

A STRATEGIC REVIEW OF CHILD SEXUAL EXPLOITATION (CSE) BROMLEY

Introduction

The Bromley review was conducted by the Bromley Safeguarding Children Board CSE Strategy Group which is made up of the CSE leads from all relevant partner agencies:

- Children's Social Care - Referral and Assessment
- Children's Social Care - Quality Assurance Service
- Education - Lead Officer for Education Safeguarding
- The Metropolitan Police Service - Bromley
- The Youth Offending Service
- Bromley Healthcare
- Kings College Hospital Trust
- Oxleas NHS Foundation Trust (CAMHS)
- Barnardo's

The multi-agency CSE Strategy Group was formed¹ in response to the DfE guidance 'Safeguarding Children and Young People from Sexual Exploitation' (2009) to create, agree and implement a multi-agency response within Bromley to concerns around child sexual exploitation.

Initially the group convened a minimum of 4 meetings a year in order carry out its strategic function to set up, monitor, evaluate and review the processes and procedures for responding to any concerns that children and young people within Bromley were at risk or experiencing sexual exploitation.

In October 2013 the Bromley Safeguarding Children Board launched the 'Protocol for Safeguarding Children and Young People at Risk of or Experiencing Sexual Exploitation in Bromley' at the Bromley Safeguarding Children Board annual conference. The theme of the multi-agency conference was Child Sexual Exploitation and the programme for the whole day event included messages from research presented by key note speakers, seminars and workshops.

Following the launch of the protocol it was agreed the operational functions of the CSE Strategy Group would be passed to the Multi-Agency Sexual Exploitation (MASE) Panel.

In order to undertake this strategic review, the CSE Strategy group was re-formed with additional representation from senior safeguarding leads and following a series of 4 meetings held in 4 consecutive weeks, an audit tool was compiled using the key questions that will be raised by the OFSTED thematic inspections.

The members of the CSE Strategy Group were required to complete the audit tool representing the perspective of their own agency in so far as this was possible. This report represents a summary of all the responses.

¹ 2011

Bromley has furthermore agreed to compare audit outcomes and practice recommendations with the LB of Bexley in order to support learning across London.

In addition, in line with new 'Statutory guidance on children who run away or going missing from home or care', a protocol was published in April 2014 which sets out the local arrangements agreed by Children's Social Care, the Police and other partner agencies.

Strategic Leadership of CSE in Bromley

CSE has been a key priority for Bromley safeguarding Board as seen in its annual conference in 2013 being dedicated to the topic.

In December 2014 all but one of the agencies has identified designated CSE Leads who take full and active roles in the MASE Panel meetings.

The autumn 2014 review has identified that the strategic roles within some agencies in relation to CSE does not always appear to be clearly defined or there was a lack of evidence of pro-active action on their part to raise awareness of the issues of CSE within their agencies and implement the procedures. Apart from the Police, there was very little evidence of the individual agencies collating and analysing data around child sexual exploitation in order to inform and improve practice. However, most had identified training needs in relation to CSE within their agencies.

Following the autumn review Bromley Children's Social care have moved the responsibility for MASE and MAP processes to the TAPS (Teenage, adolescent and parenting service), with a specialist Barnardo's support worker based in the team.

After having had a steady and permanent chair since it was formed, the MASE Panel experienced a period of change when the senior Police officer chairing the meetings left. This has now been resolved as a designated Detective Inspector has been identified to take on this key role.

Representation from Health had been strong and consistent from the outset, however when both the Designated Nurse and the Named Nurse left the borough, followed by the restructuring of services within Bromley Health Care and the Clinical Commissioning Group, there was a period of readjustment before the appropriate leads joined the panels.

CAMHS are represented on both MASE and MAP panels if that service is working with a young person. It has been agreed that a representative from CAMHS will join the MASE Panel.

The Council has re-commissioned Bromley Y who will now be delivering the new Community Wellbeing Service providing the gateway to all mental health services for children and young people in Bromley. It has been agreed they will be represented on forthcoming MAP Panels.

The Bromley threshold guidance 'The Child's Journey in Bromley' is currently being reviewed and updated for publication in April 2015 and will include a section on identifying and responding to concerns around child sexual exploitation.

The 'Service User Involvement Framework' is currently being produced and will highlight how professionals respond to concerns around child sexual exploitation raised by service users in the course of their engagement.

The 'Young People's Strategy' which has been drafted and is awaiting ratification makes reference to issues of child sexual exploitation and the BSCB CSE Strategy and Protocol that have been implemented.

The 'Joint Needs Assessment Strategy' does not make reference to child sexual exploitation but it is anticipated it will be included when the strategy is next reviewed.

Compliance of BSCB with DfE 2009 guidance

The Bromley Safeguarding Children Board (BSCB) has considered the needs of children and young people who have been or may be sexually exploited and in doing so has endorsed the following:

- The formation of a BSCB sub group known as the CSE Strategy Group which will oversee the coordination and monitor the effectiveness of local partnership work to keep children safe from sexual exploitation.
- The CSE sub group membership consists of CSE lead professionals with responsibility for raising awareness in their own agencies, initiating single agency training programmes and implementing the CSE procedures.
- The commissioning of multi-agency training as part of the Board's annual training programme in order to raise awareness and alert professionals to the signs and symptoms of CSE and provide them with an understanding of how to respond to identified concerns.
- The commissioning of suitable therapeutic services. (i.e. Barnardo's specialist services to provide 1:1 counselling and specialist therapeutic intervention for children and young people at risk of or experiencing CSE).
- The development of specific local procedures covering the sexual exploitation of children and young people. These procedures are outlined in the BSCB 'Protocol for Safeguarding Children and Young People at risk of or experiencing Sexual Exploitation in Bromley'. These were launched at the Bromley Children Safeguarding Board annual conference in 2013.
- The commissioning of mandatory training for all key professionals likely to encounter cases where children and young people may be at risk of or are experiencing sexual exploitation
- The development of robust referral, tracking and monitoring processes for cases that come to the attention of local agencies.
- All cases of suspected CSE are referred to the MASE Panel for consideration and if concerns are identified then cases are referred to the Multi-Agency Planning Panel for a multi-agency plan designed to support and divert the young person away from the risk or out of the exploitative situation.
- The MASE Panel meetings consider the cases of all Bromley young people thought to be at risk of or involved in CSE including those looked after who have been placed outside of the borough. The Panel also considers the cases of young people from neighbouring authorities who have been placed within this borough and are thought to be involved in CSE.
- Data on missing children and children at risk of CSE is regularly monitored by the BSCB and the Board requires an annual report on progress from the MASE Panel Chairperson.

Sharing information and working together on CSE

Bromley Children's Services has adopted the 'Seven Golden Rules for Information Sharing' published by the DCSF in 2009. A copy of this guidance is included in the appendix of the Bromley CSE protocol.

Before each MASE meeting the referrals relating to each child or young person detailing all identified CSE concerns are circulated to all Panel members. Each Panel member is then required to conduct checks within their own agency to determine whether the young person is known to them. Each Panel member will feed back to the Panel any information they hold relating to the young person. The functioning of the Panel in this respect is excellent and there have never been any concerns or problems around information sharing.

Assessment of the risks and concerns may identify the need for the young person to be referred to the Multi-Agency Planning Panel (MAP) for a programme of intervention to support them away from or out of sexual exploitation.

When MAP meetings are convened the Panel members and all professionals working with the young person are invited to attend including schools, YOS, Housing and any voluntary organisations that are involved. If it is deemed appropriate, foster carers are invited to these meetings. Parents and the young people concerned are not invited.

We are aware we need to review the attendance of young people and their parents.

The involved professionals share the reasons and nature of their involvement at the meeting so that any programme of intervention in relation to the CSE can be fully incorporated into existing support or intervention plans.

Information sharing has worked well even when there have been on-going police investigations and in order not to compromise the investigation information is shared only on an absolute need to know basis.

When asked whether induction programmes included CSE, all agencies were able to confirm their staff received safeguarding training as part of their induction and that staff would at some point be receiving training relating to CSE. However, at the time, not all were able to confirm their induction training included specific reference to CSE.

Workforce Training on CSE

As part of the drive to implement the procedures outlined in the CSE protocol, a programme of mandatory CSE briefings was rolled out to all frontline Children's Social Care staff during 2013 - 2014. There are plans to continue providing these sessions to ensure new staff are equipped with the required level of knowledge and understanding of CSE and to ensure the availability of refresher training.

The recent Children's Social Care and Training and Development review of the Continuous Professional Development Plan for social workers clearly identifies child sexual exploitation as training that must be completed by social workers within their first year of employment.

The Police have implemented mandatory CSE training for all its officers at the beginning of 2014 and in light of the current national focus on CSE there are plans to repeat this.

The Bromley Youth Support Programme include CSE in their safeguarding induction programme which is encouraging as this service runs the youth activity centres, school holiday programmes and works with young people who are NEET.

The induction provided by the Youth Offending Service also includes specific information around CSE.

In response to this review Bromley Healthcare have modified their induction programme to include CSE from November 2014 and Kings College Hospital Foundation Trust confirmed CSE is included in their induction training for nurses and midwives.

For Oxleas NHS Foundation Trust (CAMHS), CSE is not a standard part of their induction. CSE forms part of their higher level safeguarding training which is available to clinical staff.

Quality assurance of Bromley's CSE service provision and outcomes

The scheduled audit of CSE cases, using a random sample of CSE cases and considering the individual responses of all agencies and the overall effectiveness of the services in Bromley was due to take place in October 2014. This would mark one year since the Board agreed and published the Protocol for Safeguarding Children and Young People at Risk of or Experiencing Sexual Exploitation in Bromley.

Due to time pressures and changes in staffing roles it was agreed by the MASE strategy group that the audit of individual case files would be deferred until January 2015.

The progress of the implementation and the effectiveness of CSE procedures within Bromley along with generalised outcomes has been reported to the Board via the MASE Annual Reports to the Board in 2013 and 2014.

When the original CSE Strategy Group was dissolved in 2014 the Bromley Safeguarding Children Board agreed the strategic functions and responsibilities of the CSE Strategy Group would be undertaken by the MASE Panel which is chaired by the MPS Bromley Detective Inspector with senior management responsibility for safeguarding. These responsibilities would include an annual review and audit of the effectiveness of the services for children and young people at risk of or involved in sexual exploitation.

Intervention and case management outcomes of individual cases are monitored through the Multi-Agency Planning process. The meetings are chaired by a Group Manager who sits within the Quality Assurance Unit of Children's Services and supported by a fixed multi-agency panel consisting in the main of professionals who have lead responsibility for CSE within their agencies.

Monthly meetings are held to review the progress of the CSE plan and the interventions of professionals working with the young people are closely monitored with a view to ensuring efficacy. Poor practice is challenged and any serious concerns are dealt with in accordance with the escalation procedures wherever necessary.

The MASE meeting has an agenda item for cross boundary referrals which ensures that there are clear lines of responsibility for managing a case as well as the procedures for sharing information between different local authorities so that any CSE concerns are not missed.

Currently there are limitations in the way electronic data (such as referral information) can be easily retrieved for quantitative or qualitative analysis. Referral data therefore has to be retrieved manually and it is recognized that this is only possible because the total number of referrals is relatively low. The Quality Assurance and Safeguarding service are aware of this issue and are currently seeking to resolve this problem.

The following are the required outcomes for young people measured using the Barnardo's Outcome Descriptors guidance and Barnard's completed an evaluation report for the BSCB based on these outcomes in 2014.

- Enhanced parent/carer/adult - child relationships
- Ability to express feelings
- Knowledge of sexual health strategies
- Reduced/safer consumption of controlled substances
- Able to identify abusive/exploitive behaviour
- Recovery from sexual abuse/exploitation
- Able to describe safety strategies
- Reduction in level of risk/harm
- Reduced association with risky adults/peers
- Remains in regular contact with the service
- Stable and secure accommodation
- Family has access to support services
- Able to describe safety strategies
- Episodes of missing from home/care reduced
- Satisfactory school/college attendance
- Aware of own rights and those of others

In addition the Kings College Hospital Foundation Trust conducted a single agency audit on the use of the CSE screening tool by sexual health services at Denmark Hill in March 2014 which is used by PRUH. In 2015 they plan to conduct an audit looking at outcomes for children who have been identified as being at risk or involved in CSE.

CSE prevention work in Bromley

The multi-agency and single agency CSE briefings and training programmes rolled out across the borough helps professionals to identify those young people who because of their life experiences

and the circumstances of their family lives are more vulnerable to being sexually exploited. Professionals are also helped to understand the routes that lead young people into being sexually exploited. With this knowledge and understanding professionals are better able to identify potential risks and employ diversionary and supportive strategies to reduce the risks before exploitation actually occurs.

The Education Safeguarding Advisory Committee (a BSCB sub group) in 2014 all Education safeguarding leads from all schools, colleges and alternative providers in the borough to an afternoon forum held exclusively around the topic of CSE. The afternoon included presentations from Barnardo's, the Police and CSC along with interactive exercises and DVDs. Education staff were encouraged to raise awareness of CSE not only among the student population but also to get the message out to parents. Staff were encouraged to raise awareness, enhance understanding and alert students to the risks through PSHE lessons, assemblies and speakers from specialists agencies. All attendees were provided with a pack containing information around CSE and details of the available resources nationwide.

Oxleas NHS Foundation Trust utilise their network of 'safeguarding children champions' to circulate information on CSE to other professionals and the Oxleas Safeguarding Children Committee are currently in the process of circulating a summary of the Jay Report to professionals within the Trust.

The Bromley Youth Support Programme and the Youth Offending Service provide all the children and young people known to them with information and advice around CSE during their 1:1 interventions with them.

The Bromley Health Care LAC nurse provides information to the looked after children she comes into contact with, as studies have shown the prevalence of CSE victims from this particularly vulnerable group. The LAC nurse also liaises with foster carers on the subject of CSE enhancing their understanding of and alerting them to the vulnerabilities and risk indicators.

The Bromley Health Care Contraceptive Team undertake risk assessments on all young people attending their clinics and accessing their sexual health services.

Bromley Health Care staff receive information on CSE during team meetings and during 1:1 supervision sessions.

Kings College Hospital Foundation Trust disseminate information on CSE to staff by way safeguarding training and by use of an E-bulletin sent to staff.

The Metropolitan Police (MPS) have produced an awareness raising poster and information leaflet for distribution within the community, aimed at children and young people and parents and carers.

In Bromley the Local Police Teams have been tasked to identify those premises which should be part of Op Makesafe and it has been extended to include fast food premises. A member of staff has been identified to brief the LPT officers on CSE and Op Makesafe, which as well as raising awareness of CSE to the business community will also raise awareness among police officers. It is hoped that this initiative results in an increase in CSE referrals or CSE Cris reports and it will be subject to monitoring.

The MPS Missing Persons team has been carrying out awareness raising work with foster carers and professionals working in children's homes which has included CSE.

In Rotherham 63% of children had been reported missing more than once and there was a strong link to children missing from care and children being at risk of CSE.

Whilst recognising the link between missing person (Misper) data and the risk of CSE, consideration needs to be given to the fact that looked after children have to be reported missing to police, whereas children living with family may be frequently missing and just as at risk of CSE, but not routinely reported as a missing person.

In the MPS, approximately two thirds of young people had been Mispers in the 12 months prior to being a victim of CSE. The current audit of Bromley's MASE referrals found over 60% of the young people had been Mispers prior to the MASE referral being made.

In recognising the strong link between missing reports involving young people and CSE, the Bromley MASE now considers a second category of young person who may be at risk of CSE based on the number and frequency of missing reports. This factor prompts further research of a child's history by all agencies and in some cases the warning signs of CSE can be identified in organisation's files, prompting a referral to MAP that would otherwise not have been made.

New Absent Category

Last year ACPO widened the definition of a missing person to include an 'absent' category. The new definition distinguishes between people who are:

- Absent: Not at a place where they are expected or required to be and are not at risk of harm or crime to either themselves or others.
- Missing: Not at the place they are expected to be, but the circumstances are out of character, or the context suggests they may be subject of a crime or at risk of harm to themselves or others.

The new definition aims to ensure police resources are used to best effect when missing person reports are made and will lead to a more effective response by police and other agencies. Anyone under the age of 13 will always be reported missing. Young people between the ages of 13 and 18 have to be reported missing on two occasions before they can be treated as 'absent'.

In July 2014 the MPS introduced Missing Person Coordinators to support borough Missing Person Units. The co-ordinators analyse missing person reports to spot repeat patterns and will work with partners to find and tackle the core reasons the person keeps disappearing which may identify CSE concerns.

This new team also established closer links to the 122 children's care homes in London providing additional advice and guidance to care home staff about the new legislation and defined roles and responsibilities.

Awareness packages were developed and delivered to all officers and staff, whilst an external awareness package is being delivered to partners, including care and foster homes and NHS trusts.

The majority of media attention in response to the Rotherham report and Manchester CSE reports have focused on the involvement of gangs in CSE. The involvement of Organised Criminal Groups' (OCG's) and Street Gangs in CSE in Bromley is not really known. To date only 3 referrals have been made to MASE where there were concerns about a young person's involvement in gangs. The majority of CSE concerns in Bromley relate to one exploitative relationship. However it would be wrong to assume just because Bromley does not feature on the gangs matrix that Bromley's young people are not involved with or at risk of CSE through gangs.

The Bromley Gangs report of 2012, had as part of its implementation, sections around youth diversion, the need to identify young people at risk of violence and sexual exploitation. There was a delay in the report being actioned, but in 2013 the panel was set up and commenced work on implementing the report's recommendations.

The Panel in 2013 carried out most of the actions required in the report and the Panel has increased in size due to the various partners and agencies now involved. However the last part of the report concerning young people at risk and Diversion was the most difficult section to implement as no funding had been available to fund the MPS EGYV schools diversion despite a number of young females being identified as possibly at risk of CSE and several young men within the education system being identified as emerging gang members.

Whilst work around these young people has started the diversion funding remains outstanding and will be highlighted during the forthcoming Home Office Gangs Peer Review.

What needs to be improved is early recognition of those children and young people at risk of CSE and for Health and Schools to make more appropriate referrals, which will require further training and continued monitoring.

The MPS data standards for the recording of CSE's concerns were not being adhered to correctly which has now been addressed and it is recognised that correct recording of all CSE concerns is crucial to being able to quickly and correctly identify victims, suspects, locations, and links and trends.

The Effectiveness of early identification in Bromley

The 'Protocol for Safeguarding Children and Young People at Risk of or Experiencing Sexual Exploitation' is available on the BSCB website making it available to all professionals within Bromley. It clearly lays out the vulnerabilities and low, medium and high level risk indicators associated with CSE. It also contains the process of referral as well as other helpful information and useful strategies. Professionals are encouraged to consult and use the protocol as guidance in relation to CSE.

The CSC safeguarding referral form which is used to refer all safeguarding concerns to Children's Social Care has been modified to enable referrers to immediately alert Children's Services to concerns around CSE by ticking a tick box on the form.

Within Children's Services there is an assessment screening tool which also serves as an internal referral form and is used to refer cases of suspected or known CSE to the MASE Panel.

All agencies were able to confirm staff have completed or will very soon have access to single agency and multi-agency training around CSE aimed to raise awareness amongst staff and ensure they are alert to the CSE risk indicators, vulnerabilities and routes into CSE.

Kings College Hospital Foundation Trust has its own CSE risk assessment tool which appears to be contained within their Sexual Health Proforma. Oxleas NHS Foundation Trust also has its own CSE assessment tool developed from their previous tool and updated with 'Spotting the Signs'.

The Metropolitan Police have a detailed risk assessment process based on history checks, circumstances and CSE warning signs as identified on the MASE screening tool. The concerns are recorded by creating a CSE CRIS report and the MPS Sexual Offences Exploitation and Child Abuse Command's referral desk assess the CRIS report and categorise the concerns into one of 3 categories of risk. The category will determine the level of police investigation and intervention.

The CRIS reports are updated with any new or relevant information after every MASE or MAP meeting or when the Police receive new intelligence.

The effectiveness of safeguarding and support to children affected by CSE in Bromley

During the MASE meeting the Panel reviews significant developments taking place in existing cases of child sexual exploitation, local and national current trends and patterns, out of borough concerns, geographical hotspots, and missing children.

Where the young person is identified as being at risk or involved in CSE a Multi-Agency Planning (MAP) meeting is held. The MAP Panel membership is similar to that of the MASE Panel in that the same agencies are represented.

In addition to the designated MAP Panel members, all professionals who are working with the young person are required to attend the MAP meeting; therefore each meeting for each young person is made up of different professionals. The purpose of the meeting is to develop a multi-agency plan to prevent, protect and safeguard the young person from sexual exploitation and wherever possible prosecute known perpetrators.

Each professional/agency will have a role in supporting the young person through the CSE multi-agency plan in order to achieve the required outcomes listed above.

The participation and co-operation of all partner agencies is crucial in ensuring a robust multi-agency approach to responding to CSE concerns in order to achieve the best outcomes for children and young people affected by CSE. It has therefore been agreed that failure to prioritise

attendance to MAP and MASE meetings by professionals and partner agencies should be immediately escalated.

Commissioning arrangements

LB Bromley Children's Social Care currently commissions the services of Barnardo's who have developed expertise in working with children and young people at risk of or experiencing child sexual exploitation.

As a result of their focus on this and other associated areas of abuse, which has included extensive research programmes and reviews, they are nationally renowned for the experience, knowledge and skills they have acquired in relation to child sexual exploitation.

Barnardo's workers are recruited to have particular skills, knowledge and experience around engaging hard to reach young people who find it difficult to engage with professionals, sometimes not accepting themselves to be 'at risk' due to 'grooming'. The worker's ability to build and maintain positive professional relationships with young people who are victims of CSE is a key factor in influencing the effectiveness of any intervention.

The Barnardo's services initially commissioned by Bromley consisted of 6 month programmes of 1:1 sessions providing a therapeutic programme to the young people referred to them. The outcomes required were those listed above wherever relevant.

The implementation of the protocol led to increased demand on the Barnardo's worker as the number of referrals increased and she was expected to attend the MASE and MAP meetings, all safeguarding meetings held in respect of the young person, and participate in and contribute to training and briefings.

This led to a review of the existing contract with Barnardo's, and the new agreed contract with Barnardo's has a Barnardo's worker situated within the Teenage and Parental Support Services within Bromley Children's Social Care.

All the interventions provided by Barnardo's as part of a CSE multi-agency plan have resulted in greatly improved outcomes with the exception of one case where it is believed the victim has suffered psychological damage as result of the extreme sexual exploitation she experienced, however we are seeking to commission further intensive support to this young woman as she grows up.

Management Oversight of Casework

All cases where MAP meetings are held because the child or young person is thought to be at risk of or experiencing CSE will have an allocated social worker or assistant social worker. If the young person is already known to Children's Social Care the allocated social worker will incorporate the CSE work into the existing assessment, support and intervention plan.

It is understood by all professionals the CSE process must not operate in isolation from any other safeguarding processes, but should instead form part of a holistic programme of intervention to support and safeguard the young person.

Bromley Health Care school nurses liaise with Children's Social Care around children and young people who are subject to CIN/CP plans or are LAC or Leaving Care identifying areas of health need and delivering services, undertaking health checks and monitoring health plans. Any relevant information they hold is shared at MASE and MAP meetings and where appropriate information from MASE is shared with practitioners.

Oxleas NHS Foundation Trust staff discuss CP, CIN, LAC and Leaving Care cases in clinical supervision as well as attending safeguarding meetings. CAMHS who are part of the Trust have a specialist team dealing with Looked After Children. For a brief period a representative from CAMHS attended the MASE meetings there hasn't been any representation for approximately 1 year. This was followed up by the MASE chair and the local authority's CSE Strategic Lead and a representative was promised, however no CAMHS representative has attended the MASE or MAP meetings since then.

When young people known to Children Social Care are referred to Bromley Youth Support Services, the workers seek to support the young people by engaging them in a wide range of activities. The young people are also offered IAG 1:1 support. Bromley Youth Support Services is represented on both the MASE and MAP panels.

Working with those how are hard to reach or refusing statutory service provision

Accessibility is one of the key elements in reaching out to children who are sexually exploited or being groomed and Bromley MASE recognises that this needs to be done in ways that will encourage the young people to engage with trust.

When agreeing a multi-agency plan to support young people involved in CSE all protective factors, the young person, their family and the wider community are considered with a view to utilising them to prevent, protect, safeguard and build resilience in the young person.

Bromley endeavours to utilise the skills and experience of all involved professionals to engage with the young person identified to be at risk of CSE including non-statutory agencies. Experts in this field are Barnardo's who provide flexible and versatile methods of working with young people resulting in higher levels of engagement. Other agencies identified through the MAP meetings and used include Bypass Drug and Alcohol Services, Foundation for Life, a community based therapeutic service and on one occasion a hospital youth service volunteer as they were identified as the trusted adult. The MAP has also recognised that the trusted adult may be the best person through which to deliver Barnardo's support package and this has been done successfully.

If the perpetrator is known then the Police may have a surveillance role even if the young person is refusing to co-operate with a Police investigation.

The reluctance of victims of CSE to support a criminal investigation is still high, but Officers from the Sexual Exploitation Team are now reopening closed investigations at 6 months to see if the victim, having had the support from agencies through the MAP process, are willing to pursue a prosecution.

Effectiveness of disruption of perpetrator activity

One of the major difficulties that professionals face when working with children and young people at risk of or experiencing CSE is when they do not believe themselves to be at risk. Many have been 'groomed' to believe they are in a boyfriend/ girlfriend relationship' with the alleged perpetrators and feel protective towards them, others may have been threatened that they or their families will come to harm and others feel a sense of shame about their experiences.

Whatever the reason relatively few victims disclose the identities of their abusers. If the identity of the perpetrator is known to the Police the victims are unwilling to co-operate with the police investigation and give evidence against them. This is true even in the cases of those young people who have accessed and benefited from the MAP programmes of intervention.

The descriptions and identities of alleged perpetrators including pseudonyms, gang names, Facebook names etc. are carefully noted at MAP and MASE meetings by the Police enabling them to be recorded and checked against both hard and soft intelligence with a view to mapping and taking criminal action wherever possible.

Between January 2013 and October 2014, Bromley Police had 58 crime and non-crime reports flagged as CSE concerns where the offence occurred in the borough of Bromley whether or not the young person was a Bromley resident.

The review identified the fact that not all concerns were being correctly flagged and updated as required by the MPS data standards for the recording of CSE. This has now been addressed and in the future all concerns both crimes and non-crimes will be correctly recorded.

Conclusion

Much has been achieved locally over recent years by partner agencies working in collaboration. However, there is no room for complacency. The circumstances that create the opportunities for children to be sexually exploited are multi-faceted and continually changing. Some of this is linked to organised crime, the increase in incidences of peer on peer exploitation and young people's use of social media.

The BSCB and the MASE will continue to strengthen the local response on CSE by ensuring the coordination of this work is reviewed regularly and robust systems are in place to monitor to effectiveness of these arrangements. The BSCB will ultimately hold partner agencies to account regarding this area of safeguarding children work.

We are confident that Bromley's CSE procedures are effective once a child is identified as being at risk or involved in CSE. There is also a clear referral process to MASE. The MAP is well supported by agencies and a clear plan of support and intervention is put in place for each child that is focused to their individual needs.