	Numbers		
Police	16.82%	410	3.32%	81	21.41%	522	58.45%	1425	100.00%	2438
Schools\Education	26.82%	184	10.20%	70	21.28%	146	41.69%	286	100.00%	686
Family, friends, neighbours, etc.	20.58%	100	1.65%	8	59.05%	287	18.72%	91	100.00%	486
Health (all)	27.73%	122	2.27%	10	26.82%	118	43.18%	190	100.00%	440
Other Local Authority	7.11%	17	6.69%	16	34.31%	82	51.88%	124	100.00%	239
Other	32.70%	69	4.27%	9	26.07%	55	36.97%	78	100.00%	211
Barndos/FMF	7.69%	13	0.00%		13.02%	22	79.29%	134	100.00%	169
Court/CAFCASS/Solicitors	3.25%	5	1.30%	2	2.60%	4	92.86%	143	100.00%	154
Probation	15.45%	17	0.00%		48.18%	53	36.36%	40	100.00%	110
Anonymous	58.33%	49	1.19%	1	26.19%	22	14.29%	12	100.00%	84
Housing	23.08%	18	1.28%	1	24.36%	19	51.28%	40	100.00%	78
PCC Social care (all)	32.61%	15	8.70%	4	23.91%	11	34.78%	16	100.00%	46
Early Years	4.76%	2	4.76%	2	16.67%	7	73.81%	31	100.00%	42
back in from Early Help Support	9.09%	3	0.00%		0.00%		90.91%	30	100.00%	33
PCC not social care	21.74%	5	0.00%		30.43%	7	47.83%	11	100.00%	23
Self	66.67%	10	6.67%	1	20.00%	3	6.67%	1	100.00%	15
Immigration/Border Control/Home Office	25.00%	3	16.67%	2	16.67%	2	41.67%	5	100.00%	12
YOT	10.00%	1	30.00%	3	60.00%	6	0.00%		100.00%	10
CAMHS/MST	12.50%	1	0.00%		62.50%	5	25.00%	2	100.00%	8
<b>Grand Total</b>	<b>19.76%</b>	<b>1044</b>	<b>3.97%</b>	<b>210</b>	<b>25.95%</b>	<b>1371</b>	<b>50.32%</b>	<b>2659</b>	<b>100.00%</b>	<b>5284</b>
Shows decision as a percentage of each source										

Appendix 4 - Outcome of the MASH process

INITIAL_DECISION_STATED_ISSUE(Stated Issue)	1 C&F Initial Decision MASH
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**Feb 1st 2016 - June**

**30th 2016**

Code to

Row Labels	Contacts	Percentage	
C Advice / Information Given	137	13.12%	Universal services
C New Information On Open Case	12	1.15%	exclude
C Progress To Referral	628	60.15%	CSCS
C Referral To Mash	9	0.86%	Back in from EHS
C Referral To Social Care	14	1.34%	CSCS
C Tac Children'S Centre Lead	3	0.29%	TAC
C Tac Early Years Lead	6	0.57%	TAC
C Tac Education Lead	84	8.05%	TAC
C Tac Families Moving Forward	1	0.10%	TAC
C Tac Fip Barnardos Lead	40	3.83%	TAC
C Tac Health Lead	15	1.44%	TAC
C Tac Other Lead	4	0.38%	TAC
C Tac Think Family Mentor Lead	4	0.38%	TAC
C Tac Yot Lead	1	0.10%	TAC
C Universal Services Involved. No Additional Needs Identified At This Time.	79	7.57%	Universal services
Not Recorded	7	0.67%	exclude
<b>Grand Total</b>	<b>1044</b>	<b>100.00%</b>	

Page 70

Breakdown by Category	Count%	%
To Universal Services	216	21.07
Opened to CSCS	642	62.63
Returned back from Early Help to CSCS	9	0.88
To TAC/Early Help	158	15.41
Total = 1044 - 19	1025	100



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# Equality Impact Assessment

Preliminary assessment form v5 / 2013

[www.portsmouth.gov.uk](http://www.portsmouth.gov.uk)

The preliminary impact assessment is a quick and easy screening process. It should:

- identify those policies, projects, services, functions or strategies which require a full EIA by looking at:
  - negative, positive or no impact on any of the equality groups
  - opportunity to promote equality for the equality groups
  - data / feedback
- prioritise if and when a full EIA should be completed
- justify reasons for why a full EIA is not going to be completed

**Directorate:**

Director of Community & communications

**Function e.g. HR,  
IS, carers:**

Education, Children and Young People Scrutiny Panel

**Title of policy, service, function, project or strategy (new or old) :**

Education, Children and Young People Scrutiny Panel review into how well Portsmouth City Council and partners are preventing and dealing with Child Sexual Exploitation (CSE).

**Type of policy, service, function, project or strategy:**

- Existing
- New / proposed
- Changed

### Q1 - What is the aim of your policy, service, function, project or strategy?

The objectives of the scrutiny review were: To evaluate the work of the Missing, Exploited and Trafficked (MET) operational group, to evaluate how effectively young people at risk of CSE in Portsmouth are identified and the interventions offered to young people at risk of being exploited, to consider how effectively the risks of exploitation are being minimised by the Council and partners, to review feedback from service users and to investigate how effectively the local authority works with other agencies to tackle CSE and how they ensure prosecution of perpetrators. The recommendations arising from the review will be considered by Cabinet.

### Q2 - Who is this policy, service, function, project or strategy going to benefit or have a detrimental effect on and how?

The report considers how well Portsmouth City Council and partners are preventing and dealing with child sexual exploitation and outlines the measures in place to protect young people at risk of CSE. The ECYP scrutiny panel's recommendations seek to improve outcomes for young people at risk of sexual exploitation and build upon the excellent work that is already taking place to ensure that awareness of this issue continues to be raised.

During the review the panel received evidence from the Missing, Exploited and Trafficked (MET) Operational Group, Hampshire Police the Portsmouth Safeguarding Children's Board (PSCB) and a number of other agencies and council officers who involved in helping young people at risk of CSE. Feedback from three young people who had previously been at risk of CSE was also received by the panel. This informed the panel about the support these young people had received and their experience of this. This helped the panel to formulate their conclusions and recommendations.

### Q3 - Thinking about each group below, does, or could the policy, service, function, project or strategy have a negative impact on members of the equality groups below?

Group	Negative	Positive / no impact	Unclear
Age	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Disability	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Race	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Gender	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Transgender	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Sexual orientation	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Religion or belief	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Pregnancy and maternity	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Other excluded groups	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
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If the answer is "negative" or "unclear" consider doing a full EIA

**Q4 - Does, or could the policy, service, function, project or strategy help to promote equality for members of the equality groups?**

Group	Yes	No	Unclear
Age	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Disability	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Race	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Gender	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Transgender	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Sexual orientation	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Religion or belief	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Pregnancy or maternity	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Other excluded groups	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

If the answer is "no" or "unclear" consider doing a full EIA

**Q5 - Do you have any feedback data from the equality groups that influences, affects or shapes this policy, service, function, project or strategy?**

Group	Yes	No	Unclear
Age	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Disability	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Race	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Gender	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Transgender	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Sexual orientation

Religion or belief

Pregnancy and maternity

Other excluded groups

If the answer is "no" or "unclear" consider doing a full EIA

**Q6 - Using the assessments in questions 3, 4 and 5 should a full assessment be carried out on this policy, service, function or strategy?**

yes  No

**Q7 - How have you come to this decision?**

The ECYP scrutiny panel's recommendations do not have any negative impact on any of the protected characteristics and are intended to improve outcomes for young people at risk of CSE. The recommendations require Cabinet approval. Evidence was provided by a number of organisations who are working alongside the council to tackle sexual exploitation and the panel also received some feedback from young people previously at risk of CSE about the service and support received. If the schemes/actions within the report's recommendations are taken forward individual EIA's may need to be completed.

If you have to complete a full EIA please contact the Equalities and diversity team if you require help  
Tel: 023 9283 4789 or email:equalities@portsmouthcc.gov.uk

**Q8 - Who was involved in the EIA?**

Lisa Gallacher, Local Democracy Officer

**This EIA has been approved by:** Vicki Plytas, Senior Local Democracy Officer

**Contact number:** 02392 834056

**Date:** April 2017

Please email a copy of your completed EIA to the Equality and diversity team. We will contact you with any comments or queries about your preliminary EIA.

Telephone: 023 9283 4789

Email: [equalities@portsmouthcc.gov.uk](mailto:equalities@portsmouthcc.gov.uk)

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