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DURHAM CONSTABULARY



Examples of how the impact of disabilities and child sexual exploitation risk are discussed and how in practice the Constabulary makes sure that education and health services are involved to manage the risks to children with disabilities.

Example 1

Initials redacted The young person has complex emotional issues; she was previously engaged in psychotherapy but is no longer accessing this, she is still open to CAMHS but does not want to engage with the service. The young person has not been diagnosed with a learning disability/difficulty however she has complex social and emotional problems. In the care of her parents she suffered chronic neglect, physical abuse and trauma which has hindered her development.

Chronologically she is 15 years old but emotionally she is significantly younger and is therefore a prime target for sexual exploitation especially given she is actively seeking out sexual relationships online and instigating this contact.

The young person has issues with soiling and wetting and she is a lot younger than her chronological age. There has been a recent increase in the frequency of the soiling and the behaviours around this which indicate she is struggling.

Social services identified that the child seemed to benefit significantly from working with a specific psychotherapist but this had stopped due to funding issues. Social services are going to secure additional funding in order to enable further work to continue.

These issues were raised within the context of a CSE meeting.

Example 2

Initials redacted On the young person's CSE review form it was noted that the young person agreed that she suffered from low self-esteem, feelings of despair, self-harm and overdose, aggression. She reported that she does not drink that much, however an alcohol screening tool was undertaken and the young person scored '10' which suggests that she is at 'increasing risk'. She was able to recognise that the 'common effects' were similar effects to what she is currently experiencing i.e. less energy, tiredness etc.

The young person often made superficial cuts to her arms and legs. On numerous occasions the CAMHS Crisis team were involved due to her taking an overdose on Ibuprofen and Paracetamol. At the time of the incidents the young person was described to be unkempt, and her mother was struggling to get her to look after her personal hygiene.

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There have been a number of physical altercations between the child and her mother which have resulted in police involvement.

The young person as currently engaging with CAMHS and had been prescribed Anti-depressant's. She was to be assessed for ADHD

The following are extracts from minutes evidencing the multi-agency discussion of vulnerability;

"Update from social worker 09/01/2019-

The young person has recently been diagnosed with ADHD and low IQ. [Name Redacted] is struggling to get her to take her medication and she has missed her last CAMHS appointment due to her refusing to attend. Her next appointment is around mid-February.

Update from CAMHS 13/02/2019-

The young person has not been seen since 26/11/2018. Her mother did ask to speak to the CAHMS worker after the appointment and her mother has broken down and stated that she cannot cope with her behaviour.

The young person was diagnosed with ADHD in November and had been taking some anti-depressants prior.

The young person was supposed to attend 17/12 however didn't attend. The young person was given another appointment on 28th December however her mother rang to say that the young person was refusing to attend.

An ABAS was completed with her mother which was showing that the young person had a learning disorder. L&D have stated they will complete work if the young person would engage.

The young person is not currently taking any medication for her ADHD.

Update from CAMHS 20/03/2019-

The young person was presenting as depressed when she was first seen.

She was then diagnosed with ADHD and prescribed medication.

The young person was not taking medication and attends appointment sporadically. She was seen in Feb.

The young person stated she didn't want to engage with professionals and did not attend her next appointment.

An urgent TAF was held due to concerns around the young person however there was no outcome.

A cognitive assessment was completed which present as her having a Learning Disability however professionals do not feel she presents as having a learning disability.

Update from social worker 10/04/2019-

CAMHS have stated the young person attended an appointment on 18th Feb and the young person stated she had trouble sleeping, she has been given tablets in relation to this. The young person is still not taking her ADHD medication however this will be looked at in her next meeting."

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