Departmental Reported Progress on Child Sexual Exploitation (CSE)

There are some example on the tables below, and you can also read each of the Department’s full Progress Reports here:

* Education – [September 2015](https://www.education-ni.gov.uk/publications/progress-report-de-action-plan-tackle-child-sexual-exploitation),  [August 2016](https://www.education-ni.gov.uk/publications/progress-report-de-action-plan-tackle-child-sexual-exploitation-0)
* Health – [September 2015](https://www.health-ni.gov.uk/publications/hsc-marshall-implementation-plan-progress-report-period-1-april-2015-%E2%80%93-30-september), [July 2016](https://www.health-ni.gov.uk/publications/2nd-hsc-marshall-implementation-plan-progress-report-period-1-october-2015-30-june-2016)
* Justice – [October 2015](https://www.justice-ni.gov.uk/sites/default/files/publications/doj/cse-first-progress-report-october-2015_0.PDF), [June 2016.](https://www.justice-ni.gov.uk/sites/default/files/publications/justice/cse-second-progress-report-november15-june-16.pdf)

This document relate to our press release of 18 November 2016 which you can view on our website ([www.niccy.org/cse](http://www.niccy.org/cse)).

Some Inquiry recommendations are not addressed at all in progress reports e.g. ‘RQIA should consider re-introducing the involvement of young people as peer reviewers in inspections of children’s homes’ has not been addressed in the Health report.

Further to this, Health  lists the recommendations which the Department transferred to the Safeguarding Board (SBNI) noting that they will produce a separate report. The range of recommendations made by the Inquiry directly to SBNI are absent. A number of the transferred recommendations relate to data gathering and information sharing about CSE and it is notable that the 2016 independent review of SBNI observed that it does not have effective multi agency mechanisms for monitoring and reporting the scale of CSE.[[1]](#endnote-1)[ii]

The following table gives some examples of recommendations from the Inquiry, demonstrated progress by each department and the evidence NICCY would have liked to see reported.

The lack of attention to impact and outcomes means reports are largely descriptive of ongoing work or processes rather than documenting how changes are positively affecting operational matters and practice on the ground.

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| **Education** |  |  |
| **Inquiry Recommendation** | **Progress Report Information** | **Evidence needed** |
| Schools should ensure that Relationships and Sexuality Education (RSE) is delivered by the people with the skills and confidence to do so. | DE commissioned CCEA to carry out a review of RSE guidance.  CCEA has published revised CSE guidance. | How this guidance is making a difference  Recent inspection states “a majority of schools identified that the teachers lack confidence and/or are uncomfortable in delivering the sensitive aspects …” of RSE, such as addressing abuse, and require specific training on this.[[2]](#endnote-2)[iii]  DE must identify a range of sources that can provide evidence of the impact of the guidance. This could include, for example, DE asking ETI to report on how effectively RSE is being delivered in schools and to include feedback from children and young people and teachers as part of this; Child Protection Support Service for Schools or others being asked to carry out work to develop teaching on the child protection aspects of RSE. |
| Education Department must work with other departments to ensure there are appropriate safeguarding arrangements in all non statutory settings (including home education) | The Education Authority will consider this in broader procedures for Elective Home Education | Need to outline how this will be assessed or monitored as impacting on safeguarding practices and outcomes |
| **Health** |  |  |
| **Inquiry Recommendation** | **Progress Report Information** | **Evidence we need to see** |
| HSC Trusts should endeavor to provide stability by minimising the movement of both staff and children throughout residential and foster care setting | Reported as completed. DoH Progress Report contains ten pages of information. Detail is provided in relation to movement of staff but not children. | Data on placement moves is provided and a baseline against which progress can be monitored is established.  Evidence of young people’s experience of this, to include children’s experiences of placement stability. On-going work undertaken by HSCTs, RQIA or NGOs or be incorporated into planned audits and reviews.  The experience and views of carers and staff should also be represented. |
| The DHSSPS should lead the development of a regional strategy to prevent, identify, disrupt and tackle CSE. It should involve the DOJ and DE | Noted in the Department of Health’s first progress report as being due for consultation by June 2016 with final publication in June 2017.  The Department’s latest progress report makes reference to mapping work that has been done but provides no detail on whether a strategy will be consulted upon. | It is important to note that HMIC highlighted that a factor in inconsistent police response to missing children was that there  “is no overarching strategy in place for CSE and this is leading to different approaches being taken in different trust areas.”[[3]](#endnote-3)[iv] |
| DHSSPS should ensure that the revision of Circular HSS CC 3/96 (Revised), Sharing to Safeguard: Information Sharing about Individuals who may pose a Risk to Children, is accompanied by clear guidance to workers that will give them the confidence to act appropriately. | Noted in the first progress report as the Circular being revised and guidance for consultation in autumn 2015 to be published in March 2016. The latest progress report however, states the Circular will be replaced with guidance which will be consulted on in autumn 2016. | The Revision of HSS CC 3/96 has been on-going since 2009.  There are three aspects of this recommendation.  The Revision of the Circular, issuing of guidance and plan to evaluate confidence levels of practitioners when sharing information to protect children.  Consultation on guidance will complete part of one aspect of this recommendation. |
| **Justice** |  |  |
| **Inquiry Recommendation** | **Progress Report Information** | **Evidence we need to see** |
| Recommendation to strengthen the law to better protect children from CSE (for example, by ensuring protections from sexual offences extend to all children under 18 years and reviewing provisions for who is responsible for proving the age of a child when a sexual offence has been committed) | Has not yet resulted in concrete legislative proposals and no definitive timescale in which this could be expected is provided. | Concrete legislative proposals and definitive timescale in which this could be expected. |
| The Inquiry encourages PSNI to pursue its commitment to strengthening relationships with communities and young people as a priority in the context of austerity | Reported progress from DOJ is more detailed in terms of actions that are being carried out to address CSE e.g. use of a community engagement tracker, attendance and contribution to  key meetings and guidance documents (cross-agency guidelines on CSE, ‘Sex & the Law’ leaflet, developing a DVD called ‘False Freedom’ and resource pack to supply to all post primary schools in Northern Ireland, E-Safety package, called ‘Chat, Share, Think’ ), campaigns (SBNI’s campaign which targeted members of the public who potentially are in a position to identify CSE e.g. taxi drivers, hotel staff and off-license staff) and contributing to research as well as the PSNI having embarked on a number of transformational programmes with young people. | Each area listed must be accompanied with information about impact.  To include how different stakeholders such as the public and professionals are more confident to identify CSE and seek assistance for children.  For instance, increased information sharing and reporting of CSE or related concerns, including by victims, impact on young people’s attitude to police measured.  Evaluation could be developed through existing PSNI processes as well as the work of other agencies, such as CJI and Policing Board reviews and inspections and interagency activities.  The experience and views of young people as well as police officers and other professionals should be represented. |
| Awareness–raising about the dynamics of child abuse and CSE in particular should be available for all legal personnel and should be mandatory for all legal professionals dealing with child abuse cases. This should be made the responsibility of the PPS for its own legal staff, the Northern Ireland Bar for its staff and the Judicial Studies Board for Judges. | Public Prosecution Service, Northern Ireland Bar and Judicial Studies Board will progress training on CSE for all legal professionals | Clarity as to how the Department will assess uptake, quality of training and, of course, the impact of this on case management, the treatment of victims and witnesses and prosecution outcomes |
| **Cross Departmental** | **Progress Report Information** | **Evidence we need to see** |
| A number of interrelated Health and Justice recommendations, including considering a multi agency safeguarding hub model; providing joint training on guidance when children go missing; ensuring that return from missing interviews are effective and safeguarding evidence is collected | Actions have all been assessed as complete.  Departmental commentary on these highlights the restructure of PSNI Public Protection Units and social services and the revised 2016 Runaway and Missing from Home or Care Protocol in delivering these recommendations. | Recent HMIC inspection found the police response to missing children “not consistently good” noting that some of those at risk of CSE where assessed as being only at medium risk, that underlying issues of missing episodes were not addressed and that there was no consistent process to provide police with information from return interviews.[[4]](#endnote-4)[v] This raises significant questions about whether, as stated in the second progress report from the Department of Health, actions taken “now ensures both agencies [social services and police] have dedicated experienced personnel available at the front door to deal with all safeguarding matters including CSE”.[[5]](#endnote-5)[vi] |

1. [ii] Jay A. and Somers K. (2016) A Review of the Safeguarding Board for Northern Ireland. [↑](#endnote-ref-1)
2. **[iii] ETI (2016) Relationships and Sexuality Education in Primary and Special Schools: Report of an evaluation by Education and Training Inspectorate; pp7.** [↑](#endnote-ref-2)
3. [iv] HMIC (2016) PEEL: Police effectiveness: vulnerability, An inspection of the Police Service of Northern Ireland 1-5 February 2016; pp24. [↑](#endnote-ref-3)
4. [v] HMIC (2016) PEEL: Police effectiveness: vulnerability, An inspection of the Police Service of Northern Ireland, pp3. [↑](#endnote-ref-4)
5. [vi] DoH (2016) The 2nd Marshall Implementation Plan Progress Report 1st October 2015 to 30th June 2016, pp43. [↑](#endnote-ref-5)