



Solihull All Age Exploitation Reduction Multi-Agency Safeguarding Procedures



Contents

(Clicking on each heading will take you to the relevant section)

1. Introduction
 2. Definitions
 3. Contextual Safeguarding
 4. Trauma Informed Practice
 5. Strengths Based Approach
 6. Information Sharing, Recording & Consent
 - 6.1 Children and Young People
 - 6.2 Adults
 - 6.3 Recording
 - 6.4 West Midlands Police Intel Form
 7. Language Matters
 8. Mental Capacity
 9. Advocacy
 10. Identification
 - 10.1 Missing
 11. Screening
 - 11.1 Contextual Concerns
 12. Outcome of Screening for Children Under 18
 - 12.1 No Evidence of Significant Harm
 - 12.2 Evidence that the Child/Young Person is Being Groomed for Exploitation or Being Exploited Referral to MASH
 - 12.3 No Concerns of Grooming or Involvement in Exploitation from MASH
 - 12.4 Concerns of Grooming or Involvement in Exploitation
 13. Outcome of Screening for Adults Over 18
 - 13.1 No Evidence of Significant Harm
 - 13.2 Evidence of Significant Harm
 - 13.3 Concerns of Grooming or Involvement in Exploitation / Referral to Adult Care and Support
 - 13.4 No Concerns of Grooming or Involvement in Exploitation
 - 13.5 Concerns of Grooming or Involvement in Exploitation
 14. Multi-Agency Adult / Child Exploitation Meetings (MAACE)
 - 14.1 Attendees
 - 14.2 Prior to the Meeting
 - 14.2.a The Vulnerability Tracker
 - 14.3 The MAACE Contextual Safeguarding Framework Matrix
-

- 14.4** The Meeting
 - 14.4.a** For Those Under the Age of 18
 - 14.4.b** For Those Over the Age of 18
 - 15.** Following a MAACE Meeting – Support & Disruption Plan
 - 15.1** For the Individual
 - 15.2** For the Family
 - 15.3** For the Context
 - 15.3.a** Context – Peer Relations
 - 15.3.b** Context – Education Provision
 - 15.3.c** Context – Neighbourhoods
 - 15.3.d** Context – Online
 - 15.4** Disruption & Criminal Investigation
 - 15.4.a** The National Referral Mechanism (NRM)
 - 15.4.a.1** Duty to Notify
 - 16.** Stepping Down an Exploitation Case
 - 17.** Solihull Exploitation Panel (ShEP)
 - 18.** Contextual Safeguarding Assessments
 - 19.** For Adults Over the Age of 18: Assessment of Care and Support Needs
 - 19.1** Section 9 Assessment Under the Care Act 2014
 - 19.2** Section 11 Refusal of Assessment
 - 19.3** Human Rights Assessment
 - 19.4** Structured Partnership Approach
 - 19.5** Solihull Harm Reduction and Vulnerable Victims Forum
 - 19.6** Health’s Frequent Attendees Process
 - 19.7** Intimate Partner or Familial Relationships
 - 20.** Transition from Children’s Services to Adult Care and Support
 - 20.1** Transitional Safeguarding
 - 20.2** Multi-Agency Working
 - 20.3** SMBC Transitions Pathway
 - 20.4** Learning and Physical Disability Pathway
 - 20.5** Mental Health Pathway
 - 20.6** Exploitation Only Pathway
 - 20.7** Transitional MAACE Process
 - 21.** Dispute Resolution Process
 - 22.** Appendices
 - 23.** Glossary
-

1. Introduction

Solihull Together, Solihull Safeguarding Adults Board, Solihull Local Safeguarding Children Partnership, Safer Solihull, and partners in Solihull are committed to protecting children, young people, and adults from all types of exploitation. To support this they have developed the Borough's first [All Age Exploitation Reduction Strategy](#). It outlines the partnership approach we are taking and is aimed at people who are working to reduce exploitation in Solihull.

This document sets out the multi-agency safeguarding procedures to be followed by organisations when there are concerns about possible exploitation. Anyone who has identified concerns that an individual may be at risk of exploitation will find the pathways from the point of raising a concern with the safeguarding lead within their organisation useful. The referral pathways into Children's Services, Adult Care and Support services and the transitions process will be of more interest to those with a designated responsibility to safeguarding and directly supporting children, young people, and adults. Organisations must consider which parts of the procedures are relevant to them and embed them within their own procedures.

The procedures are intended to support good practice across all agencies within Solihull, and where appropriate should be considered in conjunction with the [Solihull Local Safeguarding Partnership Multi-Agency Procedures](#) and the [Multi-agency policy and procedures for the protection of adults with care and support needs in the West Midlands](#).

2. Definitions

The West Midlands (Metropolitan) Area Definition for Exploitation (all Age) is:

An individual or group takes advantage of an imbalance of power to coerce, control, manipulate or deceive a child, young person or adult and exploits them:

- a) through violence or the threat of violence, and/or
- b) for financial or other advantage of the perpetrator or facilitator and/or
- c) in exchange for something the victim needs or wants.

The victim may have been exploited even if the activity appears consensual and exploitation does not always involve physical contact; it can also occur through the use of technology.

Solihull recognises that exploitation is deliberate maltreatment and manipulation irrespective of their age, gender, ethnicity, background or ability and sexuality and comes in many forms including:

- Modern Slavery
- Human Trafficking
- Sexual Exploitation
- Criminal Exploitation

The following may involve a degree of exploitation of the victim; however they are not primarily based on an exploitative relationship, or already have statutory and well embedded procedures that can be followed:

- Radicalisation and extremism ([prevent procedures for children](#))
- [Domestic violence and abuse](#) ([forced marriage](#), [honour based violence](#) and [FGM](#) procedures for children)
- Sexual violence and abuse
- [Rogue trader, bogus callers](#) and [scammers](#)
- Position of Trust ([children's](#) procedures [adult](#) SMBC procedures)
- [Hate Crime](#)

Exploitation happens to adults as well as children and it is vitally important that strategies that consider how the risk of exploitation will be managed for adults as well as children are put in place. Perpetrators of exploitation are skilled and determined at identifying and exploiting vulnerability, and it is the vulnerability of victims that is the commonality. Exploitation does not stop on a person's 18th birthday, and if a child is experiencing exploitation, and is seen as a victim at the age of 17 then all agencies need to recognise that in all likelihood this young person will continue to be a victim and will continue to require support after their 18th birthday. This was particularly evident in a Safeguarding Adults Review (SAR) which was commissioned by Solihull Safeguarding Adults Board in May 2017 following the death of Rachel who was 20 years old. Rachel had previously been a victim of sexual abuse and had a history of mental health difficulties and self-harming behaviours. She was also a victim of sexual exploitation and trafficking from the age of 17 onwards. The recommendations from the SAR were a key driver for Solihull to develop policy, procedure and guidance for children and adults at risk of or experiencing exploitation. [Full Executive Summary - Rachel](#)

3. Contextual Safeguarding

Contextual Safeguarding is an approach to safeguarding that supports practitioners to recognise and respond to the harm people experience outside of the home. Traditional safeguarding processes have predominately focussed on the individual and their families/carers. The contextual safeguarding framework provides information, research and tools developed by the University of Bedfordshire Contextual Safeguarding Hub in partnership with a range of Local Authorities to support practitioners to consider and develop responses to assessing and working in

settings beyond the family home; peer groups, education settings, neighbourhoods and online.

4. Trauma Informed Practice

Support for individuals should be underpinned by a trauma informed approach to understand the impact and required responses to exploitation. An enhanced understanding of the impact of exploitation requires unpicking common misconceptions around a victim's ability to protect themselves from abuse and recognising the need for long-term support for victims of exploitation. Work in this area has also shaped the need for a tenacious approach to working with clients. Recognising factors which may mean that it is difficult for professionals to engage a victim or that their level of engagement may fluctuate. Professionals will need to be persistent in their attempts to build up trusting relationships over time and be prepared to work through periods of non-engagement.

5. Strengths Based Approach

Strengths-based practice is all about the relationship between those who are supported by services and those who provide that support. This means working in collaboration with the person to support them to develop solutions, enabling them to achieve the outcomes which are important to them. In a world of experts, they are the experts on what is important to them.

Focusing on strengths does not mean ignoring challenges and addressing these accordingly. Strengths-based approaches are not prescriptive; there is no one-size fits-all model. The strength-based approach requires both the practitioner and the person to focus upon their personal strengths and abilities.

The focus is not on what the person can't do, but on where their strengths lie and the support they have around them in their family and the community.

In strengths-based practice the individual is empowered to have as much choice and control as possible and encouraged to propose options and solutions to enable them to have the life they want.

This is particularly important when working with adults at risk of exploitation, in order to support them to regain control and enable long-term change.

6. Information Sharing, Recording & Consent

Information sharing and recording is key to delivering better and more efficient services that are coordinated around the needs of the individual. It is essential to enable early intervention and preventative work, for safeguarding, for promoting welfare and for wider public protection. Information sharing is a vital element in

improving outcomes for all. Nevertheless, it is important to understand that most people want to be confident that their personal information is kept safe and secure and that practitioners maintain their privacy, while sharing appropriate information to deliver better services.

6.1 Children and Young People

Children and young people are best supported and kept safe when professionals and agencies:

- Share information routinely, accurately, timely and in accordance with local protocols.
- Share intelligence about individual cases and wider patterns of risk.
- Share skills and expertise and actively learn together.
- Collaborate to ensure assessments are directly informed by and reflect the child/young person and family's needs, vulnerabilities, and strengths.
- Form a 'team around the child' to ensure support is well co-ordinated and holistic; working with parents/carers as safeguarding partners where possible.
- Manage the number of different professionals that a child/young person and their family have to engage with.

All professionals should ensure that they are familiar with [local information sharing protocols](#) and consult with their manager and/or agency safeguarding leads where there are concerns about a child's safety.

6.2 Adults

Where there are concerns that an adult is being exploited, all professionals need to share information appropriately, in a timely way, and with primary regard to the interests of the individual. "Partner organisations will have information about individuals who may be at risk from abuse and may be asked to share this where appropriate, with due regard to confidentiality and information sharing protocols". [West Midlands Multi-Agency Policy and Procedures](#) (para 2.7).

"Wherever it is safe and possible to do so, consent from the adult to share their information should always be gained. However, the Data Protection Act 2018 does allow for information to be shared without consent if there is a substantial public interest – this includes adult safeguarding situations.

Consent:

It is essential to fully consider whether the adult is capable of giving informed consent when making a referral to Adult Social Care or other agencies.

Key in deciding whether to refer on without consent will be if gaining consent would put the adult or others at further risk, such as situations where:

- there is a risk or harm to the wellbeing and safety of the adult or others,
- other adults or children could be at risk from the person causing harm,
- it is necessary to prevent crime or if a crime may have been committed,
- the person lacks capacity to consent.

Disclosure without consent needs to be justifiable and the reasons recorded by professionals in each case. If any person is unsure whether to report, they should contact their Safeguarding Lead or relevant Local Authority for advice.

6.3 Recording

Good record-keeping is an essential part of the accountability of organisations to those who use their services. Maintaining proper records is vital to individuals' care and safety. If records are inaccurate, future decisions may be wrong and harm may be caused to the individual. Where an allegation of abuse is made all agencies have a responsibility to keep clear and accurate records. It is fundamental to ensure that evidence is protected and to show what action has been taken and what decisions have been made and why.

6.4 West Midlands Police Intel Form

The effective identification, recording and sharing of information in relation to cases of exploitation is crucial to the successful disruption and prosecution of perpetrators. The West Midlands Police Intel Form is an important tool for agencies to record any information, no matter how small, that may be important and relevant for the police to analyse and build intelligence. Whether a victim or not is identified, if there is information that suggests exploitation may be occurring it is important to share this information with the police. The form and information on completing it can be found [here](#).

7. Language Matters

If professionals do not recognise the constrained circumstances within which victims make 'choices', they will see them as being 'in control' and not recognise their need for intervention. This can lead to judgements about the victim (for example 'they could have done otherwise') and the use of blaming language.

The language which is used in the context of exploitation is extremely significant and it is important that anyone working with victims of criminal and sexual exploitation

understands how best to record and phrase concerns and the impact that a poor use of language can have on victims.

Professionals should refrain from using language which in any way apports blame towards victims of abuse. Phrases such as “provocative”, “making lifestyle choices” and “refusing offers of support” fail to take into account the extent to which a person’s ability to make safe choices has been affected by the abuse that they have experienced.

Practitioners from all agencies must also understand that recording may be admissible as evidence during the court process. Practitioners need to consider the impact on victims of such recording being disclosed at court not just on the person themselves but also the impact that this has on the likelihood of securing a criminal conviction. For more information see [Language Matters](#) – Changing the ways professional discuss and record their work with exploitation.

8. Mental Capacity

The Mental Capacity Act 2005 requires an assumption that an adult (aged 16 or over) has full legal capacity to make decisions unless it can be shown that they lack capacity to make a decision for themselves at the time the decision needs to be made. Individuals must be given all appropriate help and support to enable them to make their own decisions or to maximise their participation in any decision-making process. Unwise decisions do not necessarily indicate lack of capacity. Any decision made, or action taken, on behalf of someone who lacks the capacity to make the decision or act for themselves must be made in their best interests.


Professionals and practitioners face the challenge of balancing the promotion of the rights and needs of the young person or adult which include their right to a private life, with the need to support the individual to manage and reduce their risk of harm. Young People and Adults should be supported to make their own decisions wherever possible, however in cases where there are questions about decision-making and risk of harm, assessment of the individual’s mental capacity to make decisions about their safety is key. *Please note, sexual acts with an adult who lacks the mental capacity to consent are sexual assault and are a criminal offence under Sexual Offences Act 2003.*

9. Advocacy

It is essential that there is meaningful involvement of the child, young person or adult in decision making, planning and evaluation of any intervention in their lives. Where someone has substantial difficulties in being involved in the safeguarding process, the local authority will look to see if there is a ‘suitable person’ – for example, an informal

carer or relative who is willing and able to represent them. This person must be able to understand the children/adult safeguarding process, so they can support and represent their relative/friend and help their involvement in the processes. They must not voice or express their own opinions. It is not sufficient for the person to know the adult well; the role is to actively support their participation in the process.

If there is no 'suitable person' then the local authority has a duty to arrange for an independent advocate. Sometimes having a relative or friend to act as the advocate is difficult, for example, perhaps because the child /adult does not wish to discuss the nature of the abuse with them, then the local authority can help and provide an independent advocate.



**I am supported
to participate
and be involved**

Even if the child/adult has the ability to understand the safeguarding process, these situations can be distressing and difficult and safeguarding meetings can be complex and daunting to people who would not normally experience them, advocacy can help people to be involved and in control. Advocacy services help people to:

- access information and services
- be involved in decisions about their lives
- explore choices and options
- defend and promote their rights and responsibilities.

There are also times when an independent advocate should be provided even where the child/adult's family or others are involved. These are:

- when it is suspected that the family member or other person is causing the harm.
- where there is a disagreement, relating to the individual, between the local authority and the suitable person whose role it would be to facilitate the individual's involvement, and the local authority and the suitable person agree that the involvement of an independent advocate would be beneficial to the individual.

The advocate cannot be someone who is already providing care and treatment in a professional capacity or on a paid basis (regardless of who employs or pays them). That means it cannot be, for example, a GP, or a nurse, a key worker or a care and support worker involved in their care or support.

For Children:

NYAS advocacy service are commissioned to provide advocacy for young people working with Children's Services (including MAACE meetings) A referral can be

made via their website www.nyas.net . There is also a free phone helpline that is open Monday- Friday from 8am-8pm for young people, carers, and Children's Social care to make referrals: 0808 808 1001.

If a child or young person is separated from their country or family Barnardo's provide a Child Trafficking Advocacy Service that can be contacted 24 hours a day contact 0800 043 4303 / complete a referral (appendix 2) form and send to trafficking.referrals@bypmk.cjism.net

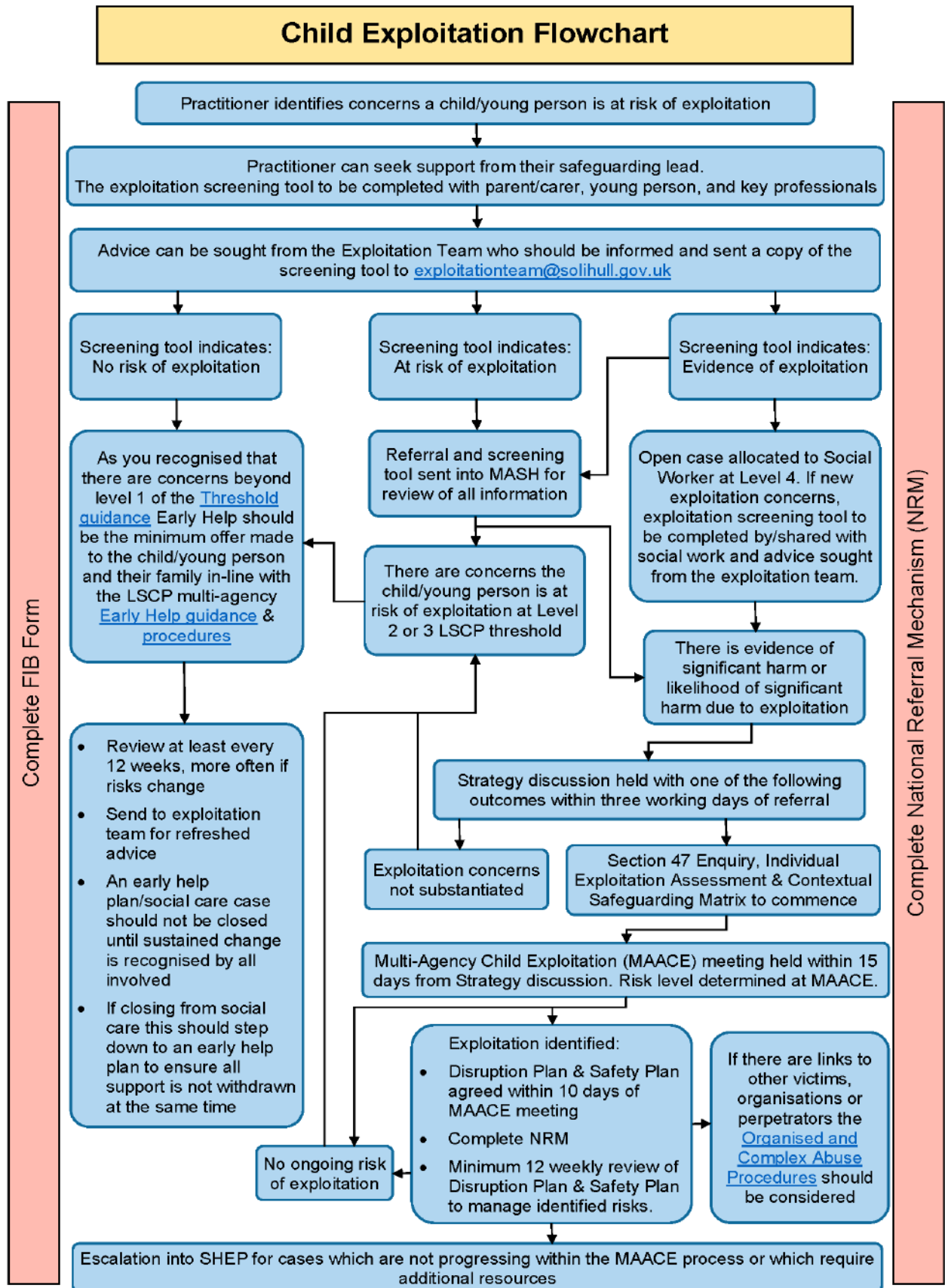
For Adults:

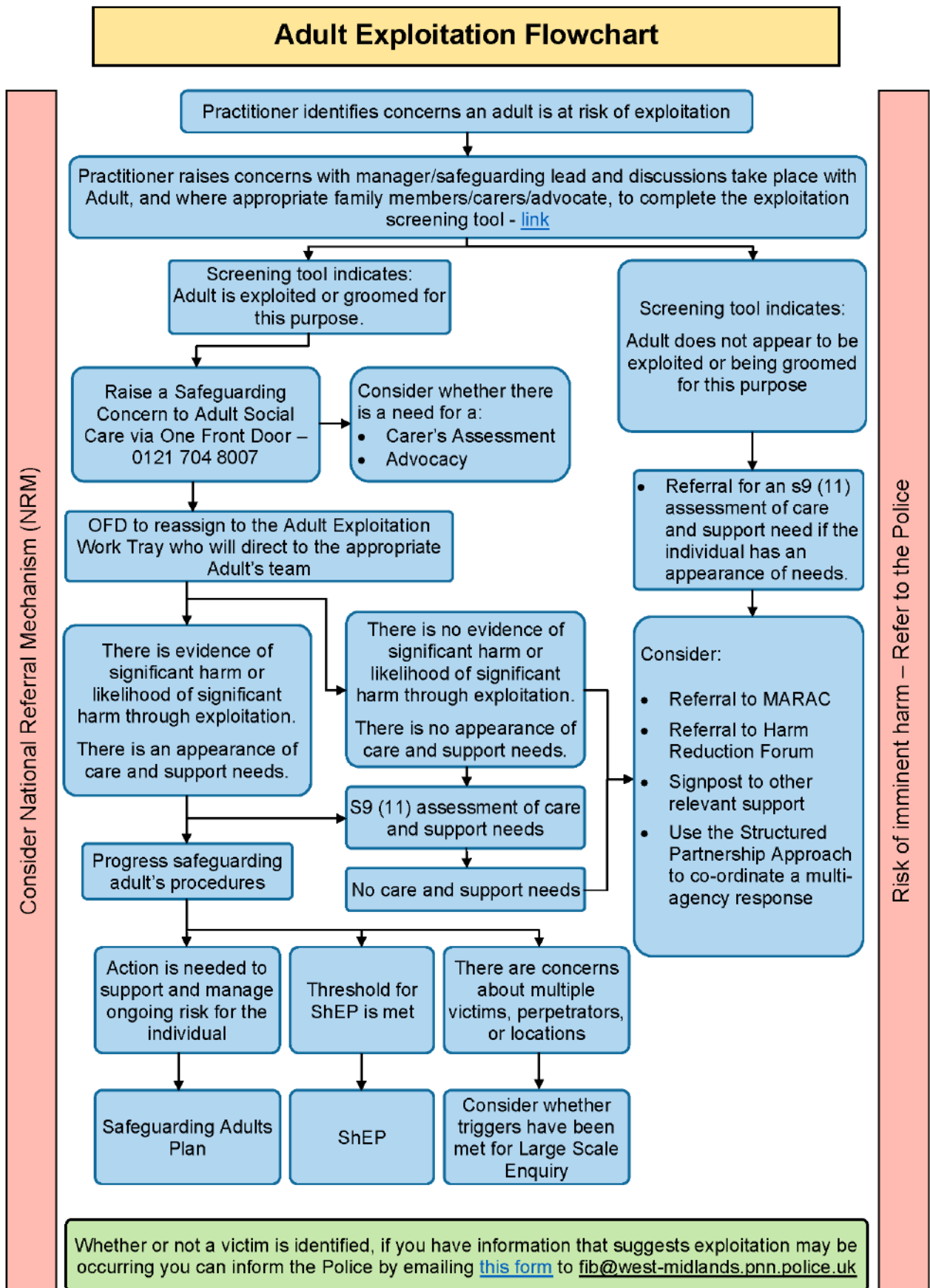
Solihull Action through Advocacy Referral (SAAtA) (appendix 3) – SAAtA can support individuals with community advocacy, support during a care act assessment, or mental capacity assessment and best interests decisions

<https://www.solihullfirstadvocacy.com/referrals>

10. Identification

Pathway for Under 18





All practitioners should be aware that abuse; including exploitation, neglect and safeguarding issues are rarely stand-alone events and cannot be covered by one definition or set of procedures. In most cases, multiple issues will overlap with one another; therefore, practitioners should be vigilant and use all multi-agency children's or adult's procedures as appropriate.

Professionals can find exploitation difficult to identify and respond to. Few victims of exploitation directly report their experiences of abuse. There can be many different reasons for these low levels of verbal disclosure by victims, including:

- not realising that what they are experiencing is abusive
- emotional ties or loyalty to the perpetrator, particularly if they believe they have some kind of relationship with the perpetrator or have been groomed into the abuse
- feelings of guilt or shame, or feeling in some way complicit in the abuse
- feeling trapped, or being threatened or blackmailed
- not knowing where to go for help
- lack of confidence in services' ability to affect positive change (often due to prior negative experiences)
- fear of being judged or not being believed
- not wanting to lose what they are gaining (money, drugs/alcohol, perceived receipt of love, affection, protection, etc) as part of the abuse
- fear of being charged with committing a crime.

Whilst some victims may think they have or are making their own "choices" it is critical for professionals to recognise that they are doing so within the context of limited alternative options. Such 'choices' are better understood as 'constrained choices' or 'survival strategies' (a way of meeting needs when other means are not available) and do not make the nature of the act any less abusive. Professionals and others supporting children, young people and adults should look at whether coercion and control is a factor by considering whether the individual is:

- Being groomed into exploitation and abuse by adults/other children.
- Experiencing poverty and therefore being enticed into exploitation.
- Influenced by the 'normalisation of physical and sexual violence' as projected through violent films or online gaming /pornography and/or through peer group patterns that accept violence as part of everyday life.
- Exploitation, physical and sexual violence and assaults that are or have been overlooked or ignored by a culture of 'wilful ignorance', where professionals or others in contact with those who have experienced exploitation turn away from the truth of what is happening and fail to respond.

As a professional working with children, young people, and adults you may have opportunities to identify issues early so it is important to familiarise yourself with possible indicators. If you feel that an individual is being exploited discuss your concerns with your safeguarding lead/exploitation lead. For further information on signs and indicators, for children, please see [Signs and Indicators](#) and for adults [Signs and Indicators](#) (section 3.4.11).

It requires knowledge, skills, and professional curiosity to explore the personal circumstances of individual children/young people/adults to ensure that the signs, symptoms and lived experiences are interpreted correctly and appropriate support is given.

10.1 Missing

Going missing may be an indicator of exploitation.

West Midlands Police define a person as missing if their whereabouts cannot be established and where the circumstances are out of character or the person may be subject of crime or at risk of harm to themselves or someone else.

A person may also be classed as absent if they are not at a place where they are expected or required to be and there is no apparent risk.

There are several signs that may indicate that an individual may be subject to exploitation; persistently going missing from school or home and / or being found out-of-area is a significant indicator.

An adult should report a person missing as soon as there are concerns.

West Midlands Police will share with Solihull Metropolitan Borough Council details of children and adults who have been reported missing and when they have returned or been found.

Missing is important intelligence and an indicator of exploitation, when an adult or child goes missing, these episodes must be factored into any assessments and planning with the individual.

For children, there are specific actions to be taken when a child is reported missing these can be found in the regional [children missing from home, care & education procedures](#) and [Solihull local missing procedures](#).

11. Screening

If you suspect that an individual is being groomed or is a victim of exploitation, discuss your concerns with the safeguarding lead within your organisation and complete an exploitation screening tool.

[All Age Exploitation Screening Tool](#) [All Age Exploitation Screening Tool Guidance](#)

For young people up to the age of 25 you can seek support from & should ensure that a copy of your completed screening tool is securely shared with the Exploitation Team exploitationteam@solihull.gov.uk Telephone: 0121 709 7011

Ideally both the individual and where appropriate the family / carer should be involved in discussions to help with the completion of the screening tool, as this should identify areas of strength as well as risks and concerns. Professionals need to exercise their own judgement when completing the tool. This includes capturing concerns about which they have some evidence and concerns based on 'their gut feeling'.

11.1 Contextual Concerns

If a professional is concerned about a peer group or specific neighbourhood rather than an individual person, they should also discuss these with their safeguarding lead and seek advice from SMBC Exploitation Team. A [West Midlands Police Intel Form](#) (see section 6.4) may be required to be completed and this may also lead to the requirement of screening tools to be completed too.

12. Outcome of Screening for Children Under 18

12.1 No Evidence of Significant Harm

If a professional has decided to complete an exploitation screening tool, they have recognised that there may be a need for intervention that is beyond level 1 of the [Threshold guidance](#) and therefore screening should result in the very least an offer of early help being made to the child, young person and their family, in-line with the LSCP multi-agency [Early Help guidance](#) & [procedures](#) if there is no evidence that the child or young person are being groomed for exploitation or exploited.

A copy of the completed screening tool should always be sent securely to the Exploitation Team exploitationteam@solihull.gov.uk

12.2 Evidence that the Child/Young Person is Being Groomed for Exploitation or Being Exploited Referral to MASH

If once completed the practitioner's professional opinion is that there is evidence that the child/young person is being groomed for exploitation or being exploited, then a [referral](#) should be made to Children's Services and a copy of the screening tool should be attached.

The referral will be received by a screening and referral officer who will check all the information is present and either create a record for a child/young person who is not known to children's services or add to an existing record if the child/young person has/is known to children's services. A Children Service Manager will review the information available at this point to decide what level of threshold the information indicates:

12.3 No Concerns of Grooming or Involvement in Exploitation from MASH

If the manager feels that the information suggests that significant harm is not occurring or likely to occur at this point they may pass the information to Children's Social Care Family Support Teams for a Threshold level 3 response, or provide feedback to the referrer as to why threshold has not been met. The referrer should then make an offer of Early Help to the child/ young person and family, as outlined above, or if the professional disagrees with the decision made, they should discuss this further with Children's Services and if necessary use the [Dispute Resolution/ Escalation Procedures](#).

12.4 Concerns of Grooming or Involvement in Exploitation from MASH

If the Social Care Manager decides that there is enough information to suggest that Significant Harm is occurring or may occur, because the child is being groomed for exploitation or exploited, the information currently gained will be shared with agencies represented within the Multi-Agency Safeguarding Hub (MASH) and a Strategy Discussion will be held.

If the strategy discussion reaches an agreement that significant harm is not occurring or likely to occur, then the threshold level 2 or 3 pathways outlined above are followed.

If the Strategy discussion reaches an agreement that significant harm is occurring or likely to occur through grooming for exploitation or being exploited, then a social worker will be allocated and an [individual exploitation assessment](#) and the

[Contextual Safeguarding Framework](#) will be commenced. A Multi-Agency Child Exploitation Meeting will be arranged within 15 days of the strategy discussion.

If the child/young person is linked to other victims, organisation or perpetrators that there are concerns about, the [Organised and Complex Abuse procedures](#) should now be considered.

13. Outcome of Screening for Adults Over 18

13.1 No Evidence of Significant Harm

If at this stage after having completed the screening tool there is no evidence of significant harm or likelihood of significant harm, the options are:

- To make a referral to Adult Care and Support for an assessment of care and support needs if the individual has an appearance of needs. (See section 19)
- Use the Structured Partnership Approach to coordinate a multi-agency response
- If there are concerns about anti-social behaviour, repeat calls to emergency services or hate crime a referral to the Harm Reduction Forum should be considered (See section 19.5)
- To utilise your organisations internal procedures such as UHB - Frequent Attendees Multi-Disciplinary Case Conference (See section 19.6)
- If there are concerns about domestic abuse, a [DASH risk assessment](#) should be completed to identify whether a Multi-Agency Risk Assessment Conference (MARAC) referral is required (See section 19.7)
- To signpost to other relevant support or community organisations.

13.2 Evidence of Significant Harm

If the screening tool indicates the adult is being exploited, a safeguarding concern must be raised with the Local Authority. Prior to raising the safeguarding concern, it is essential to fully consider whether the adult is capable of giving informed consent when making a referral to Adult Social Care or another agency.

13.3 Concerns of Grooming or Involvement in Exploitation / Referral to Adult Care and Support

Where there are concerns about exploitation of an adult, the screening tool should be completed and included with a referral to One Front Door (OFD). Practitioners should ensure that all relevant information is included in the referral (this may require an intelligence form to be attached too) OFD will collate and consider all information

available (see process flow chart above) and may undertake some further information gathering to consider the referral.

At each stage of the process it is important to remember that if there is a risk of imminent harm, the police must be contacted. National Referral Mechanism (NRM) must also be kept under review and made where appropriate (see section 15.4a).

13.4 No Concerns of Grooming or Involvement in Exploitation

When the process of gathering information is complete, if an adult is not deemed to be being groomed for or involved in exploitation, professionals may need to consider if there are any unmet needs that can be addressed through consideration of the options set out in section 13.1.

13.5 Concerns of Grooming or Involvement in Exploitation

Where the Care Act s42 duty is met, a Safeguarding Enquiry should be initiated ([Adult Safeguarding: Multi-agency policy and procedures for the protection of adults with care and support needs in the West Midlands](#)). The Safeguarding procedures will be initiated by the individual allocated social worker or by the most appropriate Adult Social Care Community Team.

Local authorities may also choose to undertake safeguarding enquiries for people where there is not a section 42 enquiry duty, if the local authority believes it is proportionate to do so, and will enable the local authority to promote the person's wellbeing and support a preventative agenda.

These enquiries should follow the Multi-Agency Adult and Child Exploitation (MAACE) process below.

If the individual is linked to other victims, organisation, or perpetrators that there are concerns about, the Large-Scale Enquiry procedures should now be considered.

14. Multi-Agency Adult / Child Exploitation Meetings (MAACE)

A MAACE meeting should enable practitioners to work with the child, young person or adult and their family/carers to identify the strengths and areas of concern and agree a plan of what needs to happen.

- The initial MAACE meeting should be organised within 15 working days of the referral or for adults, when the decision a s42 enquiry is required.

- Thereafter they should be held no longer than every 12 weeks until the risks have reduced or is no longer required.
- They should be chaired by a Children’s Independent Chair/ Adult Social Care Team Manager.

14.1 Attendees

- Child / young person / adult*
- Family/carer/advocate
- A member of the exploitation team
- Education if appropriate
- Health services (GP’s should always be invited and informed of MAACE meetings)
- Any other relevant person if appropriate (e.g. fostering link worker, residential key worker, voluntary worker)
- The referrer, if a professional
- Police
- Social Worker
- Probation/YOS (if relevant)

No decision about
me is made
without me

It should be remembered that the number of professionals a child/young person/adult and their family are expected to engage with should be kept to a minimal.

*Children/young people/adults/family/carers will be invited to MAACE meetings; it may be necessary for professionals to hold part of the meeting separately where appropriate; however, a decision will be made on a case by case basis depending on the circumstances of each case. It may be appropriate to hold a more strengths based meeting with the child/young person/adult and family empowered to take a lead in deciding who attends before a professionals meeting where it may be necessary if there is a confidential police investigation underway, surveillance or concerns about the parents or carers that the child/young person/adult and their parents/family/carers do not attend. In most cases parents should be considered as key safeguarding partners.

14.2 Prior to the Meeting

- The Solihull Vulnerability Tracker (template) should be completed within 5 days of the concern being raised
 - For Children this will be completed by the exploitation team
 - For Adults it will be completed by the professional raising the concern and emailed to: adultexploitation@solihull.gov.uk (for further information about this see section 15.4b)

- The individual, family/carers should be supported to start to fill out the [Contextual Safeguarding Framework](#).
- Professionals should also complete the [Contextual Safeguarding Framework](#) prior to the MAACE meeting. These should also be submitted by agencies involved with the child/ young person/adult that are not attending the meeting

14.2.a The Vulnerability Tracker

The Vulnerability Tracker documents and scores [children](#) and [adults](#) who are being exploited through criminal exploitation, sexual exploitation, home invasion and modern slavery. This creates a single dataset which police forces and partners can use to inform safeguarding response, and also better understand their strategic picture of vulnerability. At present the tracker will only hold information of those individuals who are open to either Children's or Adult's Services.

This visual tool will highlight themes/trends and patterns over the period of a year, to analyse if the overall risks within the local area have reduced/increased or if there has been a shift in the themes/trends. The data will also be used to inform resources including commissioning of services for individuals who are being exploited and in targeting specific areas and locations of concern.

Where it is identified that an individual is being exploited, the Vulnerability Tracker template must be completed by the SMBC Exploitation and Missing Team for those under 18 and for those over 18 by the allocated worker. The information within the template will then be transferred by the Adult Exploitation Reduction Lead / Exploitation and Missing Team (as appropriate) to the Vulnerability Tracker during weekly meetings between Adult Care and Support, Children's Services, the Police and Health.

Those who have remained on the Vulnerability Tracker for a significant period as high risk will be discussed with a view to being taken into ShEP for discussion.

14.3 The MAACE Contextual Safeguarding Framework Matrix

This Matrix uses a contextual safeguarding approach which will help to identify risk factors outside of an individual's home. Professionals are then able to work together with the individual and partner agencies to reduce the risks in the identified domains.

The Matrix is separated into 5 domains:

1. The individual
2. Family / home
3. Peer groups / associates
4. Education / employment

5. Neighbourhood community

Please use the assessment framework to assist you in considering each domain.

14.4 The Meeting

[Link to agenda](#)

The primary focus of the meeting should be to safeguard the child / young person / adult. This will be assisted by:

- Identifying the strengths, views, wishes and feelings of the child / young person / adult & family/carer including the positive things they enjoy.
- Identifying any worries or concerns for the child / young person /adult and family and things they would like to change.
- Establishing the nature of concerns that professionals have by sharing and clarifying information to inform.
 - The completion of the contextual safeguarding framework document.
 - The completion of the individual exploitation assessment
 - To develop an outline of an exploitation support & disruption plan.

The purpose of the meeting should be to:

- Complete the [Contextual Safeguarding Framework](#); sharing and clarify information that will help inform the [exploitation social work assessment](#) and start the development of a multi-agency safeguarding plan
- Establish exact nature of concerns and the individual's needs
- Establish risk for any other adult or child
- Share information pertaining to a suspected perpetrator(s) with police, i.e. car registration, nickname/ alias, descriptions, tattoos, premises/locations etc.; (these should also be submitted on an [Intel form](#))
- Consider the disruption and prosecution of perpetrators. Is a referral to ShEP required – (see Section 18).
- Consider a referral using the [National Referral Mechanism](#) in cases where someone may have been trafficked- recruitment, transportation, transfer, harbouring or received- for exploitation
- All MAACE meetings must be minuted.
- The MAACE [Contextual Safeguarding Framework](#) should be used to agree and develop a support & disruption plan.
- The plan must be reviewed and updated at each subsequent meeting on the same document.

14.4.a For Those Under the Age of 18

Following the MAACE meeting the child/young person, parents/ carers & identified multi-agency professionals will meet within 10 days of the MAACE meeting to further develop the exploitation support & disruption plan.

Children and young people may already be involved in child protection or children in care processes or may become involved in these processes in relation to the Exploitation. In these circumstances the Conference Chair or their Independent Reviewing Officer must be kept informed of any concerns relating to exploitation or any other form of suspected abuse. The outline of the support & disruption plan should be worked upon through the multi-agency core group and aligned to the child/young person's child protection or care plan to prevent the duplication of processes and to ensure the complexity of multiple and overlapping issues are fully considered at all times to safeguard and protect the child/young person.

14.4.b For Those Over the Age of 18

Following a MAACE meeting a safeguarding plan must be developed and actioned in line with the West Midlands Safeguarding procedures.

15. Following a MAACE Meeting – Support & Disruption Plan

The support & disruption plans outlined during the MAACE meetings will need to be further developed. Agreed actions should be driven to achieve positive outcomes and a support network promoting positive relationships. There will be a need to identify the specific roles of those involved and promote the ownership of the person responsible for each action, specifically identifying what is required and when it should happen. It should be identified from the start what may be experienced if the outcome is achieved to support the gathering of evidence to understand whether progress is being made; for this reason, the plan should be reviewed at least every 12 weeks. The plan should consider the following areas:

15.1 For the Individual

There should be a strengths and well-being focus for any actions for the individuals who are being exploited. This should build on positive things in their lives or that they are interested in developing. It is crucial to work with them in a way that is built on trust and respect and empowers them to have agency within their own lives. The perpetrators of exploitation are asserting enough control on the victims, they do not need services and organisations that should be supporting & helping them to do the

same. They will need the investment of time and positive regard to help them process information and feelings about what is happening to them and this will involve establishing a sense of safety and the recognition of physiological arousal caused through trauma.

15.2 For the Family

Many families will not know about and may not even have heard of exploitation, the likelihood is by the time services become involved the family relationships will be strained because of the drastic change in their loved one's behaviours. All family members, including siblings, will need their own needs assessed to ensure they understand what exploitation is and that the grooming process means that their loved one has been purposefully targeted and befriended for the purpose of the perpetrator who will be coercing and controlling their loved one and inflicting emotional/ physical and/or sexual abuse. This is very difficult for families to hear and they will need support to process and manage the information they receive. However, if this is done with sensitivity & support, they can become invaluable safeguarding partners, as they are there 24 -7 for indefinite time, unlike any services. Professionals should do everything they can to support parents and carers; helping them to understand their loved one's behaviours, in many occasions, will be in response to trauma or instruction from the perpetrators rather than personally generated towards their family. All siblings should receive their own assessment and support plan, as they will be individually impacted by the changes within the household and are at risk of being targeted either directly or by association of their sibling (for example the perceived "status" of their sibling in a gang/peer group may mean the sibling is afforded that status and may be targeted too, even if they are not directly involved themselves).

There may be some occasions where family members, parents/ carers are themselves targeted or involved in exploitative activities, and professionals will need to be vigilant to these possibilities and look to expand their assessments and responses accordingly. This may mean assessing the parent/ carer as a victim too or following other safeguarding/ [child protection procedures](#) to protect the victim.

15.3 For the Context

Exploitation, in the majority of cases, is from outside of the family environment. These extra-familial threats might arise at school/ other educational establishments, from within peer groups, or more widely from within the wider community and/or online. These threats can take a variety of different forms and children can be vulnerable to multiple threats, i.e. just because someone appears to be a victim of criminal exploitation does not mean they will not also be a victim of sexual exploitation too or vice-versa.

15.3.a Context – Peer Relations

Given the fluidity of people's relationships, and the varying contexts in which they form friendships, it is important to consider the various ways that peers can be identified. The transition from childhood to adolescence engenders changes in the individual, social context, and social norms that serve to elevate the importance of peers. This growing importance of peers brings an increase in the complexity of the peer system. New types of relationships emerge and are influenced by things like reputation-based crowds or a broader youth culture. Strong peer attachments can enhance a person's wellbeing while problems in peer relationships, can have significant psychological, physical, academic, and social-emotional consequences for both victims and perpetrators. It is therefore important that any assessment for exploitation explores peer relations. This exploration may identify a need for a more in-depth peer group assessment to explore:

- The dynamics of peer groups – and the relationships between those who act as leaders and followers
- The nature of relationships within groups – the strength of association, loyalty and how the relationships came to be
- The role of the peer group in influencing different types of behaviour displayed by individuals within the group
- The relationship between the group under assessments and the contexts

15.3.b Context – Education Provision

Education establishments have been identified as sites in which many people can experience and/or be safeguarded from abuse and violence. From experiences of sexual harassment and sexual violence through to physical assaults, relationship-based abuse, bullying and grooming into exploitative networks, young people have told practitioners, researchers, and journalists about risks they have faced in educational settings. Furthermore, studies have found that there are a number of ways that education provision can guard against, or effectively respond to, these issues and become sites of safety and protection for young people – from 'designing-out' opportunities for abuse to occur and creating opportunities for bystander interventions through to offering high quality and embedded relationships and sex education and providing trusted and sustained relationships between adults and young people.

As such it is critical that when young people experience abuse and violence that information is gathered if it is in some way associated to their education environment or relationships within the education setting – this may identify the need for the education provision itself to feature in a more in depth process of assessment and intervention.

15.3.c Context – Neighbourhoods

Neighbourhoods have been identified as sites in which people can experience and/or be safeguarded from abuse and violence. From experiences of sexual exploitation in fast food restaurants, criminal exploitation in parks, serious youth violence on transport routes to exposure to drug use and dealing in vulnerable people's homes. While agencies already work to keep people safe outside of the home, such as community safety and policing, the primary focus of this work is crime prevention as opposed to safeguarding and welfare. Research suggests that there are a number of ways that people can be safeguarded from harm in neighbourhood spaces – from 'designing-out' opportunities for abuse to occur and creating opportunities for community guardians. As such it is critical that when people experience abuse and violence and this is in some way associated to locations outside the home, such as a park, street, stairwell, business – that gathering information about the neighbourhood and places where the person spends their time feature within the process and this may identify the need for a more in depth neighbourhood assessment and intervention.

15.3.d Context – Online

Online exploitation can be particularly challenging to identify and respond to, and it may not exist in isolation but transcend into the physical world, or vice-versa. Younger people, and perpetrators, are frequently more familiar with, and spend more time in, these environments than parents/carers and professionals who can struggle to remain up to date with the latest sites and potential connection points. Technology offers instant connectivity, with perpetrators able to initiate contact with multiple potential victims at any time. It also offers a perception of anonymity, with victims, and perpetrators, potentially saying and doing things online that they wouldn't do offline. This eases the grooming process and facilitates more rapid control of perpetrator approaches to potential victims. Where exploitation does occur online (through the exchange of sexual communication or images, for example) these can be quickly and easily shared with others. This makes it difficult to contain the potential for further abuse and presents significant challenges around content removal. Online abuse is further complicated by the fact that it can transcend national borders, with people in England potentially being abused by individuals from other countries. Any assessment should look carefully at devices and engagement of all family members in the online world; information gathered may identify the need for a more in depth assessment and support from specialist agencies as different legislative contexts, across different countries, present challenges to prevention, detection and prosecution - challenges that are enhanced through perpetrator use of the dark web.

15.4 Disruption & Criminal Investigation

While criminal prosecution of child abuse perpetrators may represent the most desired outcome of law enforcement activity, it is not appropriate to leave the protection of vulnerable children people to the criminal justice process alone. The use of existing legislative powers, such as orders and injunctions, are an essential part of the safeguarding process and often a critical piece to any future actions.

Practitioners need to understand and access existing legislative opportunities at their disposal to disrupt exploitation.

The Home office has published a [disruption tool kit](#) and the NWG have one too that looks beyond the age of 18.

15.4.a The National Referral Mechanism (NRM)

Trafficking is the practice of recruitment, transportation, transfer, harbouring or receipt of a person into, within and out of the UK or any other country for the purposes of exploitation. When an agency comes into contact with a person who may have been exploited it is likely they have been trafficked, the Local Authority and the police should be notified immediately and first responders should complete an [NRM](#).

The National Referral Mechanism is a single framework centered on victim identification and referral to appropriate support. First responders (which may include police, Immigration authorities, local authorities and certain NGOs) should refer all suspected victims of trafficking to the Single Competent Authority for a decision on whether the individual is a victim of trafficking to be made within 48 hours. A first responder will complete a referral form recording their encounter with a potential victim. Sufficient information will be included to enable a decision on whether the subject has "reasonable grounds" for being treated as a victim of trafficking. A reasonable grounds decision includes "I suspect but cannot prove". General indicators of a potential victim's behaviour, circumstances and responses to questions will assist in the assessment.

The competent authority aims to make reasonable grounds decisions within 5 days of receiving a referral and emergency support is available for potential victims who would otherwise be destitute during this time. A positive reasonable grounds decision entitles the potential victim to a 'reflection and recovery' period for a minimum of 45 days, and until the conclusive grounds decision is made. During this time, adult victims receive accommodation and subsistence, specialist support including counselling, access to physical and mental health care, and signposting to services including legal aid. Child victims are supported by local authorities under their statutory safeguarding duties.

When a Competent Authority makes a positive reasonable grounds decision, at the end of the recovery and reflection period they then have to conclusively decide whether the individual is a victim of human trafficking /modern slavery. The Competent Authority is responsible for making a conclusive decision on whether, 'on the balance of probabilities', there are sufficient grounds to decide that the individual being considered is a victim of human trafficking or modern slavery. This is referred to as the Conclusive Grounds decision. The expectation is that a Conclusive Grounds decision will be made as soon as possible following day 45 of the recovery and reflection period. There is no target to make a conclusive grounds decision within 45 days. The timescale for making a conclusive grounds decision will be based on all the circumstances of the case.

When the conclusive grounds decision is received; all partners should respond to the needs of the person who has been recognised as a victim of the crime of trafficking/ modern slavery; providing the support that is needed and investigating the crime that has happened.

If the potential victim is the subject of criminal proceedings several agencies need to be notified as soon as the conclusive grounds decision is positive.

The Competent Authority must ensure that the police are notified of the positive reasonable grounds decision as soon as they make it.

Generally the Competent Authority must ask the police to notify prosecutors (the Crown Prosecution Service) of the positive reasonable grounds decision as soon as they make it as section 45 of the Modern Slavery Act 2015 created a defense for trafficking victims who commit certain offences when they are compelled to do so (in the case of adults) or when they commit them as a direct consequence of being a victim of slavery / exploitation, if a reasonable person, in the same situation with the same “relevant characteristics” would do the relevant act (in the case of children), on or after 31 July 2015. Under Section 45:

- (1) A person is not guilty of an offence if -
 - (a) The person is aged 18 or over when the person does the act which constitutes the offence.
 - (b) The person does that act because they were compelled to do it.
 - (c) The compulsion is attributable to slavery or relevant exploitation, and
- (2) A reasonable person in the same situation as the person and having the person's relevant characteristics would have no realistic alternative to doing that act.
A person may be compelled to do something by another person or by the person's circumstances.
- (3) Compulsion is attributable to slavery or to relevant exploitation only if -
 - (a) It is, or is part of, conduct which constitutes an offence under Section 1 (MSA) or conduct which constitutes relevant exploitation, or
 - (b) It is a direct consequence of a person being, or having been, a victim of slavery or a victim of relevant exploitation.
- (4) A person is not guilty of an offence if -
 - (a) The person is under the age of 18 when the person does the act which constitutes the offence,
 - (b) The person does that act as a direct consequence of the person being, or having been, a victim of slavery or a victim of relevant exploitation, and
 - (c) A reasonable person in the same situation and having the person's relevant characteristics would do that act.
- (5) For the purposes of this section –
‘relevant characteristics’ mean age, sex and any physical or mental illness or disability.
‘relevant exploitation’ is exploitation (within the meaning of Section 3) that is attributable to the exploited person being or having been, a victim of human trafficking.

<https://www.cps.gov.uk/legal-guidance/human-trafficking-smuggling-and-slavery>

15.4.a.1 Duty to Notify

Children do not need to consent to an NRM being completed, but adults do, if they decide not to consent there is a duty to notify:

From 1 November 2015, specified public authorities have a duty to notify the Secretary of State of any person encountered in England and Wales who they believe may be a victim of modern slavery. Therefore, certain frontline staff who encounter a potential victim of modern slavery are required to notify the Home Office under Section 52 of the Modern Slavery Act. This requirement applies to the police, Local Authorities, [the National Crime Agency](#) and the [Gangmasters and Labour Abuse Authority](#). UK Visas and Immigration, Border Force and Immigration Enforcement must also comply with the duty as a matter of Home Office policy. It applies to potential victims identified in England and Wales only. This duty is intended to help build a more comprehensive picture of the nature and scale of modern slavery.

For further information, please see the [Duty to notify guidance](#). A duty to notify referral should not be relied upon to safeguard potential victims. Existing safeguarding processes should still be followed in tandem with a notification.

16. Stepping Down an Exploitation Case

It is not unusual for perpetrators of exploitation to withdraw when professional involvement increases, only to return when professionals close the case as they feel progress has been made. For that reason, it is necessary for the multi-agency group to have recognised a prolonged period of sustained progress before a case is stepped down (this should be a minimum of 12 weeks). When the case is stepped down from the MAACE process, professionals involved should continue to offer support. For children this will be through the Early Help process for adults it will be through their carer's and community contacts. This should ensure continued support and a swift response and re-referral if the person is targeted again.

17. Solihull Exploitation Panel (ShEP)

ShEP is a multi-agency forum that brings together the key agencies and organisations with a responsibility for addressing the exploitation of Children and Adults in Solihull. ShEP facilitates a coordinated approach that seeks to achieve this mutual goal by enabling the ***right conversations, with the right people, at the right time.***

Any professional can complete the [ShEP referral form](#) for an individual to be considered.

ShEP will consider cases that:

- Have remained within MAACE/Safeguarding Adults process or identified at high risk on the vulnerability Tracker without significant improvement in situation.
- Highlight persons who persistently go missing.
- May not fit within statutory duties, such as Care Act eligibility criteria, but where people are experiencing or at risk of exploitation.

ShEP will also:

- Lead on the development of a tool/process to map the trends, networks and connections between victims, offenders, and locations within Solihull.
- Share information on key locations that are being used to exploit children, young people and adults with care and support needs and set actions as required.
- Share best practice, regional and national updates.
- Identify gaps in provision and recommend development actions to the Exploitation Reduction Delivery Group (ERDG).

Making a referral to ShEP:

If there has been no significant improvement over 3 meetings / 6 months then a referral (appendix 13) should be made into ShEP. The referral form must be completed and emailed to sheptriage@solihull.gov.uk. Practitioners may be asked to attend ShEP to further discuss the concerns.

18. Contextual Safeguarding Assessments

Completing the Contextual Safeguarding Framework during MAACE meetings and further information gathered during assessment & planning will generate information about different contexts (peer groups, education provision, neighbourhoods and online). It would not be efficient or effective for every single case to generate individual assessments of contexts that may duplicate each other. To maximise effectiveness and the use of resource it will be necessary for the information from completed contextual assessment frameworks that relates to settings beyond the family home peer groups, education settings, neighbourhoods and online; to be directed to one place to decide where assessment, intervention and resources should be targeted.

[Assessment and intervention planning for young people at risk of extra-familial harm: A practice guide](#)

Solihull is moving to fully adopt a Contextual Safeguarding Framework, these procedures set out the pathways to start to embed a contextual approach for the

individual when harm is occurring beyond their home. We will be working to develop processes to enable us to build partnerships and develop pathways to target specific contexts and assess them from a child protection/ adult safeguarding perspective and measure the contextual outcomes of this work. As this work progresses the procedures will be updated.

19. For Adults Over the Age of 18: Assessment of Care and Support Needs

19.1 Section 9 Assessment Under the Care Act 2014

An assessment should be carried out where it appears to a local authority that an adult may have needs for care and support. A need for care and support may occur as a result of the misuse of drugs and alcohol, being homeless and/or experiencing mental health problems including self-harm as they may impact on an individual's wellbeing and ability to manage personal care, a home or within the community.

An s9 assessment of needs is led by Adult Social Care but will require the cooperation and involvement of other agencies with relevant information – such as health, housing, voluntary sector, police etc.

The assessment must be carried out with involvement from the adult and where the adult consents, can include their carer or someone else they nominate, or an independent advocate can be provided by the local authority to help them with the assessment process. Where there are concerns a person may lack the capacity to be able to consent to assessment, a best interest decision under the Mental Capacity Act should be made.

At the conclusion of the assessment, the local authority must determine whether the person is eligible for care and support as defined in the Care Act. Determining eligible needs is important to work out, as the local authority must meet the adult's eligible needs for care and support. The person will have eligible needs if they meet all of the following:

- they have care and support needs as a result of a physical or a mental condition
- because of those needs, they cannot achieve two or more of the outcomes specified
- as a result, there is a significant impact on their wellbeing.

Care and support is the mixture of practical, financial and emotional support for adults who need extra help to manage their lives and be independent – including older people, people with a disability or long-term illness, people with mental health

problems, and carers. Care and support includes assessment of people's needs, provision of services and the allocation of funds to enable a person to purchase their own care and support.

19.2 Section 11 Refusal of Assessment

If an individual refuses an s9 assessment, then the authority may still be required to carry out that assessment where the conditions meet those set out in section 11 Refusal of assessment. – the authority may still proceed to carry out an assessment where an adult refuses a needs assessment and the adult is experiencing, or is at risk of, abuse or neglect. The purpose is to ensure that needs for care and support are identified order to prevent harm and the risk of abuse and neglect. Any assessment under S11 needs to be multi-agency to ensure that all risks are identified

Questions to ask:

- Does the person have capacity?
- Is the person at risk of or experiencing abuse?

When carrying out an s11 assessment you:

- MUST inform the adult and explain why.
- Should seek information from the referrer
- Should seek information from other professionals who know the individual
- Include any information that the adult has given and make their views clear.
- Must maintain contact and update the adult.
- Must, when asking for information from other professionals – make it clear this is because of safeguarding concerns as well as under sec 11 of the Care Act.

19.3 Human Rights Assessment

Where there is uncertainty around a proposed act by a public body, that body will review their proposed act as against the specific circumstances of the person and take into account their Human Rights as guaranteed under the Act. This is carried out by what can be called a 'Human Rights assessment'. This is simply a process the public body has adopted by which it tests whether their proposed action would be in breach of that person's human rights.

The Human Rights Act requires there to be consideration of whether there is sufficient justification for the local authority to make enquiries into a person's private life (in the context of the Human Rights Act 1998) in order to discover whether the three criteria are met and, if so, that an enquiry is necessary. This is what is meant

by exploring whether there is 'reasonable cause to suspect'. This assessment is done alongside the normal s9/11 Care Act assessment.

19.4 Structured Partnership Approach

The structured partnership approach has been developed by Solihull Safeguarding Adults Board to help those working with adults who have complex needs and unmanaged risks where the criteria for a S42 safeguarding enquiry is not met, or for those who may not be engaging with services. In these circumstances, a structured partnership approach is needed in order to safeguard and promote an individual's wellbeing. It sets out how partners should work together in a structured way – sometimes referred to as complex discharge meetings, professional's meetings, or multi-agency meetings.

Any agency can call a Structured Partnership Approach meeting with the aim to:

- Identify a lead professional
- Hold multi-agency meetings
- Share information
- Clarify of roles and responsibilities
- Use a risk enablement approach and
- Ensure effective record keeping.

Structured Partnership meetings should follow the Multi-Agency Adult and Child Exploitation (MAACE) process as detailed in section 14.

It is important that all partners prioritise Structured Partnership meetings as they would with safeguarding meetings in order to safeguard and promote individual's wellbeing.

For more information visit [Solihull Safeguarding Adults Board](#)

19.5 Solihull Harm Reduction and Vulnerable Victims Forum

Where an adult has not been referred into any of the above processes and when individuals may be victims of hate crime, anti-social behaviour and repeat callers to emergency services and partner agencies, a referral could be made to this forum.

This forum will co-ordinate services in response to the identified needs of individuals in order to prevent, protect and address behaviour affecting the individuals and/or to address their needs.

Referral Criteria:

- Individual lives within the Borough of Solihull.
- Individual is vulnerable under the Harm Reduction Forum definition which is: "An individual will be considered VULNERABLE if the conduct in question causes an adverse impact on their quality of life, including personal safety. Adverse impact includes the risk of harm; deterioration of their health, physical, mental and or emotional wellbeing; or an inability to carry out normal day to day routine through fear and intimidation".
- No package of support is in place or despite support/care plan individual continues to remain vulnerable.

19.6 Health's Frequent Attendees Process

'Frequent attenders' are defined as patients who attend a health care facility repeatedly. It is recognized 'frequent attenders' to Emergency Departments also tend to be frequent users of other health and social care facilities for example, primary care. It should be recognized that these vulnerable patients, with a higher mortality (including death by violent means and suicide) and greater prevalence of alcohol and psychiatric disorders.

A project has commenced across health which will include the Acute Trust, Mental Health Trust and CCG to scope what systems and process are in place to identify these vulnerable people and to identify any gaps. This will include raising awareness of the vulnerabilities of this group of patients with healthcare staff ensuring that their needs are seen. The scope of the project will include linking with other agencies such as the Ambulance Service, Police and Local Authorities.

This work is ongoing and will be updated periodically and when completed.

19.7 Intimate Partner or Familial Relationships

Where someone aged 16 or over and feels like they are in an intimate partnership or they are related to the person who is thought to be causing them harm, then this may mean there are concerns about domestic abuse, the [DASH risk assessment](#) should be completed and where appropriate a [MARAC referral](#) being made.

20. Transition from Children's Services to Adult Care and Support

This guidance provides advice and information to support multi-agency working with young people who are experiencing or at risk of experiencing exploitation whose

circumstances may mean that safeguarding adult's procedures would apply when they are 18.

Solihull are committed to ensure that if a young person continues to require support as a victim of exploitation as a child, that this is offered through transition to ensure continuity of support and service provision from Children's Services to Adult Care and Support is maintained. These procedures will therefore apply to any young person who has been referred into the NRM and have a "positive reasonable grounds" decision or "conclusive grounds" decision from the Single Competent Authority at the age of 17 or as soon as they are referred into Children's Services thereafter.

This guidance should where appropriate also be read in conjunction with:

- [Care and support statutory guidance](#) (Department of Health and Social Care amended 24 June 2020)

These procedures are also in line with:

- [Transition from children's to adults' services \(NICE, 2016\)](#) and
- [Transition from children's to adults' services for young people using health or social care services \(NICE 2016\)](#)

20.1 Transitional Safeguarding

Transitional safeguarding is simply a term used to highlight the need to improve the safeguarding response to older teenagers and young adults in a way that recognises their developmental needs. It recognises that adolescence extends into the early/mid-twenties (Sawyer et al. 2018) because the brain is not yet fully developed, and in some cases there will be a need for specific support to help an individual to navigate through this progression safely. A more fluid and transitional safeguarding approach is needed for young people entering adulthood given that harm, and its effects, do not stop at 18 years. The children's and adults safeguarding systems are conceptually and procedurally different, and governed by different statutory frameworks, which can make the transition to adulthood harder for young people facing ongoing risk and arguably harder for the professionals who are trying to navigate an effective approach to helping them. The 'cliff-edge' in terms of support can be exacerbated by notable differences between thresholds/eligibility criteria for children and adult safeguarding responses (Firmin et al., Research in Practice, 2019).

20.2 Multi-Agency Working

It is important that the transition period is viewed as a process and not a single event. All professionals working with the young person should consider the timing of any changes in services and or practitioner where possible, to ensure that it occurs

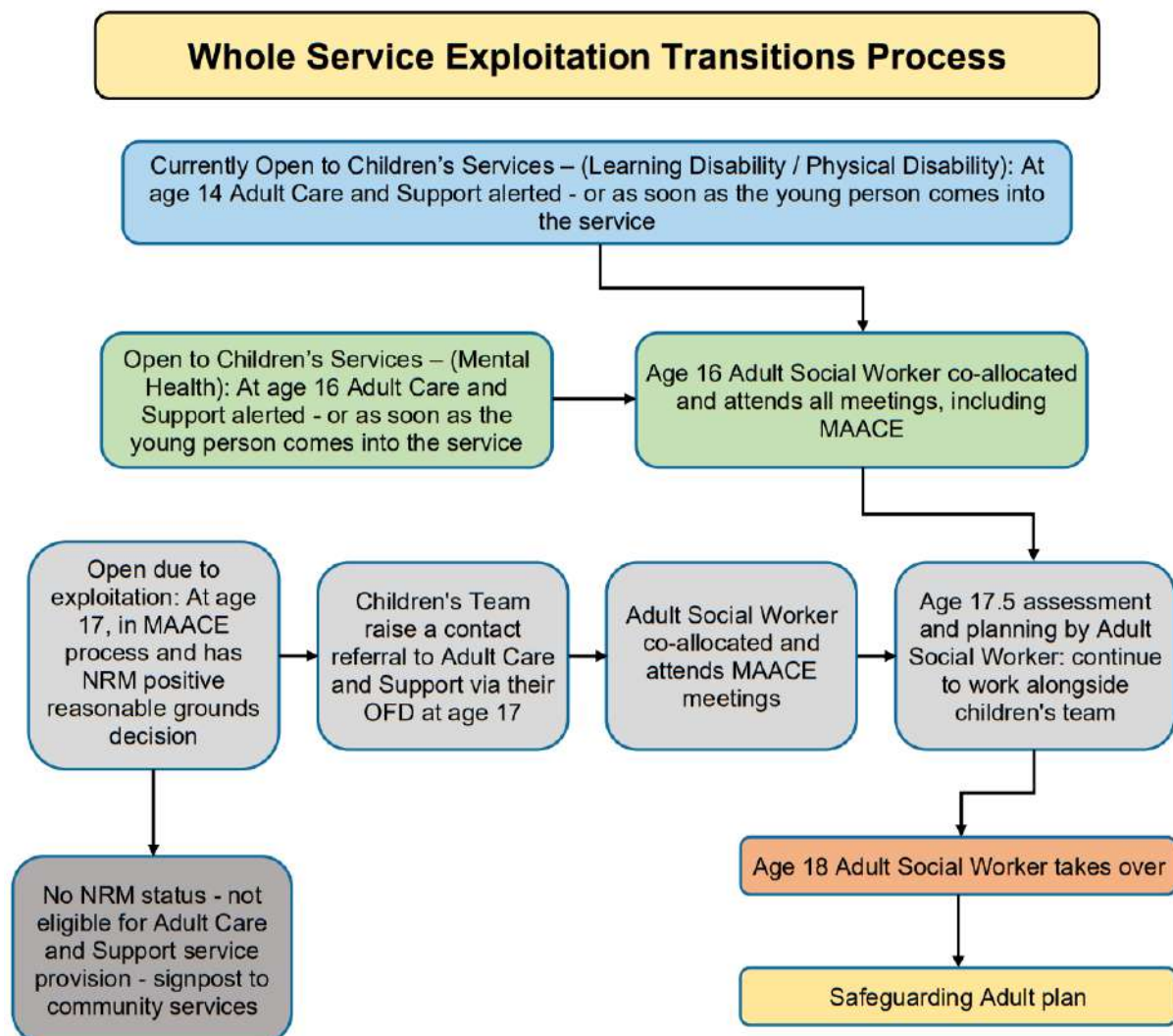
at a time that is right for the young person. It is essential that the young person remains involved throughout this process.

In order to achieve this, early planning is necessary, particularly as some services will offer provision until the age of 25, whereas other service provider transition at the age of 18. Consistency of key professionals will assist throughout the transitions process and clear exit plans for services the young person will be moving from should be developed.

Agencies working with individuals who are transitioning from Children’s to Adult services will need to be familiar with the different legislation that is associated with both children and adults, and develop a working knowledge in order to support the young person they are working with.

20.3 SMBC Transitions Pathway

Transitions Pathway



20.4 Learning and Physical Disability Pathway

When a young person is open to Children's Services due to either a learning or physical disability, at age 14 or as soon as they enter into the service after 14, the 0-25 Adult's Social Work Team are notified by them and monitored by the 0-25 Assistant Team Manager. Case responsibility sits legally with Children's Services until the young person turns 18. When the young person turns 16, they are allocated an Adult Social Worker who will attend all important meetings including MAACE meetings, and at age 17, will commence assessment and planning for adulthood. When the young person turns 18 and leaves education, they will be supported by All Age Disability Team. It is expected that all multi-agency professionals working with the young person will continue to do so as necessary.

20.5 Mental Health Pathway

When a young person is open to Children's Services due to mental health, at the age of 16, or as soon as they are referred into the service after 16, Children's Services notify the Adults Mental Health Social Work Team where the Assistant Team Manager will monitor and an Adult Social Worker is allocated who will attend all important meetings including MAACE meetings. At age 17, assessment and planning for adulthood will commence. When the young person turns 18, they will then be supported by the Adult Mental Health Social Work Team. It is expected that all multi-agency professionals working with the young person will continue to do so as necessary.

20.6 Exploitation Only Pathway

Where exploitation is the main or only concern and the young person is not involved with transitions processes through the above pathways, the following process should be followed.

At the age of 17, when a young person is involved in the MAACE process, the team working with the individual should make contact with ACS through One Front Door. Where a young person has been referred to the NRM and they have either positive reasonable grounds or conclusive grounds decision, an Adult Social Worker will then be allocated to the young person to work alongside the Children's Social Worker, attend MAACE meetings and consider any ongoing support post 18.

If there is no NRM, there is a negative decision by the Single Competent Authority or the young person does not wish to have Adult Care and Support involvement, they should be supported by the children's practitioner working with them to access community organisations which are more appropriate to support the individual in adulthood.

The Role of Children's Services:

1. At the age of 17 or as soon as they come into the service thereafter, the relevant Children's Team must make a referral via the contact form to Adult One Front Door (OFD). They will continue to remain the main allocated case worker until the age of 18 or whenever is most appropriate to do so following an individual's 18th birthday taking into account the guidance on transitions.
2. Where an individual is entitled to leaving care services and support of a Personal Advisor (PA) they will continue to work alongside the individual and adult care and support until the individual reaches 25.

The Role of Adult Care and Support:

3. OFD will open and reassign to the Adult Exploitation work tray.
4. Exploitation triage will then review this referral within 1 working day and redirect to the most appropriate ACS team who will co-allocate an Adult Social Worker.
5. In deciding which team is most appropriate to work with the young person, there will be consideration of the skills, knowledge, and expertise of the workers in each team. In addition, consideration will be given to the team that has access to the most appropriate resources and working relationships with relevant health teams that could support the young person.
6. This co-allocated Adult Social Worker will attend the first MAACE meeting following the young person's 17th birthday, or as soon as they are referred into the service thereafter, in order to understand the current assessments / plan and risk and to start to discuss the role of adult service provision with the young person. Case responsibility continues to remain with the Children's Social Worker.
7. The Adult Social Worker will continue to attend MAACE meetings and attend any joint visits where appropriate, until the young person reaches 18. If safeguarding concerns remain at this stage, adult safeguarding procedures will commence through MAACE meetings as will continuity of professionals attending. Consent will be considered at every stage.
8. If it is considered that adult safeguarding procedures are not necessary, meetings can continue under the Structured Partnership process to progress an exit plan.

9. At age 17.5 the Adult Social Worker will offer to undertake a Care Act Assessment to consider care and support needs.
10. At the age of 18 or when most appropriate to do so, ACS will take over case responsibility whilst considering any other professional involvement including leaving care services that may continue to remain involved.

20.7 Transitional MAACE Process

Where an individual is over 18 but still receiving support from children's services and a safeguarding issue is raised, the matter should be dealt with by the Adult Safeguarding Team. Where appropriate, they should involve colleagues within Children's Services as well as any relevant partners (e.g. police or NHS) or other relevant persons.

When a young person is involved in the MAACE process, they will continue to be supported through transition under the MAACE process to Adult Services however this will move from being under the provision of the Children Act 1989 to Adult Safeguarding procedures under the Care Act 2014. ACS will take the lead in this process from 18 however it is expected that the multi-agency organisations involved will remain consistent.

Multi-agency working and MAACE meetings for individuals with no assessed care and support needs can continue to be held through Solihull's Structured Partnership Approach.

21. Dispute Resolution Process

Multi-agency working is the bedrock of effective safeguarding. Partner agencies have their own roles to play in the safeguarding process as set out in the Care Act (2014), Care Act Statutory Guidance and in the West Midlands Multi-agency policy and procedures for the protection of adults with care and support needs and for children, this is set out within the Children Act 1989 and 2004 and Working Together to Safeguard Children 2018. It is important that all partner agencies are accountable for delivering their part of the safeguarding process to the highest possible standard.

Solihull LSCP has developed multi-agency [case learning meeting procedures](#) to enable multi-agency groups to meet and discuss a case to reviewing how the professional partnership of the group is working to achieve the outcomes of the plan.

There will be occasions where staff from one partner agency may have concerns about the way in which staff from another partner agency is/are delivering their part of the safeguarding process. Where an issue of professional dispute arises, initial

attempts should be made to resolve the problem by the people who disagree, unless the adult is at immediate risk. If unresolved, Solihull Safeguarding Adults Board [Inter-Agency Dispute Resolution Procedure](#) should be followed for adults and [Local Safeguarding Children Partnership](#) for children and young people under the age of 18.

22. Appendices

Appendices

- Appendix 1 [West Midlands Police Intel Form](#)
- Appendix 2 [Barnardo's Child Trafficking Advocacy Service Referral Form](#)
- Appendix 3 Solihull Action through Advocacy Referral Form
<https://www.solihullfirstadvocacy.com/referrals>
- Appendix 4 [Pathway Under 18](#) – see section 10
- Appendix 5 [Pathway Over 18](#) – see section 10
- Appendix 6 [All Age Exploitation Screening Tool](#)
- Appendix 7 [All Age Exploitation Screening Tool Guidance](#)
- Appendix 8 [Individual Exploitation Assessment Tool](#)
- Appendix 9 [Contextual Safeguarding Framework](#)
- Appendix 10 [Vulnerability Tracker Template Under 18](#)
- Appendix 11 [Vulnerability Tracker Template Over 18](#)
- Appendix 12 [MAACE Agenda](#)
- Appendix 13 [Disruption & Support Plan Template](#)
- Appendix 14 [ShEP Referral Form](#)
- Appendix 15 [Transitions Pathway](#) – see section 20.3

23. Glossary

ACS	Adult Care and Support
ERDG	Exploitation Reduction Delivery Group
LSCP	Local Safeguarding Children Partnership
MAACE	Multi-Agency Adult / Child Exploitation Meetings
MARAC	Multi-Agency Risk Assessment Conference
MASH	Multi-Agency Safeguarding Hub
NRM	National Referral Mechanism
OFD	One Front Door
SAR	Safeguarding Adults Review
SAtA	Solihull Action through Advocacy
ShEP	Solihull Exploitation Panel
SMBC	Solihull Metropolitan Borough Council
SSAB	Solihull Safeguarding Adults Board
S42 Enquiry	Section 42 of the Care Act 2014 – duty to investigate adult safeguarding concerns