

**WW. 118**

# **BSCB CSA – Findings Report March 2018 FINAL**

**Recommendation 10 – The QPSG escalate to the Board concerns about insufficient specialist sexual violence provision for children and families in the city**

The audit group found that in many of the cases, if not all, crucial information about the family's history of sexual trauma or involvement of other specialist services with other family members was not included in information shared with specialist sexual violence service. This risks limiting the potential effectiveness of therapeutic intervention or placing a child at risk if the professional has insufficient information for assessment or safeguarding decision making.

**Recommendation 11 – BSCB members should ensure that professionals are providing Specialist Sexual Violence services with a full history of risk information related to abuse and trauma.**

**Recommendation 12 – BSCB to encourage Specialist Sexual Violence Services to be robust in their expectation and challenge of agencies in providing appropriate information provision where they are aware of gaps**

One case involved a young person at high risk of CSE. There was evidence of excellent collaborative working between the police, BASE and social care resulting in victim-less prosecution. However in this case the agencies were concerned that the disruption of perpetrators and intensive therapeutic support was not creating the positive impact on the safety of the young person. While there was evidence of ongoing tenacity by professionals aligned with CSE best practice, the audit highlighted the previous history of alleged CSA and it became evident that the alleged familial perpetrator remained in contact with the family. This evidenced the risk that without effective chronologies or histories, adolescent exploitation approaches may masked familial sexual abuse risks which could be a contributory or causal factor for the child's sexual vulnerability.

**Recommendation 14 – CSE Subgroup to be made aware of findings from this case and consider how lifespan histories are being used to assess and determine appropriate CSE responses.**