Child MD Multi-Agency Learning Review Practitioner Briefing

BSCB has recently completed a multi-agency learning review regarding a teenage girl who was the victim of grooming and sexual exploitation by a lone male perpetrator for over four years. Multi-agency learning reviews are completed on cases that do not meet the SCR criteria, but where partners agree that there is likely to be learning from the case that will be applicable more widely. These reviews are not published and the details of the case included within the practitioner briefing will be limited.

Information gathering when children move into Blackpool

Child MD's abuser was instrumental in her moving into Blackpool from another area, as a means of forestalling agencies there acting to stop the abuse. At least three agencies in the other area, who were aware of the allegations of abuse that had already emerged, failed to transfer full information to their Blackpool counterparts.

While accountability for this clearly lies with the agencies transferring information out, it does raise the need for professional curiosity on the part of practitioners in Blackpool to ask children and families about their background and to ensure that they receive records. Seeking information from other areas or agencies should not be a one off event either. As new information emerges this should serve as a prompt to check gaps and triangulate new information.

Handling concerns about indecent images

Child MD sought help from her school after sending indecent images of herself to an online contact. Full advice for schools dealing with incidents of this nature is available here. In brief, the person who becomes aware of the incident should notify their Designated Safeguarding Lead (DSL) immediately. Images should **not** be viewed, copied or stored.

The DSL should notify the Police or CSC if any of the following risk factors are present: involvement of an adult or a significant age difference between involved parties, external coercion or blackmail, severe or extreme imagery, imagery involving sexual acts where anyone depicted is under 13, wide distribution of images, previous involvement in similar incidents, other vulnerabilities e.g. self-harm. If none are present the incident can probably be managed internally.

Maintaining a focus on risk factors

When practitioners in Blackpool first became aware of allegations that Child MD was being sexually abused, concerns in respect of her mum's alcohol use and the resulting neglect of Child MD also emerged. A police welfare check was correctly requested and this did not find any evidence of neglect. However, this resulted in the whole referral being closed down, without further work to explore the sexual abuse element.

These circumstances highlight the need to maintain focus on all evidenced risk factors - just because one is discounted doesn't mean that the others don't exist. The Risk Sensible model should be use at all stages of working with a child to identify high risk indicators and ensure that they are assessed and addressed.

Outcomes of referrals

The schools that made this referral were under the impression that Child MD was open to the Awaken team and therefore assumed that she was receiving interventions. Working Together requires children's social care to provide feedback to referrers and, while this is their responsibility to provide, referring agencies should ensure that they receive feedback on the outcomes of referrals and challenge any delays.

Had feedback been received about the reasons for closing this referral there may have been grounds to challenge the focus on neglect. The Resolving Professional Disagreements process should be used in these circumstances to challenge decision making. Agencies should evidence this challenge in their records.

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