

## Management of Child Exploitation (CE) Referrals– Derby City Early Help and Children’s Social Care

### CE PROCESS

**This guidance is for management of cases within Early Help and Children’s Social Care following completion of the Child Exploitation (CE) assessment.** This guidance is for internal use only; it should be read in conjunction with the Derby and Derbyshire Safeguarding Children Partnership Procedures. <https://derbyshirescp.trixonline.co.uk/> and forms part of the wider strategy and delivery plan to address child exploitation in Derby and Derbyshire, which is overseen and governed by the multi-agency Serious and Organised Crime and Exploitation (SOCEX) Partnership.

The child exploitation assessment is a professional analysis tool and is not for use directly with children or families. Any child who is at risk of or suffering any form of exploitation/harm outside the home should be treated as a victim of abuse, regardless of the circumstances of the case. This includes Child Sexual Exploitation (CSE) and Child Criminal Exploitation (CCE). For further guidance on the assessment see: <https://derbyshirescp.trixonline.co.uk/chapter/children-at-risk-of-exploitation-ce#assessment>

Following completion of the CE risk assessment, the level of CE risk will be confirmed and recorded at the relevant meeting (see below). This recorded risk will remain on file regardless of new information, until there is further multi-agency review meeting to formally agree the level with all relevant partners.

Plans to address exploitation and harm outside the home should be outcome focused and SMART, determining the appropriate interventions or referrals to specialist agencies where appropriate. Management of CE risks should be considered within the broader holistic needs and issues for the child/family and reviewed under one plan.

NB: Children 12 years or under and/or a child with Special Educational Needs and Disabilities (SEND) issues are more likely to be vulnerable and therefore, where concerns arise regarding risk of CE, initially the child should be recorded as Medium Risk; if after thorough assessment protective factors suggest the CE risk is low then this can be discussed between the relevant Early Help and CSC Team Managers and the record updated accordingly. The rationale for the level of risk agreed must be clearly recorded within the casefile.

Practice in all cases should be underpinned by the *Multi-agency Practice Principles for responding to child exploitation and extra-familial harm* <https://tce.researchinpractice.org.uk/>

Any place-based risk, high risk offender or vulnerable child can be referred for review and support tasking via the SOCEX partnership.

CE Risk	Case responsibility	Assessment	Planning	Focus of activity	Review & Timescales	Partnership Work	Recording
Low Risk	<p><b>Early Help CE Team</b> Child Practitioner</p> <p><i>Early Help CE team will only hold responsibility for low-risk cases where VCM has identified that there are Medium/High Vulnerabilities. Other low risk cases will be supported by existing agencies e.g. school</i></p>	<p>Early Help Assessment (EHA).</p> <p>Lead practitioner to update CE assessment before each TAF meeting, or sooner if there is a significant event.</p>	<p>TAF plan (informed by CE Assessment)</p>	<p>Consider risks, safeguarding with parents, create safety and disruption plan, direct work with child and family.</p>	<p>TAF meetings at intervals of no more than 12 weeks.</p>	<p>Consider involving: Crime Prevention (Youth Justice Service), Safe and Sound, Youth Alliance, Police, Education, Health, other voluntary agencies.</p>	<p>Update LCS - low risk CE</p> <p>Review CE assessment before each meeting and ensure LCS risk flag reflects current assessed risk level.</p> <p>Once work has been completed and/or low risk status is agreed as sustainable, remove LCS flag.</p>
	<p><b>Children In Care</b> Social Worker/Lead Practitioner</p>	<p>CE risks at this level to be monitored at allocated social worker level and practitioner meetings. Support can be obtained via the EH CE Team or YJS for specific support i.e. crime prevention work. Otherwise signposted to voluntary or universal services for low level support.</p>					<p>LCS CE Flag to be updated low risk. Flag to be closed once work has been completed and/or low risk is agreed as sustainable.</p>

CE Risk Level	Case responsibility	Assessment	Planning	Focus of activity	Review and Timeframes	Partnership Work	Recording
<b>Medium Risk</b>	<p><b>CIN</b> Can be either CSC (Social Worker), and/or Early Help (Child Practitioner) – to be agreed at VCM based on updated Single Assessment and CE risk assessment.</p> <p>Cases held at Early Help – reviews will be chaired by a Child Protection Manager (CPM).</p> <p>Cases held by CSC - Team Manager (TM) will chair reviews.</p>	<p><i>Consider strategy meeting to determine whether threshold for s47 enquiry is met – if so follow s47 procedure.</i></p> <p>Seek police updates and agree immediate safety plan.</p> <p>Complete Single Assessment (SA), Eco Map, chronology, initial CIN plan</p>	Create/ update CIN Plan on LCS CIN Pathway (irrespective of whether the case is managed by EH or CSC).	Consider risks, safeguarding with parents, create safety and disruption plan, direct work with child and family.	<p>Initial Planning Meeting (IPM) within 15 Working days.</p> <p>1<sup>st</sup> Review - 8 Weeks, and 4 monthly thereafter.</p> <p><i>Consider increased frequency of CIN reviews – to be determined at IPM</i></p>	<p>Consider involving, Crime Prevention (Youth Justice Service, EH team, Safe and Sound, Youth Alliance, Police, Education, Health, Community Safety, fire service, other voluntary agencies.</p> <p>Consider information sharing with SoCEX tactical meeting via email on p1</p>	<p>Follow LCS CIN pathway.</p> <p>Update LCS risk flag following initial planning/review meeting to reflect agreed risk level.</p> <p>For all subsequent reviews, the following should be provided to the chair 3 days before the review:</p> <ul style="list-style-type: none"> <li>• An updated CE risk assessment</li> <li>• Review report</li> <li>• Updated chronology and genogram or ecomap as necessary.</li> </ul>
<b>Medium Risk</b>	<b>Children In long term care</b> (CIC only) –	<i>Consider strategy meeting to determine</i>	Lead Practitioner to complete	Enhanced Care Planning	Initial CE meeting within 15	Home/ Carer, Police, and Education and any Keyworkers.	Prior to Initial meeting (submit to manager 3

	<p>Social Worker/ Lead Practitioner.</p>	<p><i>whether threshold for s47 enquiry is met – if so follow s47 procedure.</i></p> <p>If threshold is met for strategy discussion due to risk of significant harm, this must include police, education, health and home or foster carer at a minimum.</p> <p>Update Single Assessment</p>	<p>Single Assessment &amp; proposed CE plan prior to meeting.</p> <p>Manager to complete CLA - CRE Meeting with Review Outcomes &amp; Plan.</p>	<p>Meetings every 4-6 weeks held by social worker and team around the child to track the plan developed and work to the actions identified in the initial meeting. Children can move very quickly between the risk indicators and therefore there should be a regular review of the risk assessment and any action plan.</p>	<p>working days of strategy meeting or CE Assessment.</p> <p>Enhanced Care Planning meetings 4-6 Weekly.</p> <p>Manager to Review the CRE threshold using the form "CLA - CRE Meeting with Review Outcomes &amp; Plan" at least every 4 months.</p>	<p>days in advance) : CE risk assessment CE proposed plan.</p> <p>Manager should follow Initial CE Meeting agenda to record minutes of the meeting on the form CLA – CE Meeting with Review, Outcomes &amp; Plan.</p> <p>Manager to update/add CE tab with medium risk of harm.</p> <p>For reviews, 3 days prior to the meeting provide to the manager</p> <ul style="list-style-type: none"> <li>•Updated CE assessment</li> <li>•Review report (also goes to family/carers)</li> <li>•Updated chronology and genogram</li> <li>•Most recent plan.</li> </ul>
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CE Risk Level	Case responsibility	Assessment	Planning	Focus of activity	Review & Timeframes	Partnership Work	Recording
<b>High Risk</b>	<p>Social work teams – in specific circumstances may be co-worked with Early Help CE Teams; to be agreed via VCM.</p> <p>Child Exploitation Police Team to be included in professional groups</p>	<p>Strategy discussion within 24 hours, multi-agency group to confirm level of CE risk.</p> <p>Threshold discussion within 3 working days.</p> <p>Include Eco Map, Genogram, Chronology, child's updated plan, police updates, immediate safety plan. Update single assessment.</p>	<p>Meeting within 15 working days chaired by CPM.</p> <p>CiN or CP plan recorded within the appropriate pathway.</p> <p>Update plans at every review/core group meeting.</p>	<p>Consider risks, safeguarding with parents, create safety and disruption plan, direct work with child and family.</p> <p><i>If there are Place Based risks ensure they SOCEX are alerted via the email above and Community Safety, Licensing etc. are notified and support under the Safer Derby Strategy.</i></p>	<p>Initial Planning Meeting (IPM) or ICPC within 15 Working days.</p> <p>CIN - 1<sup>st</sup> Review - 8 Weeks, and 4 monthly thereafter.</p> <p><i>Consider increased frequency of CIN reviews – to be determined at IPM</i></p>	<p>TM to hold case discussion with CE TM/DHOS to discuss appropriate support options and referrals e.g. Safe and Sound, other voluntary agencies and confirm via VCM</p>	<p>Complete initial risk flag on LCS following strategy discussion – high risk CE.</p> <p>Update CE risk assessment before each review</p> <p>Update LCS risk flag following planning/review meetings, ensure flag reflects current agreed level of risk</p>



	<p><b>Children in long term care (CIC only) – Social Worker/ Lead Practitioner.</b></p>	<p>S47 strategy discussion within 48 working hours. Threshold discussion within 3 working days.</p>	<p>CPM to chair meetings within 15 days of threshold discussion and record any meetings under CLA - CE Meeting with Review Outcomes &amp; Plan”</p> <p>In preparation for the Initial review, the lead practitioner will complete:</p> <ul style="list-style-type: none"> <li>• An updated CE assessment and access the below reports of provide a single</li> </ul>	<p>Enhanced Care Planning meetings every 4-6 weeks by SW and team around the child to track the plan developed and work to the actions identified in the initial meeting. Children can move very quickly between the risk indicators and therefore there should be a regular review of the risk assessment</p>	<p>Initial CE meeting within 15 working days of any strategy meeting or CE Assessment.</p> <p>Enhanced Care Planning MTG 4-6 Weekly.</p> <p>CPM to Review the CE threshold using the form “CLA - CE Meeting with Review Outcomes &amp; Plan” at least every 4 months.</p>	<p>Home/ Carer, Police, and Education and any Keyworkers.</p>	<p>CPM to review the CE threshold using the form “CLA - CE Meeting with Review Outcomes &amp; Plan” at least every 4 months.</p> <p>The meeting record is held on LCS and reviews the progress of actions set at last meeting and ensure we are still holding at right threshold.</p> <p>Review meetings can be called at any time if there is a significant event, or it appears the threshold level may have changed. This can happen in discussion with team and CP Managers.</p> <p>*For reviews, the following should be provided, 3 days before the review to the CP Manager:</p>
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			<p>assessment update.</p> <ul style="list-style-type: none"><li>• ICPC report (where CP) with the agencies involved</li><li>• The Single Assessment (where CiN)</li><li>• A proposed Cin or CP plan.</li></ul>	<p>and any action plan.</p>			<ul style="list-style-type: none"><li>• An updated CE assessment</li><li>• Review report • Updated chronology, ecomap and genogram</li><li>• The most recent plan</li></ul>
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