

Report: Current Cohort CCE & CSE

Date: Quarter 1 2018-2019

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Recommendations:

1/ CSC: To identify how many child's need assessments have been completed prior to closure of cases with a CE flag at the age of 17 plus.

2/ YPDAAT: To offer assurance around their efforts to engage young people who are referred with additional concerns around CE.

3/ YJS: To develop a task and finish group to review a sample of cases on those young people open to their service for CE, in order to identify if any indicators were present which may have enabled earlier proactive intervention in order to reduce the likelihood of YJS involvement.

Gender Mix and Ages

Of the current 20 young people open to MACE, 13 are Females and we have 7 Males, 12 recorded under the category CSE and 8 Under the category of CCE, 1 young person changing category mid-way through from CSE to CCE (Child Sexual Exploitation to Child Criminal Exploitation)

2 of the 20 are CICOLA (Child In Care Of Other Local Authority) Young people, of the 18 young people remaining, 3 of the 18 are Looked after Children to St Helens Peoples services.

Through reviewing the cohort list at some point of intervention 4 cases CE were closed with No further action taken. 1 case where CSE concerns was identified and closed with advice that the case remains open subject to an EHAT.

In 1 case there was a 2 year history raising concerns around CSE prior to the case opening to MACE.

In 1 case a 12 year old was identified as both victim and using harmful sexualised behaviour against her younger brother.

Age 17	Age 16	Age 15	Age 14	Age 13	Age 12
3	3	6	4	3	1

It is recognised that although there are concerns risks relating to U17 years, there is a significant risk to those people 17, coming up to 18 year old. This relates not only to accommodation but also in relation to support services.

The 2014 Care Act advises that were a child is turning 18 and there is likely to be a need for continued support, a Child's needs assessment must be undertaken. Support must continue until the assessment is completed and that assessment either indicated they did not qualify for services or services were in place.

This may place this age range at increased risk of harm.

3 young people age 17 years:

Out of the 3 young people, 1 is a female open to **DPA** MBC and the plan is to move her into Semi independence in the area of her birth **DPA** when she reaches 18 years.

The remaining 2 young females are currently open cases to St Helens CYPs, 1 Female first came to the attention of Children's Services at the age of 15 ½ alleging a male was in contact with her, the case opened and closed – 18 months later further report raising concerns that she was in a relationship with a 29 year old male.

2nd St Helens female: Other female is open to St Helens in Semi-Independence. Young person states she understands why she is open to Peoples Services (CYPs) however, she does not feel she is at risk of CSE, nor does she feel vulnerable.

When looking at the 18 young people known on the cohort, 14 were previously known to Peoples Services (CYPs), in their childhood prior to being identified as requiring intervention due to CCE or CSE. This involvement ranged for the following reasons: Neglect was the highest factor with 5 cases. Domestic violence in 4 cases: Physical abuse in 2 case's: parental mental health in 2 cases: Sexual Abuse in 2 cases: Behavioural issues in 2 cases: in 1 case Young person speaking about his belief in Terrorism being good at age 9 years.

Of the 18, 10 of those had issues with school / Education, 1 young person was diagnosed with Dyslexia.

1 young person had learning difficulties.

50% of the cohort had Mental Health issues (this was recorded on all those young people where CAMHS were mentioned as having involvement, or a referral had been completed and those cases where referrals were closed down due to lack of engagement)

5 of the 18 self-harm was a concern and 4 young people were documented as having self-esteem issues. 1 young person had issues with bullying in school and 1 young person with PTSD.

5 Young people had a diagnosis of ADHD, 1 ODD, 1 diagnosed with Autism.

50% Alcohol was a feature of case involvement and 49% had Drugs as a feature.

49% Criminality / ASB was a feature in their Pathway.

First language not being English was relevant in cases involving 2 Young people.

Parental push / pull factors:

3 Young people had family members who were deemed a HZD/ RTC in the family.

10 cases Domestic Violence was a feature, 50% of those families (5) Had been discussed at MARAC (Multi Agency Risk Assessment Conference).

Out of the 18 families:

Parental Drug Misuse	Parental Alcohol Misuse	Parental Mental Health	Criminality	Moved into our Area	Frequent House moves	On a CP Plan as a young person
4	9	5	2	1	3	1

The above data (Page 1 & 2) focuses on the 20 currently open to MACE process.

Referring agencies:

Police	Catch 22	YJS	School	School health	Early Help
19	8	1	8	1	4

CAMS	Safer Community	Peoples Services (CYPs)	Placement	YPDAAT	Victim Support
0	0	19	4	2	1

Total number of CE1 referrals received: In total there were 67 referrals discussed at Morning meeting. The highest referring agency was jointly Police and Peoples services (CYPs) at 19, followed next by Catch 22 and School with 8 referrals each.

CE1 Data	Not Open to CYPs	LAC	CICOLA	CP/ASS	CIN / Early Help
April	10	1	8	0	7
May	10	4	1	1	6
June	11	5	2	0	1
Total	31	10	11	1	14

At the point of receipt of a CE1 referral for discussion at morning meeting, we can see from the table above, of the total 67 CE1's received 31 were not open to Peoples services, 10 were open to LAC and 14 open to CIN / Early Help services.

11 cases were CICOLA (Child In Care of Other Local Authority).

Cases are not automatically referred until they progress from CE1 – Until they have been discussed at CE2 and agreement that the cases should progress to MACE. At this point they are referred through to the Front Door if not already open.

CE2 Meetings

Month	Low	Med	High
April	5	3	4
May	1	2	3
June	4	5	3
Total	10	10	10

Out of the 67 CE1 referrals received: 30 progressed to a CE2 meeting.

Of the 30 cases discussed at CE2, 50% of these cases progressed to MACE

MACE DATA

Month	New Cases	Review	Closed
April	7	5	4
May	3	5	4
June	5	4	0
Total	15	14	8

Summary

As this is the first Quarterly report it is difficult to identify specific trends / themes, however this will be ongoing so that in the future we will be able to utilise the data to identify themes and trends, to inform service delivery.

What I believe will also be helpful is to collect Data around numbers of cases discussed at CE1 stage which is being screened by the Front Door.

Safeguarding Coordinators

July 2018.