In harm's way: The role of the police in keeping children safe
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Foreword

All children should be safe, well cared for and loved. Unfortunately, some children are abused or neglected by those charged with their care, and vulnerable children are exploited by adults for their own ends. Police forces work with other agencies to safeguard children and have unique responsibilities for investigating crimes against them and taking protective action where this is necessary.

Protecting children is one of the most important tasks the police undertake. Every officer and member of police staff should understand his or her duty to protect children as part of his or her day-to-day business. It is essential that officers recognise the needs of any children they may encounter. This may be in the home, the school or on the street.

The police also have responsibilities in respect of other vulnerable children who may be at risk – children who offend or who are in custody and young runaways, for example. As staff go about their daily work, they may become aware of children at risk, such as those living with drug misusing parents or in families that are violent. Police officers and staff often have to take decisions in an emergency and in other stressful situations. They also have to assess the longer term risks to a child once the emergency or stress is over.

Police officers have considerable powers: to arrest and detain suspects, investigate crimes, seek court orders, restrict an offender's activities, remove a child to a place of safety and issue notices to offenders warning them to cease contact with children whom the police have identified as potential victims. These powers must be used only when there is good evidence of their necessity, and where they might protect a child from further harm.

In early 2014, Her Majesty’s Inspectorate of Constabulary (HMIC) began a national programme of child protection inspections. Since then, it has also undertaken a number of other inspections concerning vulnerable children. This report summarises the findings contained in the reports of all these inspections and considers the implications for future action. The underlying body of materials for this present analysis is therefore considerable and represent a significant effort of inspection, reporting and consideration of the issues. Together, these reports provide a powerful analysis of how well police forces serve the needs of vulnerable children.

Drusilla Sharpling CBE
HM Inspector of Constabulary
Relevant inspection reports

This thematic report is based on the following HMIC reports.

Eight National Child Protection Inspections

- Norfolk Constabulary, August 2014
- South Yorkshire Police, September 2014
- West Midlands Police, October 2014
- Greater Manchester Police, December 2014
- West Yorkshire Police, January 2015
- Nottinghamshire Police, February 2015
- Dyfed-Powys Police, February 2015
- West Mercia Police, February 2015


Further reports on child protection themes

Joint inspectorate reports on work with children and young people


Thematic inspections on matters relevant to children


Executive summary

Between January 2014 and June 2015, Her Majesty’s Inspectorate of Constabulary (HMIC) conducted 21 inspections of different aspects of the police response to child protection issues. These comprised:

- eight inspections of individual forces as part of the National Child Protection Inspection programme, which is examining the child protection work of every police force in England and Wales; and
- 13 other inspections (conducted either alone, or jointly with other organisations) which contain a child protection theme.

This report summarises findings from all these inspections. By drawing them together in this report, we are able to provide a comprehensive overview of the experiences of vulnerable children who come to the attention of the police, highlighting both good practice and areas for improvement.

The police role in child protection

Under the Children Act 1989, the police service, working with other agencies¹ such as local authority children’s social care services, health and education services, is responsible for making enquiries to safeguard and secure the welfare of any child within their area who is suffering (or likely to suffer) significant harm.² This means they must:

- assess the risk of likely harm to the child, taking immediate action to protect him or her where necessary;
- interview children who may be extremely distressed or unable to articulate clearly what has happened; and
- judge how they might be kept safe in the future.

The police are also duty bound to refer to the local authority those children ‘in need’ whom they come into contact with in the course of their work.

¹ Referred to in this report as ‘child protection agencies’.

² Section 47 of the Children Act 1989.
**Findings**

**The extent and demand of child protection work**

Although the number of children at risk of abuse and neglect is high (1.8 million children are estimated to be living with domestic abuse, for instance), only a small percentage will be referred to the police or another child protection agency. The number of prosecutions and convictions for offences committed against children and young people is relatively low.

There is, however, a continuing rise in referrals to the police of child protection cases (most notably in respect of some elements of child sexual exploitation, such as online grooming – see Chapter 2). Police forces are just beginning to tackle these kinds of offending, while simultaneously trying to respond to the increasing numbers of non-recent cases of abuse, which are now being reported.

It is therefore imperative that forces evidence that they are consistently providing high-quality protection and safeguarding to all those who need their help.

**Leadership and management**

All forces have made the protection of vulnerable people a priority in their area, and there has been an increase in both resources and the attention given to the policing arrangements to achieve this. However, HMIC found a mismatch between stated priorities and practice on the ground. More attention needs to be given to the quality of practice and the outcomes for children of police efforts.

**The child’s experience of the criminal justice system**

**Pockets of good practice**

HMIC’s inspections found many powerful examples of police actions and decisions resulting in the protection of children from harm, and a marked improvement to their lives. Committed individual police officers and staff members in forces across England and Wales are working in difficult circumstances, dealing with distressing behaviour and situations, while managing high levels of risk – the consequences of the police getting child protection wrong could have life changing consequences.

However, the overall quality of police practice in protecting and safeguarding vulnerable children needs to improve. As part of the National Child Protection Inspection programme, HMIC examined 576 cases involving children, from across eight forces. We assessed less than a third of these (177) as being of a good standard and less than a third (179) as adequate, while more than a third (220) were judged to be inadequate.

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This reflects the weaknesses and inconsistencies which were found at all stages of the child’s experience throughout the child protection system – from initial contact with the police, through to investigation of the alleged offences, and regardless of whether he or she was a victim or an offender. (Indeed, sometimes the distinction between victim and offender was unclear.)

**Initial response**

In cases judged immediately to involve child protection issues, officers generally responded promptly, engaged well with children, interviewed them sensitively, took emergency protective action when necessary, and were quick to gather evidence at the scene.

By contrast, if cases were not identified from the outset as child protection matters (for instance, if they were originally recorded as a case of domestic abuse, or of a child missing from home), they were handled less well. Responses were slower and children were not always seen and spoken to alone in order to ascertain their safety and wellbeing, or to understand the incident from their perspective.

This difference in the quality of the response appeared to depend upon the experience and expertise of officers.

**Criminalising children for minor offences**

We were surprised to find examples of children who had been accused of offences such as pushing a sibling, criminal damage in their (own) children’s home, or for wasting police time by running away from home. Sometimes, children were accused of lying or perverting the course of justice when their accounts of offences against them were disbelieved.

**Sharing information with other child protection agencies**

While the police invariably passed on information to children’s social care services, they did not always alert them to specific risks or cases of concern. HMIC found that a number of concerns about children, even in cases where information was passed on to children’s social care services, did not result in a child protection conference or ‘event’ (i.e. an inter-agency discussion to plan for a child’s safety or an enquiry into his or her needs).

What happened to those referrals was unclear, but inspectors were told that children’s social care services only had the capacity to consider those identified by the police (or other referring agencies) as being at greatest risk.

Our findings suggest that there is, therefore, likely to be under-recording of abuse and neglect within the child protection system. We are not satisfied that the details of children who come to the attention of child protection agencies are being properly recorded.
The discretion given to professionals to decide what is, or is not, a child protection matter or a crime may be leading to the denial of help to children because they fail to meet an agency-defined (rather than child-led) threshold of harm.

**Detention of children in police custody**

HMIC has concerns about the detention of children in police custody. While it may be necessary to arrest a child or a child may need to be detained for their own safety, these occasions should be relatively rare. In particular, inspectors were concerned by the number of “looked after” children held in police custody. Local authorities are required by law to accommodate children who would otherwise be detained in custody overnight, and it is a serious matter that children who are already in their care are denied this accommodation.

**Enquiries and investigations**

Overall, investigations of child protection cases were poor (although again, enquiries and investigations undertaken by specialist teams were generally better than those undertaken by response officers). Many of the cases that inspectors examined were superficial, with too few enquiries made about an incident, or leads not followed up. In some cases, even simple activities such as taking photographs of the scene, analysing mobile phones, or referring a child for medical attention or for a forensic examination were not undertaken.

Delay and drift featured in the findings of all inspection reports. There were delays in gathering evidence, in obtaining information from other agencies, in securing an appropriate adult or social worker’s presence when interviewing children, in submitting phones and computers for analysis, and thereafter long delays awaiting the results. There were also delays in passing cases to the Crown Prosecution Service (CPS) for a charging decision and delays in the CPS reaching a decision. Delays in case progression increase the risk to children, and leads to them losing confidence in the police.

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4 The term ‘looked after’ has a specific legal meaning based on the Children Act 1989. A child is looked after by a local authority if he or she has been provided with accommodation for a continuous period of more than 24 hours, in the circumstances set out in sections 20 and 21 of the Children Act 1989, or is placed in the care of a local authority by virtue of an order made under part IV of the Act.

Reducing the risk of harm

Assessments of risk and need were often poor, and the support offered to children was weak as a result. It was not clear to inspectors that the discussions which took place with other agencies resulted in effective work with children and families; nor was it clear that the police themselves were taking appropriate protective action (for example, by reducing the capability of an offender to victimise other children). Again, performance in this area improved when specialists were involved. For instance, when officers from the units responsible for monitoring sex offenders were involved, planned action was better targeted on known risks, and officers used police powers well (by prohibiting contact between an offender and a particular child, for example).

Listening to and communicating with children

The importance of the quality of police interaction with victims cannot be overstated. Good, sensitive police work can, of itself, set the child on the road to recovery, and may have a greater contribution to make to future wellbeing than therapeutic or other services. Inspections found some very good examples of police staff listening to and communicating well with individual children, and it was noticeable that in these cases the overall quality of an investigation was assessed as good.

In general, however, there was limited evidence of police officers listening to, or communicating well with children. There were examples of poor interviews, oppressive questioning and even, in some cases, evidence of hostility towards children. Failing to act on a child’s account (for example, by undertaking more extensive enquiries) suggests that officers were too ready to accept a parent or suspect’s version of events. Officers often struggled to engage with children at risk of child sexual exploitation, and with adolescents who were antagonistic to the police. Encouragingly, however, some forces had recognised this problem and had made efforts to involve other agencies as mediators or additional support for the child.

Systems and processes

Police information systems and data

Police information systems need to improve. They do not provide senior managers with information about the outcome of police actions or the effect of the experience on children; nor do they provide an accurate record of demand.

The absence of demographic data such as ethnicity, disability and age in police responses to abuse and neglect and in relation to children in police custody needs to be addressed, as without it, senior officers cannot examine the profiles of offenders

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6 For example, Ione Wells, the student who was sexually attacked in April 2015, described in the Guardian newspaper how the words of the police officer: “For God’s sake, Ione, you have every right to walk on your street and feel safe. Don't in any way fell guilty about what happened to you” enabled her to pick up her life again.
and offences and ensure that certain groups of children do not suffer discrimination in the system. Information systems more widely are cumbersome to use, and difficult to navigate; they are not readily accessible, and are time-consuming to populate. Too much staff time is spent on the recording, retrieval and exchange of information.

**Links between processes and outcomes**

The National Child Protection Inspection programme findings highlight the need for changes in performance management systems; better use of data to identify risk and prevent offending; more learning from good practice and successful teams; the identification of the conditions in which good practice will thrive; and more engagement by senior officers in practice on the ground.

HMIC also concludes that more attention needs to be given to the relationship between police processes and outcomes. In particular, there should be a greater focus on the question of whether the tools the police use (such as assessments, inter-agency discussion, and referrals to other agencies) lead to children obtaining the help they need, or whether they merely present yet another layer of bureaucracy through which children are processed before help is provided.

**Relationships between the police and other child protection agencies**

Police and inter-agency procedures are mostly followed but are sometimes undertaken as an administrative, rather than professional task, and there is insufficient follow-up action. There are often repeat referrals for some children but forces do not always find out what action was undertaken previously or how well it worked. We found little evidence that police forces record the outcomes of their efforts.

While inter-agency relationships are generally good at all levels, some difficult topics (such as the number of children detained in police custody, managing the behaviour of looked-after children, or responding to domestic abuse and child sexual exploitation) have yet to be tackled in a comprehensive way.

**Conclusion**

Protecting vulnerable people is a priority for all police forces, and considerable efforts and resources have been allocated to this end. However, forces are struggling to keep up with new and rising demand. The level of child abuse and neglect is so high that it is difficult to process or comprehend. Responding on a case-by-case basis may be inadequate for the task.

We found limited evidence that the police listened to children, and poor attitudes towards vulnerable children persisted in some teams. We also found that investigations were often inadequate, with insufficient action taken to disrupt and apprehend some perpetrators.
Although progress has been made, the gap between expected good practice and actual practice on the ground is significant. It will take both considerable effort and will to bridge that gap. Given the scale of the task and the current and anticipated rise in referrals, we believe there must be a reappraisal of the role of policing in child protection. As police, local authority and voluntary sector resources shrink, there is a very real risk that fewer children are being offered the help required to prevent a reoccurrence of abuse or neglect.

Additionally, too many resources are being used to maintain systems for information exchange, without any guarantee that these processes produce any protective action. Considerable effort is expended on advising children’s social care services and other agencies about concerns but, unless there is a child protection conference or a child appears in court, it is not always clear if these concerns are acted upon. Regular feedback to the police (and the police recording this) would be an additional activity, and so perhaps be perceived as an unhelpful burden; but police and other agencies need to know if their interventions are effective.

This thematic report points to a need for senior police officers to understand better what is happening on the ground. The interface between police staff and victims is the least visible aspect of policing, and yet it is often the most important. There is a need for senior officers to see for themselves police behaviour towards children and experience, at first-hand, the difference a good officer can make, and the negative impact of poor policing. Accompanying police officers ‘on the job’, spending time with children and families who are in contact with the police, and following the individual journeys of children as they travel through the system, are all methods of getting closer to understanding how well the force safeguards children.

Senior officers need to look more closely and critically at the profiles of those processed through the criminal justice system, to ensure that children do not suffer discrimination. The cases of child sexual exploitation and domestic abuse cited in this report suggest that children may be exposed to criminal proceedings when safeguarding actions were more appropriate.

Some of the actions that police forces now need to take are straightforward but others are less so. Specialist units with more knowledgeable and experienced staff performed better than other teams. However, it is not clear if this is a matter of training, or experience, or a function of the recruitment of highly committed staff. What is evident from these reports is that communication with children, especially those who struggle to express themselves or who are resistant to any police contact, is an essential skill for all police officer; that this is not always evident and needs urgently to be addressed.
Future work

Considerable resources are being spent on child protection processes that do not necessarily lead to help for a child, while core police duties – for example, to undertake enquiries and investigations – are not being pursued effectively. Continuing to invest in processes without an analysis of their effectiveness is wasteful and – far more importantly - does not improve the lives of children at risk.

HMIC questions the capacity of agencies to continue to respond to abuse and neglect in the way they do at present, especially in the light of rising demand. Police forces are just beginning to tackle child sexual exploitation alongside the full range of child protection issues, at the same time as trying to address an increasing number of cases of abuse. It is only as forces delve deeper into these issues that the weight and scale of the task become evident.

Police and crime commissioners and chief constables must improve current practice, and manage the anticipated growth in the number of reports and referrals. These discussions need to be undertaken with partner agencies and must be informed by the views and experiences of children.
Introduction

When inspecting police forces, HMIC expects that, in the forces they inspect:

- child vulnerability is recognised, understood and responded to appropriately;
- the police will work alone and also with other agencies to safeguard children's wellbeing;
- everyone is treated with respect and listened to;
- offences are investigated;
- children at risk are protected; and
- perpetrators are identified and prosecuted or controls placed on their behaviour where appropriate.

Child abuse and neglect are largely hidden. Very young children may be unable to disclose what is happening to them, and older children may be reluctant to do so for shame, or for fear of the consequences. The extent to which abusive adults can disguise their abuse and manipulate professionals has been seen in a number of cases – most notably in the case of ‘Baby Peter’ whose mother smeared his face with chocolate to hide his bruises. Cases of child sexual exploitation in Oxford, Rotherham and elsewhere, show a high level of sophistication in the methods of control used by abusers over young girls. Internet crimes are developing faster than agencies can keep pace.

Tackling child abuse and neglect is one of the most complex and difficult tasks undertaken by the police, and one of the most important. While it is rare for a child to be so badly abused that death or serious injury results, children's lives can be seriously harmed and their futures blighted through maltreatment, assault or sexual abuse. Child abuse and neglect contribute to poor cognitive, educational and work outcomes, drug and alcohol misuse, offending and mental health problems. Children who have been abused and neglected often struggle to form healthy relationships as adults and may also abuse or neglect their own children.

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8 The literature on the impact of abuse and neglect is extensive and covers many academic disciplines (health, neuro-biology, education, criminal justice etc.). A short overview can be found at: www.childwelfare.gov/pubpdfs/long_term_consequences.pdf
Although tackling child abuse remains complex, knowledge has grown considerably over the past 30 years. We understand much more about how offenders work and how they ‘groom’ prospective victims. The signs of abuse and neglect are better understood and professionals are better able to identify children at risk. They are more alert to problems such as domestic abuse, alcohol or drug misuse and mental ill health issues which can combine to increase levels of risk. They also know much more about the long term affect of behaviours such as low level neglect, domestic abuse and bullying. The child protection infrastructure for responding to cases of abuse and neglect is now well established, as are the inter-agency arrangements for tackling problems collaboratively.

About this report

HMIC embarked on a national programme of child protection inspections early in 2014. Since then, we have also inspected a number of other aspects of the police’s work with children or areas of practice that affect children. This overview report brings together the findings from all these reports, and provides a fuller picture of the police response to vulnerable children in England and Wales.

The aim of this thematic report is to:

- consider the findings from all HMIC’s reports and from criminal justice joint inspection reports relating to children published since February 2014, and assess how well police forces in England and Wales are responding to concerns about abuse and neglect and protecting children who are vulnerable;

- identify and explore common themes across the reports and consider what action needs to be undertaken at a national level to drive improvement; and

- consider how well the national child protection infrastructure – policies, lead organisations, inter-agency arrangements, training and guidance, and HMIC inspections support good practice.

The report has three main sections.

- The first section establishes the context for this report. Chapter 1 outlines the role of the police in tackling abuse and neglect, the methodology for this report, the changing social context, and the nature of vulnerability. Chapter 2 concludes the context section with a statistical overview of the extent of the problem.

- The second section focuses on inspection findings. Chapter 3 notes and comments on the overall findings from HMIC’s assessment of cases in our National Child Protection Inspections and online CSE report, Online and on the edge: real risks in a virtual world. An inspection into how forces deal with
Chapter 4 sets out the major practice findings from all the inspection reports and follows the child’s experiences from first concern to closure of the case. This chapter also summarises the findings about the management of offenders and police detention of children. Chapter 5 outlines the force management and leadership inspection findings.

• Section 3 looks forward. It restates the major findings and assesses the implications of these for future police practice. It explores a number of themes arising from the report that need further consideration, before a way forward for the police and other agencies can be developed. This section also considers the implications of the findings for HMIC.

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Chapter 1 - the context of police work with vulnerable children

The police role in safeguarding children

Under the Children Act 1989, the police service, working with other agencies such as local authority children’s social care services, health services and education services, is responsible for making enquiries to safeguard and secure the welfare of any child within their area who is suffering (or is likely to suffer) significant harm.\footnote{10} The police are duty-bound to refer to the local authority those children in need whom they find in the course of their work.\footnote{11}

Government guidance\footnote{12} outlines how these duties and responsibilities should be exercised. The specified police roles set out in the guidance relate to:

- the identification of children who might be at risk from abuse and neglect;
- the investigation of alleged offences against children;
- their work with other agencies, particularly the requirement to share information that is relevant to child protection issues; and
- the exercise of emergency powers to protect children.

The police have a duty to investigate crime and bring offenders to justice. It may not always be in the public interest to prosecute an offender, especially if the alleged offender is very young, has a learning disability, is the child’s parent or the case involves consensual sexual activity among children of a similar age.

\footnote{10} Section 47 of the Children Act 1989.

\footnote{11} Section 17 of the Children Act 1989 places a general duty on the local authority to safeguard and promote the welfare of children in their area who are believed to be ‘in need’. Section 17 defines a child as being in need in law if he or she is unlikely to achieve or maintain or to have the opportunity to achieve or maintain a reasonable standard of health or development without provision of services from the local authority, his or her health or development is likely to be significantly impaired, or further impaired, without the provision of services from the local authority or he or she has a disability.

Section 136 of the Mental Health Act 1983 allows the police to detain a child, found in a public place, if they are concerned that the child is suffering from a mental disorder and may harm themselves or others. The child should be taken to an appropriate place of safety – usually a healthcare facility – as soon as possible for assessment.

Under the Police and Criminal Evidence Act 1984 (PACE), the police can also detain children on the street to stop and search them, arrest them, detain them in custody while making enquiries about an offence and detain them after charging them with an offence prior to bringing them before a court. PACE stipulates that children should be detained for the minimum length of time possible and, if continued detention is necessary until the child can be brought before a court, the child should be transferred to local authority accommodation rather than held in police cells.  

There is a general requirement for the police to divert children from police cells and the criminal justice system. This approach has been reinforced in Wales where policy requires the police to consider alternatives to arrest.

Police forces are responsible for the supervision of registered sex offenders in the community. This involves keeping a register of their address, maintaining contact with them, making enquiries into their activities and alerting others to any potential risk posed by the offender.

In cases where there is insufficient evidence to prosecute an offender or where it might not be in the public interest to do so, the police may still use their powers to prevent an offence or further offending.

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13 Section 38 of the Police and Criminal Evidence Act 1984 requires the police to transfer a child under 17 unless it is impractical to do so, or if the child is at least 12 years of age and secure accommodation is required “to protect the public form serious harm” but is not available.


These powers include issuing warning notices against suspects, monitoring bail or other conditions such as prohibitions against going to certain places or contacting children, and the closure of premises known to be used for child sex offending.¹⁷

Police officers also have a significant role in ensuring a child’s safety and welfare when called to an incident and a duty to “demonstrate kindness and reassurance”.¹⁸

This report – methodology

Following two initial pilots, HMIC commenced a national programme of child protection inspections of all police forces in England and Wales in April 2014. The aims of the inspection programme are to:

- assess how effectively police forces safeguard children at risk;
- make recommendations to police forces for improving child protection practice;
- highlight effective practice in child protection work; and
- drive improvements in forces’ child protection practices.

The focus of the child protection inspection programme was on the outcomes for, and experiences of children who come into contact with the police when there are concerns about their safety or well-being.

¹⁷ Under the Child Abduction Act 1984, the police may issue a Child Abduction Warning Notice to an adult who is spending time with a child under 16 (or under 18 if looked after by the local authority) if the police think the adult may be harmful to the child. The notice can prohibit contact between the adult and the child. It has no statutory authority in that a breach of the notice is not a criminal offence but can be a powerful tool in discouraging contact between an adult and vulnerable child; Sections 104 to 129 of the Sexual Offences Act 2003 (as amended) allow for Sexual Harm Prevention Orders (SHPO) and Sexual Risk Orders (SRO) which can only be made by a court, on application by the police, and can impose restrictions on a known perpetrator. SHPOs apply to those convicted of a sexual offence and last for a minimum of five years and SROs apply to those who have not been convicted (but where the court is satisfied that there is a risk) and apply for a minimum of two years. These orders allow for the placing of any relevant conditions on the perpetrator including on their internet use, or a prohibition from approaching or being alone with a named child, or a limit on travel abroad. Under the Anti-social Behaviour, Crime and Policing Act 2014, the police can close down premises used to commit child sex offences. Where the police believe hotels or similar places are being used to commit child sex offences they can also also request the names and addresses of hotel guests (section 116).

The inspections comprised self-assessment and case audits carried out by the force, and case audits and interviews with police officers and staff and representatives from partner agencies, conducted by HMIC. To date eight forces have been inspected and reports published.

An analysis of all these child protection inspection reports is the core of this thematic report.

In addition to these individual force reports, HMIC has:

- undertaken inspections on certain child protection themes including evidential interviews\(^\text{19}\) and online exploitation;
- published reports jointly with other inspectorates on other aspects of police and criminal justice agencies' work with children and young people, for example in respect of youth justice;\(^\text{20}\)
- undertaken thematic inspections on matters that include children, for example the treatment of offenders with learning disabilities,\(^\text{21}\) the welfare of vulnerable people in police custody\(^\text{22}\) and domestic abuse,\(^\text{23}\) and
- reviewed areas of police practice that has an affect in all police work, such as the management of resources.\(^\text{24}\)


As well as undertaking its own inspections, HMIC commissioned work from the National Society for the Prevention of Cruelty to Children (NSPCC) to identify common impediments that prevented Jimmy Savile’s victims from reporting crimes to police at the time of the abuse, and to explore further how police could improve their management of the reporting process and of subsequent interviews and contacts.\(^{25}\)

In total, 21 reports have been analysed for this thematic report. As part of the National Child Protection Inspections, cases are analysed using an assessment framework structured around the child which focuses on how well children are protected and their needs are met. It also provides the reporting structure for this report. A more detailed outline of the inspection methodology and the assessment criteria used by HMIC in this context is set out at Annex A.

**Understanding child abuse and neglect**

Harm can take many forms. There is no single, clear definition of what constitutes harm, nor how serious the risk of harm should be before the state uses its authority to intervene. Some forms of abuse, such as violence against children, or sexual activity with a child are well understood. The indicators of risk such as alcohol or drug misuse, parental violence and the presence of violent partners in the home are also well understood, if not always acted upon. Some newly identified forms of abuse (or new means of gaining access to children in order to abuse them) are less well understood and agencies are only beginning to develop appropriate responses.

Operation Yewtree revealed the extent to which powerful and famous people have been able to abuse children with impunity over a number of years. As each new case is exposed to the glare of publicity, previous victims come forward to disclose abuse. These crimes require fresh investigations and support for victims throughout the process. The recently established statutory inquiry on child abuse, led by Justice Goddard, is likely to reveal further distressing cases with a concomitant rise in disclosures over the coming months and years.\(^{26}\)

The public has been shocked by the revelation of groups of men sexually abusing vulnerable girls, most notably in Oxford and Rotherham. As police forces have begun to look more closely at what is happening in their force areas, so more crime has been identified. Forces are reporting to inspectors significant increases in this area of work.

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\(^{26}\) The statutory independent inquiry into child sexual abuse has been set up to consider whether, and the extent to which, public bodies and other non-state institutions have taken seriously their duty of care to protect children from sexual abuse in England and Wales.
Changing demographic patterns, and cross border legal and illegal movements of people, have brought new concerns such as trafficking for the purpose of sexual or labour exploitation, female genital mutilation, so-called honour-based violence and forced marriage.

The few, but increasing, numbers of young people joining the Islamic State in Syria and elsewhere or at risk of being drawn into extremism, has led to concerns about the extent to which adults, and other young people, are able to manipulate and groom young people into behaviours that present a danger to them and to others.

The capacity and capability of agencies to address the rise in online harassment, sexual abuse and exploitation, and the production of indecent images, has not kept pace with the growth of these activities.

Recent research has shown that peer bullying rather than abuse by adults has the most severe and long term impact on children. Peer bullying has long been one of the three major concerns (together with depression/unhappiness and family relationships) that is raised by children with ChildLine. Dealing with these behaviours without criminalising children is a new and growing challenge.

We are confident that better approaches to tackling these problems will emerge, but this will take time. Meanwhile, referrals about suspected child abuse and neglect in their familiar forms continue to rise. Spikes in referrals follow the publication of, for example, the reports on individual cases of abuse and neglect and the publicising of the sexual exploitation of vulnerable girls in Rotherham and elsewhere.

Serious case reviews and other inquiries continue to document weaknesses in the child protection system across all relevant agencies including:

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30 Following the publication of Professor Alexis Jay’s report into sexual exploitation in Rotherham, Channel 4 News sought, under the Freedom of Information Act 2000, data from the largest 150 local authorities in England. The survey found 3,009 children had been referred or were known for CSE in the previous five months compared to half that number of the whole of the 12 months of the previous year.

31 The NSPCC website publishes all serious case reviews and summarises report findings thematically and by professional group including the police. See also: New Learning from Serious
• failure to identify abuse and neglect and respond to it;
• failure to understand fully a child’s circumstances and plan to change them;
• poor collaboration between agencies concerning the individual circumstances of the child; and
• a failure to listen to children.

Serious case reviews on child death where abuse or neglect is suspected continue to highlight the association between a high incidence of domestic abuse and subsequent serious harm to a child. The indications are that agencies have more to do to address the risks posed by violence in the home.

The increase in referrals has come at a time when resources for dealing with them have reduced. Most police forces have protected (or increased) budgets assigned to police work with vulnerable people. Local authorities have also afforded some protection to the budgets for child protection but in neither case have resources been systematically allocated to keep pace with the demand.

Economic pressures also affect families. Although most families will care for their children well, irrespective of their income, this is not true for all. Some parents can achieve a minimum standard of child care when material and familial conditions are good but cannot sustain this when living in poverty or when unemployment threatens family relationships. They do not have the personal or economic resources to prevent a collapse of the family. In these families neglect is the most likely

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33 For example, the case of Daniel Pelka, aged five, who died at the hands of his mother and her partner. Since his birth, the boy’s mother had had three long-term relationships with violent men. Serious Case Review Re Daniel Pelka, Lock, R, Coventry Safeguarding Children Board, 2013. Available from: www.coventrlyscb.org.uk/dpelka.html


consequence, but abuse can also occur when parents are under stress. While budgets for statutory child protection work may have been sustained over the past few years, the financial, educational and supportive resources that might prevent a family neglecting or abusing their children may no longer be available.\(^{37}\)

Research indicates that there is a lack of public confidence in the child protection system,\(^{38}\) which is further diminished with the publication of each report where failures are identified. However, these reports also lead to a rise in referrals from the public.\(^{39}\) Recent cases of CSE show the extent to which victims experience ‘system abuse’ (secondary abuse through the implementation of agency or court processes in hostile or indifferent ways).\(^{40}\) Even if trust might be high at the outset, any subsequent failure to address the risk and contain the perpetrator leaves children (and their families) at risk of further abuse or violence.\(^{41}\) Some children and their families find the intervention of child protection agencies helpful, but they do not always understand the processes or what is expected of them.

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\(^{41}\) Ibid.
They are confused about why they are considered to be at risk, and many feel the constant focus on the negative elements in their lives is demoralising.\textsuperscript{42}

In spite of all the difficulties faced by agencies tackling child abuse and neglect, there are some welcome signs of change. According to the NSPCC, children in England and Wales were nearly three times more likely to die from an assault 30 years ago than they are today, and parents are much less likely to punish their children physically.\textsuperscript{43} Teenage pregnancies continue to decline, enabling more girls to mature and be more resilient before becoming a mother. The most recent annual appraisal of drug and alcohol misuse would suggest that drug misuse by children has peaked and begun to decline, and alcohol misuse among children is at its lowest level for a long time.\textsuperscript{44} Given the strong association between alcohol or drug misuse and child abuse and neglect, this reduction should, of itself, have a significant impact on the numbers of children subject to abuse and neglect.\textsuperscript{45}

**Understanding child vulnerability**

Children are vulnerable simply because they are children. Unless closely supervised, young children are at risk from all sorts of physical dangers within the home and the local environment. Older children have limited life experience and/or emotional maturity. This, coupled with developmental brain changes associated with greater risk taking, can lead to foolhardy decisions by young people or the inclination to communicate with those who desire to harm them.\textsuperscript{46}

Many risky behaviours are ‘peer led’ and, unsurprisingly, teenagers do get drawn into anti-social behaviour such as behaving in a noisy and objectionable manner, offending, engaging in drug or alcohol misuse, ‘sexting’ (sending sexually explicit


texts to friends). There is a significant amount of evidence that their capacity for cruelty towards each other, particularly online, should not be underestimated.\textsuperscript{47} The boundary between victim and perpetrator may be blurred in some cases. For example, the former Child Exploitation and Online Protection Centre (CEOP) reported in 2011 that girls who are or have been sexually exploited are also sometimes responsible for recruiting other girls for abusers.\textsuperscript{48}

Most children nonetheless mature into law abiding adults.\textsuperscript{49} It is now well established that too much official intervention is often unhelpful in cases of ‘adolescent-limited anti-social behaviour’ and even ‘diversionary’ measures (involving a non-court disposal), such as administering a caution, may increase the likelihood of future offending if administered at too early a stage.\textsuperscript{50}

The phenomenon of adults enticing children to commit criminal activities is far from new. What is new, however, is the widespread, global trafficking of children for this express purpose, or for the purpose of sexual or labour exploitation.

In an environment where children are not cared for, abandoned even, they may form relationships with those who offer them shelter, attention and material possessions or drugs. Trafficked children are made vulnerable in the first instance, primarily because of their families’ poverty in their own country.

Both research and the facts of cases that have come to court have revealed the sophistication of many child groomers. Tactics used to attract children include disguising identity to appear as a child, and the use of online social networks and friendship groups to engage children who would not normally respond to an approach by a strange adult. Sometimes the level of sophistication is such that, even following a conviction, a child may not understand that he or she was, in fact, a targeted and a disposable victim, and by no means ‘special’ to the offender.\textsuperscript{51}

\textsuperscript{47} \textit{The impact of cyber-bullying on young people’s mental health}, O’Brien N and Moules T, Anglia Ruskin University, 2010.


\textsuperscript{49} Ministry of Justice statistics indicate the peak age for re-offending is 15 to 17: \url{www.gov.uk/government/uploads/system/uploads/attachment_data/file/424822/proven-reoffending-jul12-jun13.pdf}


Some children are more vulnerable than others – children who have already experienced abuse or neglect are more vulnerable to being abused again. Children living in poorer localities may be exposed to greater risks, such as drug-taking or violence between gangs, than children living in better off areas. When living in a poorer area, with little space within the home, and few safe outdoor play areas, exercising parental control or oversight is inevitably more challenging. Children with a disability are at greater risk of abuse, and may be less able to articulate what has happened to them. Abused and neglected children are more at risk of future criminality, and looked after children are significantly over-represented in the criminal justice system and in prison. In short, the most vulnerable children are at the most risk of further vulnerability.

Given the links between abuse, neglect and later offending, as a child grows, there is considerable crossover in the work of police forces. For example, they may be looking for a missing adolescent girl who was first known to them as a young child living with domestic abuse, who is now at risk of sexual exploitation and also on the police radar as a young offender ‘looked after’ by the local authority and living in a children’s home.

While young children who are reported to the police are usually victims of offending, many older children who regularly come into contact with the police are likely to be both troubled and in trouble. Most European legal systems recognise this with a single adjudication system for children about whom offending or care concerns arise; this includes the Scottish legal system. In England and Wales, however, the distinction made between ‘offender’ and ‘victim’ or the designation ‘child in need’ leads to a divergence in both perception and treatment. The main focus of criminal justice is punishment and the reduction of offending, whereas the primary focus of social care is the protection and wellbeing of the child. As a result, opportunities for the police to safeguard a child who comes to their attention because of offending may be lost. An example of this is the child who commits a criminal offence because of the influence of an exploitative adult. Furthermore, a child who is treated as a criminal and detained overnight in a cell, may be less likely to approach the police on another occasion, were they to be the victim of an offence.

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It is within this complex and changing environment that police forces have a duty to protect and safeguard vulnerable children yet, at the same time, ensure that those children do not pose a serious risk to others.
Chapter 2 - the nature and extent of concern

The Ministry of Justice publishes data on prosecutions for violent and sexual offences but this is not broken down by reference to the age of the victim. There is no information held centrally about the number of cases the police investigate which relate to children.

Estimates of children at risk

According to the last census there were 10,579,132 children under 16 and 11,970,367 children under 18 residing in England and Wales on 27 March 2011.55

The NSPCC’s 2014 report How safe are our children? estimated that the number of children in the UK at risk of abuse and neglect by counting the number of children who are known to be exposed to high risk factors.56 The number of children affected by factors such as low parental capacity, social isolation and parental history of abuse is unknown. Of the rest, the NSPCC calculated that between 250,000 and 978,000 children were living in drugs-misusing households, 50,000 children had a parent who was mentally ill and almost 1.8 million children were living with domestic violence. On the assumption that some of the categories will overlap, at a conservative estimate, there must be over 2 million children in the UK at risk of abuse or neglect i.e. about 14 percent of all children under 1857, most of whom will be at risk from living with a violent parent or other household member. The impact of domestic violence on children58 and the strong association between a history of domestic violence and child deaths59 is well known. The large numbers of children


living in households where there is domestic violence, coupled with the gravity of those risks must represent the most serious child safeguarding concern that the child protection agencies are required to address.

**Sexual offences**

Based on a survey of young people (or their parents if aged ten or younger) undertaken in 2011 the NSPCC estimated in their 2014 report that there were 73,900 child victims (under 16 years old) of sexual abuse in 2012/13. Further analysis of the same data undertaken for the NSPCC 2015 report showed that, 11.3 percent of 18-24 year olds reported having experienced ‘contact’ abuse when under the age of 18. Just under 5 percent of 11-17 year olds reported to the survey that they had experienced contact sexual abuse. Under 18s, however, were surveyed only with their parent's permission.

The NSPCC also estimated (through an information request to every police force) the number of cases of child sexual abuse reported to the police and the number of those cases that result in a finding of guilt. The percentage of incidents of sexual abuse (reported to the survey) that were also reported to the police is unknown. Cases reported to the police in one year might not be processed in the same year and so the figures do not necessarily show the ratio of convictions to police reports. A number of offenders may have multiple victims and a number of victims may be victimised on more than one occasion. Across England and Wales in 2012/2013 the police recorded 18,700 offences – 3,600 defendants were called to court and 2,100 offenders were found guilty. Even with the caveats noted above, these figures suggest a considerable amount of under-reporting and a low level of prosecutions.

The NSPCC 2015 report provides information about the number of offences reported to, and recorded by the police, but does not provide information on the number of defendants called to court or the level of convictions. This latest report notes that there were 29,792 sexual offences against children under 18 recorded in England and 1,446 in Wales (the 2012/13 figures combined England and Wales). The increase in England is 39 percent in the past year.

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60 *Child Abuse and Neglect in the UK today*, Radford et al, NSPCC, 2011.


Figures published by the Office for National Statistics (ONS) show that the current levels of recorded sexual offences and the year on year increases are the highest since the introduction of the National Crime Recording Standard in 2002/03 and show an increase of around 50 percent from 2011/2012.

Previous publications from ONS noted that reports of offending from the past contributed significantly to increases, but recent data now shows that this phenomenon has slowed, and the more recent increases are driven by reporting of contemporary offences. Given the number of current investigations into non-recent sexual abuse such as those being undertaken in respect of publicly prominent people, and other investigations undertaken by the Metropolitan Police Service and forces round the country, the balance between reported current and non-recent cases may shift again.

![Number of offences](image)

**Figure 1 Number of offences**

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64 Operation Hydrant.

The table below contains the number of recorded rapes against children, the number of recorded rapes against children that were subsequently ‘no crimed’ and the number of cases that were charged or summonsed. Each figure is the total for police forces in England and Wales.

<table>
<thead>
<tr>
<th>Year</th>
<th>Recorded rapes</th>
<th>Rape “no crimed”</th>
<th>Charge or summonsed</th>
</tr>
</thead>
<tbody>
<tr>
<td>2009/10</td>
<td>5,674</td>
<td>434</td>
<td>1,871</td>
</tr>
<tr>
<td>2010/11</td>
<td>6,035</td>
<td>446</td>
<td>2,015</td>
</tr>
<tr>
<td>2011/12</td>
<td>5,878</td>
<td>380</td>
<td>1,921</td>
</tr>
<tr>
<td>2012/13</td>
<td>6,321</td>
<td>330</td>
<td>1,878</td>
</tr>
<tr>
<td>2013/14</td>
<td>7,775</td>
<td>361</td>
<td>2,306</td>
</tr>
</tbody>
</table>

Table 1. Rapes against children

The Ministry of Justice publish a quarterly update of criminal justice statistics. There were 16 cautions administered for rape offences in 2014, compared with 20 cautions in 2013. Of these, 14 were administered to juveniles (i.e. 10-17 year olds) and 2 were administered to 18 year olds.

Of the 16 cautions administered in 2014:

- One was for rape of a female aged under 16;
- Six were for rape of a female under 13 by a male (including one administered to an 18 year old);
- Seven were for rape of a male under 13 by a male (including one administered to an 18 year old);
- One was for attempted rape of a female under 13 by a male; and
- One was for attempted rape of a male under 13 by a male.

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67 Refers to an incident that was initially recorded as a crime but has subsequently been found not to be a notifiable crime on the basis of additional verifiable information. This is now termed a “cancelled crime”.

**Child trafficking**

Six hundred and seventy one potential child victims (17 or under at time of first exploitation) across the whole of the UK were referred to the National Referral Mechanism in 2014. The numbers of adults and children combined were 2,340; an increase of 34 percent on the previous year. Ninety percent of the referrals came from England. The reason for trafficking was unknown in 236 cases. Of the remainder, children were most frequently trafficked for labour exploitation (201) followed by sexual exploitation (91 for non UK nationals and 61 for UK nationals). Boys were more likely to be exploited for their labour and girls were more likely to be sexually exploited. Albania (117), Vietnam (109), UK (75) and Slovakia (72) and Nigeria (54) were the five highest source countries.

**Child sexual exploitation**

There is no specific offence of CSE and it is defined in government guidance and policy as involving:

exploitative situations, contexts and friendships where young people (or a third person or persons) receive 'something' (e.g. food, accommodation, drugs, alcohol, cigarettes, affection, gifts, money) as a result of performing, and/or others performing on them, sexual activities.

Sexual exploitation may begin as a ‘reward’ based transaction but then may become coerced and constitute a criminal offence of rape or sexual assault.

The Office of the Children’s Commissioner estimated that 16,500 children were at risk of child sexual exploitation between April 2010 and March 2011 with 2,400 children identified as victims of exploitation by gangs, groups or networks between August 2010 and October 2011. In 2014, Professor Alexis Jay’s report into CSE in

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71 “I thought I was the only one. The only one in the world”. Inquiry into Child Sexual Exploitation in Gangs and Groups, Interim Report, Berelowitz, S et al, Office of the Children’s Commissioner, November 2012. Available from: [www.childrenscommissioner.gov.uk/sites/default/files/publications/%20thought%20I%20was%20the%20only%20one%20in%20the%20world.pdf](http://www.childrenscommissioner.gov.uk/sites/default/files/publications/%20thought%20I%20was%20the%20only%20one%20in%20the%20world.pdf)
Rotherham estimated that there may have been as many as 1,400 girls exploited in and around Rotherham alone.\(^\text{72}\) The College of Policing, in its report on police crime activity, notes that the referrals to the Metropolitan Police increased from 445, in the six months from 1 April 2013, to 1,442 over the same period in 2014.\(^\text{73}\) These figures suggest that in large urban areas there may be as many as a thousand potential victims, and the numbers are increasing as police skills in identification increase.

Patterns of exploitation/abuse identified by the Office of the Children’s Commissioner included adult men abusing children (boys and girls), older children recruiting younger children (usually girls recruiting girls), the abuse of children (usually girls) by other children of a similar age within ‘gangs’ (usually boys but sometimes at the instigation of girls as a form of ‘punishment’), or networks of young males attacking targeted girls living on an estate.

Social media may be used to facilitate an attack or children may be sexually exploited online. In 2012, CEOP estimated that around 50,000 individuals in the United Kingdom were involved in downloading and sharing indecent images of Children in 2012.\(^\text{74}\) Our online CSE report *Online and on the edge: real risks in a virtual world. An inspection into how forces investigate online child sexual exploitation*, notes that although the number of indecent images on a suspect’s computer is an unreliable indicator of the level of risk (some offenders having hundreds of thousands of images) the volume is an indicator of the widespread availability of such images.

About 20 percent of children aged between 11 and 17 years of age say they have been approached sexually online\(^\text{75}\) and around 10 percent of children aged 9-16 have been exposed to pornography online;\(^\text{76}\) many of whom have either sought it or


are willingly exposed to it.\textsuperscript{77} Twenty percent of indecent images of children posted on the internet are pictures taken by the children themselves.\textsuperscript{78}

Munro’s 2011 publication also found that in 69 percent of detected cases no attempt had been made by the offender to meet the young person they were grooming, suggesting that, for some, online activities were an end in themselves. CEOP, however, found a closer correlation of online abuse with real life abuse.\textsuperscript{79}

\section*{Missing children}

The associations between children who go missing and the risk of sexual exploitation are strong. The National Crime Agency’s annual report on missing people recorded 77,965 cases of children missing from home. Not all police forces were able to breakdown the data by age, and the NCA estimates this was about 45 percent of the total number of cases of children who went missing from home (some children might have been missing on more than one occasion).\textsuperscript{80} Missing children accounted for about 64 percent of those who went missing with 36 percent being in the 15-17 year old age group. About one fifth go missing from a care facility (residential home, hospital or mental health facility). The police found 43 percent of those who went missing, the remainder being found by family members, care staff or other people.

\section*{Violent offences}

The Home Office Homicide Index\textsuperscript{81} shows 526 homicides (murder, manslaughter and infanticide) were committed in 2013/14 in England and Wales. Forty six of these victims were under 16 of whom 23 were killed by a parent or step-parent. Babies (children under a year old) were the most vulnerable to homicide.

The Crime Survey for England and Wales (2014) estimated that there were 445,000 violent offences against children (aged 10-15) in the previous year. This means 6.5

\textsuperscript{77} The protection of children online: a brief scoping review to identify vulnerable groups, Munro E, Childhood Wellbeing Research Centre, 2011.


percent of children were victims of violent crime during in the year with 4.5 percent having experienced violence with injury. Twenty two percent of young victims of violence thought the incident was a crime; 45 percent thought it was wrong but not a crime; and 33 percent thought it was just ‘something that happens’.

Fifty five percent of incidents were perceived by victims to be part of a series of bullying incidents.\(^{82}\) The survey which is by self-report does not, however, interview very young children and does not interview older children in respect of sexual offences.

**So-called honour-based violence**

Prior to June 2014, and the passing of the Anti-social Behaviour, Crime and Policing Act 2014, forced marriage was not a specific offence and it will be some time before comprehensive crime data concerning it will be available.

According to the CPS\(^{83}\), forced marriage referrals from the police rose to 67 in 2013-14 – from 59 in 2012-13. Prosecutions rose to 45 – from 41 in 2012-13 with a 71 percent success rate. Police referrals of offences related to so-called honour-based violence also rose in 2013-14 to 240 – from 230 in 2012-13, of which 65.8 percent were charged.

In the year January to December 2013, the joint Foreign and Commonwealth Office and Home Office forced marriage unit,\(^{84}\) gave advice or support relating to possible forced marriage in 1,302 cases (1,485 cases the previous year). Of these, 82 percent were female and 18 percent male. Most were under 21 years of age (nearly 75 percent). Forty percent were under 18 and 15 percent of victims were under 16. The recorded age is at the point of first contact and the figures include those who are at risk and people who are already married, perhaps some years previously. It is therefore likely that at the point when marriages were being planned/implemented, the victims were likely to be younger than the figures provided here.


Police detention

National figures on police detention of children are not kept. In 2013/14, an estimated 236 (31 percent) of 753 under 18 year olds detained under section 136 of the Mental Health Act 1983, were held in police cells. In HMIC’s report, *The welfare of vulnerable people in police custody*, published earlier this year recorded 10,421 young people in police custody in the 12 months prior to the inspection from the six forces they inspected. The report estimated that their data accounted for about 10 percent of the England and Wales police custody throughput.

The Howard League for Penal Reform undertook a study of overnight police detentions covering the year 2010-11. The study estimated that 15 percent were girls and 27 percent were from black and minority ethnic groups.

Child protection and children’s social care statistics

The Department for Education publishes an annual statistical bulletin of the number of children supported by children’s social care services. In the year 2013-14, there were 657,800 referrals to children’s social care services in England (more than one child may have been referred at a time and some children may have been referred more than once in the year). This demonstrated a 10.8 percent increase in referrals compared with the previous year’s figures (593,500). Nearly a quarter of referrals were from the police.

In the same year, 142,500 ‘section 47 enquiries’ (enquiries undertaken by children’s social care services when there are concerns about abuse or neglect) were carried out – an increase of 12.1 percent on the previous year. The number of children made the subject of a child protection plan was 59,800. The percentage of referrals


88 Ten years old in England and Wales. More information can be found at: www.gov.uk/age-of-criminal-responsibility

culminating in a child protection plan has remained largely static at around 8 or 9 percent. The annual survey of children subject to a child protection plan on 31 March 2014 indicated 48,300 children were subject to a plan, an increase of 13.5 percent on the previous year and an increase of 23.5 percent since 31 March 2010.

There were 397,600 children in need at 31 March 2014. This demonstrated an increase of 5.0 percent from 378,600 at 31 March 2013 and 47.2 percent were in need, primarily through abuse or neglect. On the same day there were 68,840 children who were looked after by the local authority (in the care of the local authority), an increase of 1 percent over the previous year and an increase of 7 percent compared to 2010. Children on a child protection plan, children who are looked after and children in need tend to be the children thought to be most at risk (or previously found to be at serious risk in the past). The total number of children on a child protection plan, looked after or in need was 514,740 (just over 4 percent of the child population in England and Wales).

It is widely accepted that the recent media focus on cases of child sexual abuse has increased the number of referrals in this area. In the past, referrals for cases of neglect and maltreatment have risen following highly publicised cases such as that of Baby Peter. The NSPCC’s 2015 self-report survey noted that 25.3 percent of 18-24 year olds surveyed in the UK reported having experienced severe maltreatment in childhood. The report also notes the steady increase in calls to the helpline regarding neglect from about 6,000 in 2007-2010, rising to nearly 18,000 in 2014/2015. In respect of abuse and neglect calls to the helpline, neglect is overwhelmingly the most frequently raised concern. The next largest concerns (within the category of abuse and neglect) are physical abuse, (under 12,000 calls) and sexual abuse (just over 8,000 calls).

**Race and ethnicity**

Recent cases of forced marriage, female genital mutilation and the sexual exploitation of girls in places such as Rotherham and Oxford, have led to questions about race and ethnicity of both victims and offenders. Since forced marriage and female genital mutilation are most prevalent in those communities that practice them in their country of origin, understanding the ethnic and cultural dimension of such crimes is important.

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It is not possible to answer these questions concerning race and ethnicity of victims and offenders on the information currently available. We found little evidence of forces undertaking any analysis of victims' and offenders' profiles to inform the services that they provide. Both former CEOP\textsuperscript{92} and the Office of the Children's Commissioner for England\textsuperscript{93} have profiled the characteristics of those who exploit children and those at risk of exploitation. The CEOP report looked at the relationship between sexual exploitation and ethnicity. The biggest single ethnic group reported in the study was ‘unknown’ and CEOP noted that recorded data was very poor. Asian, particularly Pakistani men were over-represented as offenders in comparison with their proportion in the general population. CEOP concluded, however, that the nature of the offenders’ jobs as taxi drivers or working in fast food outlets as part of the ‘night-time economy’ was more relevant than their ethnicity.


Chapter 3 - Findings

Summary of findings

As part of our National Child Protection Inspections, each police force was asked to undertake a self-assessment of a number of cases, usually about thirty. Inspectors also assessed these cases and many more in addition. Both sets of assessments were broadly similar in that they noted the same good practice or errors in practice. Although the marking of the self-assessors tended to be higher than that of the inspectors, there was evidence of depth of analysis and attention to detail by the self-assessors. Very few of the assessments were superficial, but those that were raised concerns about the capability of the force, or one part of the force, to examine its own work critically. Some forces used the exercise to inform and improve practice locally.

The table below collates the inspectors' findings.\(^{94}\)

<table>
<thead>
<tr>
<th>Area</th>
<th>Good (includes one excellent case)</th>
<th>Adequate</th>
<th>Inadequate (including cases assessed as requiring improvement and poor)</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Force A</td>
<td>Not recorded</td>
<td></td>
<td></td>
<td>81</td>
</tr>
<tr>
<td>Force B</td>
<td>37 (45%)</td>
<td>20 (25%)</td>
<td>24 (30%)</td>
<td>115</td>
</tr>
<tr>
<td>Force C</td>
<td>24 (21%)</td>
<td>34 (30%)</td>
<td>57 (50%)</td>
<td>114</td>
</tr>
<tr>
<td>Force D</td>
<td>37 (32%)</td>
<td>49 (43%)</td>
<td>28 (25%)</td>
<td>114</td>
</tr>
<tr>
<td>Force E</td>
<td>26 (27%)</td>
<td>27 (28%)</td>
<td>44 (45%)</td>
<td>97</td>
</tr>
<tr>
<td>Force F</td>
<td>13 (37%)</td>
<td>9 (26%)</td>
<td>13 (37%)</td>
<td>35</td>
</tr>
<tr>
<td>Force G</td>
<td>20 (32%)</td>
<td>23 (37%)</td>
<td>20 (32%)</td>
<td>63</td>
</tr>
<tr>
<td>Force H</td>
<td>20 (28%)</td>
<td>17 (24%)</td>
<td>34 (48%)</td>
<td>71</td>
</tr>
<tr>
<td>Total</td>
<td>177 (31%)</td>
<td>179 (31%)</td>
<td>220 (38%)</td>
<td>576</td>
</tr>
</tbody>
</table>

Table 2: Table of conclusions reached by inspectors

The table shows variations across forces. The percentage of good cases varies between 45 and 21 percent and poor cases between 50 and 25 percent. In only one force were 75 percent of cases assessed as being adequate or better. Taken as an average figure overall, 38 percent of cases were assessed as inadequate.

This is consistent with the findings from HMIC's national online CSE inspection, *Online and on the edge: real risks in a virtual world. An inspection into how forces investigate online child sexual exploitation* in which 52 percent of cases examined

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\(^{94}\) In the first police force area, the inspectors’ assessments of cases were not recorded in the report.
were found to be inadequate or requiring improvement. Variation between forces was found to be much wider. In HMIC’s inspection, *Online and on the edge: Real risks in a virtual world. An inspection into how forces investigate online child sexual exploitation*, we found that inadequate cases varied from 28 percent of the total number of cases in the best force, to 72 percent of the total in the worst.

Overall, in its most recent annual assessment of forces,\(^5\) HMIC rated 39 out of 43 forces as good in preventing crime and reducing offending, one as outstanding and three as needing improvement. Reports from our National Child Protection Inspections and other child related reports do not rate the forces individually so direct comparisons cannot be made, however, they do suggest that across England and Wales child protection practice is weaker than the general practice of police forces overall.

There is no national benchmark for what might constitute a ‘good’ force or ‘good’ policing of child protection. However, it is our view that if over a third of cases are assessed as ‘inadequate’ or needing improvement, this is a serious cause for concern.

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Chapter 4 - the experiences, progress and outcomes for children who need help and protection

Initial contact

Initial contact with the police may be through:

- a report about abuse or neglect from a family member, neighbour or the public;
- a concern or enquiry raised by another agency;
- information or intelligence gathered in another investigations; or
- a report of a child offending.

Initial contact may be with ‘call handlers’ (those who answer the telephones when the police are called), a police officer or a police community support officer in a public place, or at a suspect or victim’s home, or by arrangement, when an investigation is being undertaken by a specialist team. Most reports by other agencies of abuse and neglect will come through to specialist teams via designated routes. Most calls from members of the public will come through to the control room and will be dealt with at first by call handlers.

HMIC’s report on crime recording[^96] found that crimes were more likely to be properly recorded as crimes when taken by call handlers. Reports from external agencies that went directly to specialist teams were more likely to be treated as a ‘concern’ rather than a crime. The National Child Protection Inspections found that control room staff understood child vulnerability, its priority for the force, and the importance of gathering information about children involved or exposed to the incident.

Call handlers scanned police information systems for relevant information and passed information to response officers. It was noted in most of the inspection reports, and particularly in our most recent report on information management *Building the picture: An inspection of police information management*,[^97] that call handlers did not have ready access to all the relevant information held on different police systems.


For example, call handlers might not be able to find out, without undue delay, whether a child was subject to a child protection plan or if an adult was on the sex offender register. In sending an officer to an incident, call handlers prioritised information that might have an impact on the officer’s safety, but had insufficient time to find and relay information about previous concerns connected to the child in question.

While every contact a police officer and or staff member has with a victim or an offender may affect future interactions and engagement, the first contact will set expectations for all subsequent encounters. Inspectors noted that call handlers were empathetic, respectful and reassuring. The questions they asked of callers were relevant and their approach provided a firm basis for the next stage of investigation or enquiry.

In all eight areas inspected in the National Child Protection Inspections, where the initial concern reported to the police was clearly a child protection matter and was allocated to a specialist team, the police response was invariably good. We found that:

- officers responded promptly and attended scenes promptly in all force areas, except one;
- officers obtained good information from witnesses;
- officers engaged sensitively and well with children and families; and
- officers worked well with children’s social care services to decide next steps.

A 12-year-old girl with learning disabilities had been assaulted by her mother following an argument. A joint visit was made to the school by police and children’s social care services. The girl was spoken to with the support of the school nurse, and her concerns listened to. Her special needs and her wishes were taken into account. She stayed with her mother, with the support of a social worker, while the investigation continued (National Child Protection Inspection report).

If a concern was not immediately identified as being ‘child protection’ if, for example, the call was about domestic abuse or a missing child or a child offending and the case was not allocated to a specialist team, the response was very mixed. It varied from excellent to poor. Some police officers and staff clearly understood the needs of children and identified the risks to which they were exposed, while others did not.
The evidence showed that all forces had embarked on programmes to improve responses to CSE and missing children; increased expertise was leading to improved responses, but programmes were at different stages of development.

The difficulties faced by call handlers in obtaining information quickly were also evident in other parts of the force. All the reports of the National Child Protection Inspections and HMIC’s other child related reports⁹⁸ found that officers did not always have the necessary information to hand when making initial decisions about how best to respond. This was because information was kept on a number of discrete data bases. This lack of information led, at times, to inappropriate responses, for example, not arresting a regularly violent man in the mistaken belief that he had never previously been violent towards his partner or children.

Assessment and help

All forces had systems in place to receive concerns, undertake initial police enquiries, and either work with other agencies to resolve the concern or inform other agencies of police action. Systems were also in place to oversee decisions and further action. Inspectors saw some very good examples of the police working with other agencies to protect children and enable continued support to be provided.

Inspectors also saw a number of examples of poor assessment and help, particularly in cases of domestic abuse, CSE, children missing from home and children detained in custody.

Children involved in a domestic abuse incident or who returned, having been missing from home were often not seen by the police or other agencies in order to check that they were safe and well. Furthermore, children were spoken to in the presence of parents who might influence the child’s account. Children’s views, behaviour and


Online and on the edge: real risks in a virtual world. An inspection into how forces investigate online child sexual exploitation, HMIC, July 2015.
demeanour were not recorded, making it difficult to assess the impact of incidents on them or to assess the level of harm to which they might be exposed.

Most forces had systems in place for assessing the risk to children who were involved in an incident that was not understood at the outset as one of child protection (such as domestic abuse or a child missing from home). Inspectors found case examples where risk was underestimated, sometimes significantly so. Oversight systems did pick up a number of these cases and officers were required to obtain more information and to reassess the case.

Forces' consideration of the risks an offender or suspect posed to children, other than the named victim, was mixed. The online CSE inspection *Online and on the edge: Real risks in a virtual world. An inspection into how forces investigate online child sexual exploitation*, found this to be a particular weakness. In our child protection inspections, and where registered sex offender teams were involved, there was better understanding of wider risks and the action that needed to be taken.

Underestimating risk was most likely to occur when officers did not take account of previous behaviour or of the impact of the incident upon the child, or of any new information indicating that a risk was higher than previously thought. Inspectors saw cases where a great number of domestic abuse incidents (in one family 35) had been recorded and information passed to social care services before agencies got together to plan help and protection for children. Inspectors were told that in some forces, the volume of unfiltered concerns being passed to children’s social care services made it impossible for the services to give due consideration to each child.

In most forces, information about children assessed as at low or medium-risk of further harm was passed on to children’s social care services. In high-risk cases, the child’s situation might be discussed with children’s social care services in a ‘strategy discussion’ in which information is pooled and a decision is made about whether further enquiries are needed. Inspectors did not see many cases where strategy meetings or telephone discussions had taken place, but they did see cases where they thought a strategy discussion should have been initiated by the police. For the most part, however, the risk assessment was recorded on police systems and passed to children’s social care services rather than being used as a stimulus for action.

Children who might need additional help were identified in those areas that had a well-developed multi-agency safeguarding hub. However, even where these were in operation, inspectors found many examples of delay, poor or superficial investigations, and a general lack of help for children in some of the forces inspected. Inspectors questioned the effectiveness of multi-agency risk-assessment conferences (MARACs) for cases involving children: it was not always clear what had been decided or how agency action would improve a child’s circumstances or
reduce risk. Lack of follow up or review also meant the effectiveness of these processes was unknown.

The joint inspection on achieving best evidence, *Achieving best evidence in child sexual abuse cases – A Joint Inspection*, 99 found that in only 13 of 69 interviews viewed by inspectors was there evidence that the interviewer had completed a pre-interview assessment of the needs and capabilities of the child. In the online CSE inspection, *Online and on the edge: Real risks in a virtual world. An inspection into how forces investigate online child sexual exploitation*, 100 inspectors saw cases where the risk of CSE had been identified, together with some excellent examples of thoughtful, planned inter-agency working. However, they also found cases where very little protective work was either considered or undertaken. 101

Together, these findings suggest the police are not yet giving sufficient consideration to the needs of individual children, and deciding on next steps in the light of that consideration. This lack of attention may be a contributory factor to the poor investigations and poor assessments that we found.

The quality of this early planning work is crucial. Good evidence is the cornerstone of plans for protecting children and the prosecution of offenders who may pose a risk, not only to the victim but to other children. Acting or investigating without paying thoughtful attention to the vulnerability and needs of a child, risks causing further harm – particularly when interviews have to be repeated or stopped and restarted when it becomes clear that additional support, such as that of an intermediary, 102 will be needed. The joint inspection on achieving best evidence found examples of lack of preparation leading to interviews being stopped.

Poor interview planning, which does not take account of the likely impact of an investigation on a child, or the likely response of a suspect, risks allowing an abuser an opportunity to silence the child. The child protection inspection found several cases of children and mothers withdrawing or changing their stories. Prior planning, which does not include protective contingency plans, may increase risk or lead to victim disengagement from the process, resulting in missed opportunities to identify

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100 *Online and on the edge: Real risks in a virtual world. An inspection into how forces deal with online sexual exploitation of children*, HMIC, July 2015.

101 Ibid.

102 A person who facilitates communication between the police, prosecution and defence legal teams and/or the court and a witness, to ensure that the communication process is as complete, coherent and accurate as possible. More information is available from: [www.cps.gov.uk/legal/s_to_u/special_measures/#a06](www.cps.gov.uk/legal/s_to_u/special_measures/#a06)
potential investigation leads. The report ‘Achieving best evidence in child sexual abuse cases – A Joint Inspection’ attributes much of the delay in reaching a charging decision to the poor quality of evidence provided to the CPS, and puts this failure down to poor planning. The findings from all the reports underline the importance of allocating sufficient time to thinking, assessing and planning. Limiting the time spent on these activities is a false economy.

In the next section, we emphasise the importance of the police role in gathering the facts, supporting a prosecution, or identifying the source and seriousness of risk. Good quality investigations or enquiries can also, of themselves, be helpful to a child. A supportive and kindly approach can help the child begin to put the incident behind them. Inspectors saw a number of positive contacts between police officers and staff and children where, irrespective of whether the case concluded in a prosecution, the children were helped to overcome what had happened to them. Inspectors also saw cases where the behaviour of children was criminalised unnecessarily, but other cases where skilled mediation, backed by good use of authority, resolved a crisis between a child and their family, enabling a child to remain at home and not spend the night in the cells.

High-risk emergencies such as a young child found wandering alone or living in squalor, were dealt with well in most cases. The evidence suggests that the police are better able to identify and respond to serious and immediate concerns rather than persistent, less serious concerns. Research shows that it is the long term exposure to domestic abuse and neglect that has the most detrimental impact on children. Serious case reviews clearly highlight the great risks faced by children about whom there has been a history of numerous, but poorly evidenced or low level, concerns. Poor risk assessments and lack of follow-up action, in cases that appear at the outset to be less serious or to have little supporting evidence, is a major weakness in the police forces that were inspected by HMIC.

**Investigation**

In our National Child Protection Inspections, we found that when an investigation was understood from the beginning as a child protection matter, and most of the evidence was gathered at the time of the incident or shortly after it, the quality of investigation was generally assessed as being good.
A 13-year-old girl was having a sexual relationship with a 20-year-old man. A detective identified the girl as a potential victim of sexual abuse, arranged for specially trained officers to interview the family, provided them with some immediate advice and reassurance, quickly involved children’s social care services and organised a medical examination at the sexual assault referral centre (SARC). The man was arrested promptly, and appropriate bail conditions were imposed that took into account the risk he posed to other children. (National Child Protection Inspection report)

In cases of sexual assault, specialist police interviewers were skilled in interviewing children and were sensitive to their needs. Those areas that had a SARC – with good quality interview and examination rooms and skilled staff – provided a better service for victims.

“We travelled to a disused police station to take my statement... neither of us were given any coffee or water or anything, and we were there for just over three hours…” (HMIC-commissioned report from NSPCC ‘Would they actually have believed me?’)

The joint inspection on achieving best evidence, Achieving best evidence in child sexual abuse cases, found that investigative interviewing practice was weaker than that found in our child protection inspections: the focus was on adherence to guidance and the quality of the interview which they observed on video. That inspection found some examples of good interviewing but also some oppressive practice and officers continuing to question children, even very young children, who clearly did not want to participate further. The report was also critical of the police’s failure to use intermediaries whose understanding of child development or disability, could inform how the interview was conducted and, therefore, improve the child’s experience and the information obtained.

All the reports note that the quality of investigations is better when undertaken by specialist officers. In HMIC’s online CSE inspection report Online and on the edge: Real risks in a virtual world. An inspection into how forces deal with online sexual exploitation of children, HMIC noted that the likelihood of the investigation being undertaken by a specialist team depended greatly on the source of the referral.

Cases referred by another agency such as the former CEOP or children’s social care services were more likely to be dealt with by a specialist, while reports from the public, parents or children themselves were less likely to be investigated by a specialist. The same report also noted a case of a man whose partner had said that he had indecent images of children on his computer. The initial complaint had been of domestic violence (which was dealt with appropriately) but the computer was not
examined for three years, perhaps suggesting that the allegation was not taken very seriously.

It would be a grave concern if the credence and weight given to a referrer’s account, or the priority given to investigating the case, was dependant on the status of the referrer.

The purpose of a joint investigation is to bring together the knowledge and expertise held by particular agencies and to plan an effective investigation which takes account of both the needs of the child and is also mindful of the technical evidential requirements of a potential prosecution. Joint interviewing by police and children’s social care services prevents a child having to go over the same ground twice.

The achieving best evidence guidance which informs the conduct of police officers in this context focuses primarily on gaining evidence. This may explain the small numbers of investigations that are currently conducted jointly. The joint inspection on achieving best evidence, Achieving best evidence in child sexual abuse cases, counted the number of investigative interviews of children undertaken jointly by police and social workers and found that of the 69 interviews analysed, only nine had involved children’s social care services. This was attributed to a lack of readily available social workers trained in interviewing to achieve best evidence. HMIC’s child protection inspection reports also indicated that social workers were often not available to interview children, especially at night or at weekends.

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103 See for example, in the case of child sexual exploitation, the lack of weight given to children’s accounts in: Independent Inquiry into Child Sexual Exploitation in Rotherham 1997-2013, Alexis Jay OBE, Rotherham Metropolitan Borough Council, August 2014 (Available from: www.rotherham.gov.uk/downloads/file/1407/independent_inquiry_cse_in_rotherham) and “I thought I was the only one. The only one in the world”. Inquiry into Child Sexual Exploitation in Gangs and Groups, Interim Report, Berelowitz S et al, Office of the Children’s Commissioner, November 2012. (available from: www.childrenscommissioner.gov.uk/sites/default/files/publications/I%20thought%20I%20was%20the%20only%20one%20in%20the%20world.pdf).

Also, Brandon, in cases of child deaths, gives a number of examples where a referral made by a current or ex-partner or anonymously were not followed up, in some instances, in the belief that the allegations were malicious. Some health visitor concerns about possible neglect were ‘down-graded’ to something less serious than the concern expressed by the referrer. New Learning from Serious Case Reviews: a two year report for 2009-2011, Brandon, M et al, Department for Education, 2013. Available from: www.gov.uk/government/uploads/system/uploads/attachment_data/file/184053/DFE-RR226_Report.pdf

Our online CSE inspection, *Online and on the edge: Real risks in a virtual world. An inspection into how forces deal with online sexual exploitation of children*\textsuperscript{105} found too many referrals that, following a discussion by the police and children’s social care services, were allocated to children’s social care services to undertake enquiries as a single agency. Inspectors considered that these cases should have been recorded as a crime and investigated by the police. Our child protection inspections found that a welfare-only response was usually evident in cases where the victim was young, and where there was likely to be a strong welfare need.

\begin{quote}
Operation Cedar was initiated following concerns about the potential sexual exploitation of a number of girls at a school. Forty potential victims were interviewed. As a result of the joint investigation, which involved building relationships with the young people and supporting and listening to them, disclosures of rape and false imprisonment were made. In total, seven victims were identified and the offender subsequently pleaded guilty to 26 offences, including rapes. Close working by the police and children’s social care services appears to have resulted in more victims feeling able to come forward. (National Child Protection Inspection report)
\end{quote}

The reports of the National Child Protection Inspections also noted a number of excellent joint investigations and interviews, particularly in sexual or physical assault cases and high quality joint investigations in some CSE cases.

The National Child Protection Inspections focused primarily on what joint investigations achieved while the joint inspection on achieving best evidence (which is more reserved about the benefits of joint investigations) looked closely at the process. It found “no example where a second interviewer, either a police officer or a social worker, took an active and effective role in the interview process”. The combined findings (from the achieving best evidence, online CSE, and child protection inspections) suggest that the number and perceived utility of joint interviews may be dwindling. If they are, it is by default rather than as a result of a review of practice, followed by an informed decision being made in the best interests of children.

In cases where there were conflicting accounts, where evidence was limited, or further work had to be undertaken by another part of the system (such as the high-tech crime unit), investigations were often poor and protracted. In cases of CSE, where a child was reluctant to cooperate, the case was often quickly concluded and no further action was taken. Across a range of investigations, the investigation was often shallow with few leads followed up.

\textsuperscript{105} *Online and on the edge: Real risks in a virtual world. An inspection into how forces deal with online sexual exploitation of children*, HMIC 2015.
Inspectors also found few examples where children were referred for a medical examination. In some cases this should have been undertaken, not only for evidential purposes, but to ascertain the child’s health and wellbeing. Often medical assessments were not requested for several days after an allegation of assault, when signs of injury had reduced.

In a case of suspected physical abuse of a two-year-old girl by her mother, a bite mark seen on the girl by foster carers was not photographed until three days later, when the mark had faded.

In a physical abuse case where a nine-year-old boy was pinned down and held around his throat by his father who had returned home drunk, there was a delay in arranging a medical examination and interviewing the three other children in the family. (National Child Protection Inspection report)

Police and social workers agreed, without consulting a medical practitioner, that eczema was the likely cause of vaginal bleeding in a four-year-old child, even though the child had made sexual allegations against a family member. (National Child Protection Inspection report)

Where evidence was inconclusive and it was unlikely that a case would proceed to prosecution, there was limited evidence of police working with other agencies to identify the implications of this for future safeguarding of a child. In a number of cases lack of evidence of abuse was treated in much the same way as a conclusion that no abuse had occurred, and children were returned home without a proper risk assessment or safeguarding plan.

This was most apparent in cases of domestic violence, young children alleging violence against a parent who contested the child’s story (and sometimes the child then changed it), or adolescent girls who did not understand their relationship as exploitative or were reluctant to incriminate a ‘boyfriend’.
The quality of investigation of cases of CSE was very mixed. The enquiries made for children who go missing from home were often not sufficiently effective to get good information about patterns of behaviour and risk, or intelligence about possible offenders. In some forces the perception of exploitation as a girl’s ‘lifestyle choice’ was still in evidence, especially if the girl was looked after by the local authority or was brought into the police station on offending grounds. However, inspectors also found some very good practice with examples of police engaging well with children, investigating thoroughly, using intelligence well, and assiduously pursuing offenders. Practice tended to be better in those areas where there had been a big case and where, previously, mistakes had been made and lessons learnt. In these areas, the police had taken a fresh look at how they were operating, and ensured staff were appropriately skilled. Often the improvements were at local level, rather than force-wide, and some forces were quicker than others to transfer the learning across the whole force area.

Although inspectors found some excellent police work in respect of peer-on-peer online child sexual abuse, taking account of the age of all parties, this area of work was generally a weakness. A child under 16 years of age sending a sexual message or photograph of themselves might, initially, be interviewed by the police on the basis of their ‘vulnerability’ but thereafter threatened with prosecution for a criminal offence which, had they been an adult, may not have resulted in such action. Similar difficulties were noted in our other inspections in respect of domestic violence. Both inspections found examples of children being arrested, held in the cells overnight, and then cautioned or taken to court for violence against a sibling. The person arrested was either the person complained about or the older of the protagonists, without much thought given to culpability, the best means of resolving the issue, or the impact of their arrest and detention on the family, and in particular, the child who was now a perpetrator.

A 17-year-old was arrested for pushing his step-father and damaging the garden fence.

One of two sisters was arrested following a fight over a remote control.

A 13-year-old boy was arrested for common assault on his 11-year-old sister. The boy had been in care since he was 6 years old and remained in custody for over 10 hours.

A 15-year-old girl was arrested and brought into custody for assaulting her mother in a pre-arranged meeting. Through the action of the police, the child was able to be discharged from custody, and the matter was dealt with by way of a behavioural agreement between the parents and children’s social care services. (National Child Protection Inspection report)
By contrast, under-involvement was also seen.

In a case involving an allegation by a ten-year-old boy in foster care that he had been sexually assaulted by another ten-year-old boy, there was no record to show that either of the boys had been spoken to by police, leaving them both at risk of further harm. (National Child Protection Inspection report)

With the exception of straightforward cases which were concluded very soon after the initial report was made, investigations across all forces were characterised by delay and drift. Resources were focused on each new case without sufficient time allocated for ongoing work, and officers responsible for investigations were often called away to other work.

Inspectors were concerned, however, about delays in the arrest of offenders, and prolonged investigations which officers attributed to heavy workloads. They found examples where officers did not follow up enquiries, and closed cases without sufficient consideration of the risk the offender posed to other potential victims. (National Child Protection Inspection report)

There were sometimes delays in beginning an investigation, even in serious cases – 11 months in one case of sexual assault on a child by a grandparent. There were also delays in following up evidence by interviewing witnesses or photographing scenes of crimes. Inspectors found cases of children separated from their parents for many months and, in two cases, for over a year but without any sign of the case coming to a conclusion.

A child neglect case where a young child was seen crawling on a floor covered in drugs paraphernalia and the child’s mother was incapacitated through drug use; the investigation had not progressed in five months.

An alleged rape of a nine-year-old boy by his grandfather where it took three months before the suspect was interviewed.

An 18-year-old woman reported that she had been raped by her brother, five years earlier. She was concerned that he was still living with their younger brother. There were significant delays in this investigation, including in arranging a medical examination. There was little activity or contact with her in five months, which might well have contributed to her withdrawal of the allegation. (National Child Protection Inspection reports)

Every day, police forces receive new information about suspected online abuse. In one area there were 800 low-risk cases awaiting further computer analysis following an initial scan. Most forces prioritised the analysis of suspects’ computers and
phones according to risk but even cases deemed a priority might take several weeks for analysis. If a computer was not a priority, analysis took months in most forces.

Eight months elapsed before an evidential report on a computer was provided in a case involving a school governor, it took over 6 months to provide a report on a computer belonging to a known sex offender, and over 7 months to analyse the phone of an alleged offender said to have recorded two rapes of 14-year-old girls. At the time of the inspection there were 174 cases that had not been allocated to a member of staff in the high-tech crime unit for analytical work. Some of these cases went back to November 2013 (the inspection took place in July 2014) and three quarters were child abuse related. (National Child Protection Inspection report)

Inspectors also found examples of delay in obtaining medical reports (the examinations had been completed), photographs from police photographers and updates from children’s social care services. Occasionally, delays were pursued by the police but mostly the delay was noted on the file but no further action recorded.

Some delays were excessively long – for example, three to four months for reports from health or social care.

Our online CSE inspection report ‘Online and on the edge: Real risks in a virtual world: An inspection into how forces deal with online sexual exploitation of children’ noted that the police often imposed sound bail conditions, but could not then maintain the level of oversight necessary to ensure these were adhered to for the twelve months or more it might take before a charging decision was reached.

A man who had been assessed as high-risk was arrested in January 2014 for possessing indecent images of children. His computer was submitted for analysis and he was released on bail. In June 2014, while still on bail (due to the delay in the analysis of the computer), he was arrested for sexually abusing a six-year-old girl who had been playing in the street. (National Child Protection Inspection report)

Decision Making

In an emergency, when a child might need to be taken to a place of safety, police decisions were generally well thought through, right for the child, and properly recorded. However, follow up action to prevent a reoccurrence was weak.

Lack of health involvement in some inter-agency discussions hampered good decision making. There were cases where health examinations had not been undertaken when arguably they should have been, or a health examination was requested too late.

In the section on assessment and help above, it was noted that in cases of repeat domestic abuse (without injury) or other persistent low-level concerns, officers did not always take sufficient account of patterns of abuse or the context within which it
had occurred. Police information systems discourage this sort of analysis. They are clumsy, repetitive and poorly integrated. Often police staff are required to put information on more than one system or complete more than one form. Not all staff had access to necessary information, for example, knowing if a child was on a child protection plan or knowing if they had previously been a suicide risk in custody.

In all except one force, inspectors found recording weaknesses, some of which were serious and may have contributed to poor decision making. In all forces, background information about a child (e.g. their race or ethnicity, disability or school they attended) was poor. Without such basic information service planning is difficult. It is equally difficult for individual staff to make decisions in the light of a child’s circumstances or to ensure the right people are informed.

Lack of appropriate follow up action and/or minimising the seriousness of the concern is a theme across the reports. The reports from our National Child Protection Inspections noted that no further action often followed an initial enquiry into abuse or neglect, even in serious cases. Our online CSE\textsuperscript{106} and domestic abuse\textsuperscript{107} inspections revealed some cautioning decisions that belied the seriousness of the allegations and the repeat nature of the offending. Our report on crime recording noted that, overall, there was about a 19 percent failure to record crime, rising to 33 percent in respect of crimes of violence and 26 percent for sexual offences.\textsuperscript{108}

The report does not break down the type of crime by age or gender of the victim, but it does give examples of unrecorded crime in respect of children and domestic violence.

Given that children may not be able to articulate clearly what has happened to them, they may be ‘unreliable’ witnesses and not able to ‘fight their corner’ to have their case investigated. Those who might usually be expected to advocate for them are, perhaps, the suspects, and it seems likely that the failure to record crimes will affect them disproportionately. The NSPCC figures presented in Chapter 2 indicate that of 73,000 victims under 16 in England and Wales, there were just 18,700 offences recorded. Although pursuing an alleged offender through a criminal justice route may not always be in a child’s interests, recording the crime is essential for the purposes of accountability and for planning appropriate responses. Pursuing evidence either to

\textsuperscript{106} Online and on the edge: Real risks in a virtual world. An inspection into how forces deal with online sexual exploitation of children, HMIC July 2015.


confirm or to discount an allegation is particularly important for identifying from whom, and in what way, a child might need to be protected in the future. Only the police can undertake this task.

A 14-year-old girl at high risk of harm was found in the company of three known drug users. Although some safeguarding measures were put in place to protect the girl, there was no record to show that the suspects were spoken to or that consideration had been given to serving them with child abduction notices. (National Child Protection Inspection report)

Those forces that had developed a more strategic approach to CSE were using child abduction warning notices issued to a potential suspect as a crime prevention tactic when there was little prospect of a prosecution. Overall, however, there was not a great deal of evidence in the reports that the police were using their powers to full effect. We note elsewhere in this report the low level of prosecutions of offences against children, and there was little evidence of the use of sexual risk orders (see footnote 15) which may be sought from a court in order to impose restrictions on a known sex offender. Where an offender had been convicted of a sex offence in a court and was on the sex offender’s register, police practice was much more confident and throughout this report we have noted the contribution police officers working in this area do make to child protection. The importance of good quality investigations that lead to a prosecution or confirm innocence, or provide evidence to invoke other powers of deterrence or disruption is reaffirmed by these findings. Without sound evidence of wrong doing or other behaviour which, while not criminal, is known to be harmful to children, these protective measures cannot be used.

Inaction was found to be a problem by inspectors rather than action, but there were also cases where a decision to pursue criminal action against a child was misplaced (see the examples given in the sections on investigation above and trusted adult below). Decisions not to pursue adults who offend against children while at the same time pursuing child offenders, many of whom are very vulnerable, are contrary to accepted good practice.

A 15-year-old girl made a rape allegation about a (previous) care worker. The police concluded she was lying and she was cautioned for perverting the course of justice. No criminal charges were made against the worker but he was disciplined for inappropriate behaviour. (National Child Protection Inspection report)

**Trusted adult**

Police staff working in specialist units who were skilled in communicating with children could be seen as trusted adults. They considered the child’s needs, built a trusting relationship and provided a route to other services. Some local
neighbourhood and school police officers and police community support officers were also trusted by children and able to perform this role.

Inspectors saw a number of examples where individual police officers had made a considerable difference to the lives of children. They gained a child’s trust, followed up actions and continued to support the child as the case progressed. There were a number of officers who ‘went the extra mile’ and it was clear to inspectors that children were helped and protected, sometimes in spite of the system, rather than because of it.

A nine-year-old boy placed under police protection. A police officer sat with him for the whole night in a police station because the local authority could not find accommodation for him. While neither the child nor the police officer should have been in this situation, the safety and wellbeing of the child was clearly prioritised by those on duty at the time. (National Child Protection Inspection report)

Police officers, whose contact with children was more limited, varied considerably in how they related to children. Some of the decisions taken by police to prosecute, or threaten with prosecution, children involved in fights between siblings and peer to peer ‘sexting’ were unhelpful in developing protective relationships for the future.

There were also cases where police action damaged trust. In particular, where children disclosing abuse were accused of lying or criminal proceedings were taken against them.

When a 15-year-old girl retracted allegations (possibly under duress from her mother) of inappropriate sexual behaviour by her stepfather, she was called in to the police station to be interviewed about her 'lying' (the stepfather was subsequently convicted of the offence). (National Child Protection Inspection report)

Trust was most clearly undermined in cases of delay and drift and inspectors found examples of children or their parents complaining about lack of action.

A case of suspected physical abuse of a 13-year-old girl by her father, which took 10 days to be allocated to a child abuse investigator; the father was not arrested and this left her at risk of harm. (National Child Protection Inspection report)

In failing to investigate more deeply a case where a parent denied an accusation against them, it appeared that the police gave greater credence to the parent’s account. There was not much evidence in any of the forces inspected of the police listening to children or of a child’s understanding of events informing police practice. However, where police had clearly listened to children and subsequent police action had taken account of the child’s needs and risks, the outcomes were better.
A 14-year-old girl from Afghanistan who was at risk of sexual exploitation. Police spoke to the girl through an interpreter, listened to her concerns about a recent bereavement and her struggle to adapt to living in England, and supported her throughout the investigation. (National Child Protection Inspection report)

The HMIC commissioned NSPCC Report, ‘Would they actually have believed me?’ indicated that children, even now, may see the police service principally as an organisation that serves the needs of adults – an organisation to which adults will report complaints about children’s behaviour. Our online CSE inspection, Online and on the edge: Real risks in a virtual world. An inspection into how forces deal with online sexual exploitation of children, stated that 83 percent of victims of online abuse were between 13 and 18 years of age (35 percent were 13-14 years old) and 80 percent were girls, but less than one third of forces had educational or prevention material aimed at this age group.

However, one of the forces inspected as part of our National Child Protection Inspection programme produced a guide for all staff on communicating with children, and had trained those officers most likely to have significant contact with children.

Some police forces recognised that their role as law enforcers discouraged some children from trusting them, particularly in cases of CSE and had invested in services run by voluntary agencies such as Barnardo’s to work with children at risk of sexual exploitation. This worked well. It provided a conduit for disclosure, children remained supported throughout the investigation, and the voluntary agencies were able to glean information that contributed towards intelligence gathering.

Management of those posing a risk to children

Officers working in the units which managed registered sex offenders undertook prompt and thorough enquiries, searched for suspects, used their power to arrest those who failed to keep to their registration requirements or other conditions (for example, prohibiting contact with children) and worked with other agencies on plans to protect children. They also advised neighbours and new partners of high-risk offenders where this was appropriate. Officers who were not in the specialist sex offender units were less likely to understand how offenders operate, or be alert to the potential risk to other children beyond the case they were investigating.

Responses to CSE were under-developed in most of the forces inspected in our child protection and online sexual exploitation inspections, although approaches were more advanced in some areas than others. In a small minority of areas there was considerable activity: offenders were identified and prosecuted where feasible, where not, the police issued child abduction warning notices. The police worked with hotels to encourage staff to report suspicious behaviour and discourage the use of hotels as sites for abuse. However, in many of the forces (or divisions within a force) insufficient work was being done to follow up some of the intelligence gathered or to
disrupt offenders. Often, suspects were not identified even though an examination of a child’s phone would most likely have provided relevant information. In other cases suspects were identified, but then no further action was taken to investigate further.

**Police detention**

Police detention of children was found to be an area of weakness across all forces bar one in our National Child Protection Inspections, and in all six force areas inspected as part of our inspection of vulnerable people in custody, *The welfare of vulnerable people in police custody*. We found that it was not always clear that a child’s detention was justified since child detention certificates \( ^{109} \) (which certify that continued detention is necessary and explain the circumstances to a court) were absent in more than half of cases. Inspectors also saw some cases where the offence alleged was not serious and the child could have been bailed from the police station as the risk of committing serious offences whilst on bail, was low.

In the one police force where detention practice was assessed as good, we found the following positive features:

- police officers arrested and detained children only when necessary and sought other means of dealing with a case, such as bailing the young person to attend a police station at a later date for questioning;
- custody staff were attuned to the needs of children and tried to ameliorate the conditions in which children were held wherever possible;
- custody staff sought alternative accommodation from the local authority and were generally successful; and
- the force’s custody records were accurate and well maintained.

In only two of the eight force areas inspected as part of our National Child Protection Inspection programme was alternative accommodation sought by the police and provided by the local authority. Of the remaining six, accommodation was not sought or accommodation was sought but not provided, or forces asked for secure accommodation when secure accommodation was not required (and rarely available). There was no consistency of approach across forces. Inspectors noted that accommodation was often requested at the point of charge which was often late in the evening or into the night. In most of these cases, it would have been clear much earlier in the day that accommodation was likely to be needed, and an early approach with several hours warning could have been made. Similar findings were noted in our report, *The welfare of vulnerable people in police custody*.

\(^{109}\) Section 38 of the Police and Criminal Evidence Act 1984.
In the 12 cases examined, three of the children were charged and refused bail. When officers requested alternative accommodation, none was available in the respective local authority area. In another of the cases examined, the child was transferred into the care of the local authority. However, as no suitable local authority accommodation was available, the social worker spent the night with the 15-year-old child at the police station. (National Child Protection Inspection report)

Inspectors looked at 15 cases of children in detention. The youngest was 13 years old and the oldest 17. Three of the detainees were girls, two of whom were 13 and the other, 15. Five of the children lived in care home. In the 15 cases reviewed by inspectors, all offenders were charged and were refused bail by the custody sergeant... In only one case was the child transferred into the care of the local authority. In another case, care home staff refused to allow a 13-year-old girl to return after she had caused damage and assaulted a member of staff. The social worker was unable to find her alternative accommodation and she remained in custody overnight. It was apparent that custody officers did not always contact children’s social care services. Only five custody records indicated a request had been made to the local authority after a decision to refuse bail. (National Child Protection Inspection report)

A number of children who were held in police cells were children for whom the local authority was already responsible. If a child was disruptive in a children’s home it was likely that they would be held overnight in police cells. In one force area every looked after child (15) arrested for damage to, or threatening behaviour in the children’s home, was detained in police custody.

Inspectors found long delays in processing children following arrest. There were often delays in the arrival of an appropriate adult to be present during interview and to represent the child’s interests. Sometimes there were delays for legal representation and for medical care.

A 15-year-old girl was admitted to custody just before midnight. The appropriate adult was called within 30 minutes, but because it was late, she agreed to attend the following day. There was no evidence of any alternative arrangements being made and the girl was held for the rest of the night. Her rights were read at 11am the next day, and she left custody in the company of her mother an hour later. It was eventually decided there would be no further action due to lack of evidence. (The welfare of vulnerable people in police custody report)

For the most part, when a child was taken into custody they were treated in much the same way as any arrested adult, and custody staff seemed unaware of the child’s potential vulnerability – either in police custody or in relation to the reasons for their
arrest. For example, in one case, the arrest of two 13 year old girls missing from home and with condoms in their pockets did not prompt any safeguarding action.

Although the police have powers to take children who shown signs of mental illness into custody for their own safety or the safety of others, wherever possible they should be taken to a health facility. Our reports of National Child Protection Inspections noted that children taken to a place of safety under section 136 of the Mental Health Act were routinely taken to police cells in two areas, and in three areas almost never. The balance is unrecorded in the other three areas. Our inspection, *The welfare of vulnerable people in police custody*, found that the treatment of those taken into custody was mixed. In some custody suites great care was taken of their wellbeing, but in others they were neglected or restrained inappropriately.

The most serious case seen by inspectors involved a 16-year-old girl who was detained for 52 hours in the central police custody suite before being transferred to a health care setting. It was only after the girl had been in custody for 44 hours that custody staff realised that she had gone without food or water. She was subsequently treated by a paramedic before being taken to hospital. The force was fully aware of the circumstances of this case, which was subject to an independent health service review at the time of the inspection, but it was not clear to inspectors that steps had been taken to learn the lessons. (National Child Protection Inspection report)

Our report, *The welfare of vulnerable people in police custody*, noted that black people were much more likely to be stopped and searched, arrested and detained in police custody, and that children were also disproportionately detained, compared to their numbers in the general population. As police forces do not keep accurate information about age, gender or race/ethnicity in respect of police detention, it is difficult to establish the profile of children most likely to be arrested and detained. The poor quality of data held by forces leads us to conclude that they are not yet able to demonstrate that their practices do not discriminate, in spite of the high levels of public concern about this issue.
Chapter 5 - Leadership management and governance

In inspecting police forces HMIC expects that:¹¹⁰

- force leaders demonstrate an active interest in how well their force is meeting the needs of children in the locality, including their need to be protected;
- the force understands the experience of children and families as they move through the child protection and criminal justice systems and this is reflected in policy, guidance and procedures;
- sound arrangements are in place to support agencies working together, including information sharing and managing conflict;
- the force knows how well it is helping and protecting children;
- staff are supervised and supported and are competent to carry out the tasks expected of them; and
- the force takes responsibility for ensuring that all children in custody are fairly and properly treated.

Leadership

Protecting vulnerable people and children was a clear force priority in all the areas inspected. Most had action plans or strategies relating to this and some had specific plans in relation to missing children, forced marriage, female genital mutilation and CSE.

There has been a considerable amount of effort invested in establishing new units or new specialist posts, and working with other agencies to tackle certain types of abuse (such as CSE) and provide more effective services. Some changes are fairly recent and were not well bedded in at the time of the inspections. It will take some time before their overall effectiveness can be properly judged.

The inspection findings examined in this report highlight, to varying degrees, a disparity between the policies and priorities at the top of the police service and the practice in force areas on the ground. In some areas, staff were able to articulate their force’s priorities, clearly understood the aspirations of chief constables, and understood what was expected of them. There was considerable support for the refocusing of attention on protecting vulnerable people and a move away from a

performance culture that focussed on counting activity and crime. However, even in those areas where the vision and direction had been well articulated, this was not translated into the day to day routines of work on the ground, except in specialist public protection teams.

Forces have been slow to recognise or respond to a problem (e.g. CSE or so-called honour-based violence\textsuperscript{111}) but it is also clear that, once they do acknowledge a problem, forces work on its resolution energetically. Together with other local agencies, forces have, to varying degrees, developed appropriate polices and put in place the training, awareness raising processes, and arrangements that the current state of knowledge suggests will achieve results. However, they have rarely reviewed how well these steps translate into effective practice and improve outcomes for children.

Our child protection inspection reports discuss the high levels of commitment shown by most of the staff working in child protection units, and their work stands in contrast to that in other parts of the service. The difference between the best and the worst practice is significant across all forces. The skills and commitments of the individuals have far more bearing on outcomes than the processes followed. Service leaders might do more to recognise and nurture exemplary practice and weed out staff whose attitudes and approaches to vulnerable children are damaging.

It was not clear that senior officers had a good understanding of the quality of practice on the ground. Inspections found force information systems did not capture the detail or the complexity of the work. Videoed interviews were not examined by more senior staff or used as a tool for learning, senior officers were too reliant on the assurances from mid-ranking staff who had too little time to look at the quality of work in depth.

In spite of the unambiguous priorities for the service, we saw limited evidence of senior staff improving their understanding of the work of teams. Examples might be spending time in a custody suite at night, going out on patrol or with a response team to observe how staff interact with victims and offenders, looking in detail at individual cases to understand how the force has responded from beginning to end, or talking with children to hear their concerns and experience of the police.

**Supervision and learning**

Although the findings in this report indicate that police forces have much to do to improve practice, the systems, structures and processes for accountability and achieving change are all in place and worked well, in so far as they were efficiently

implemented. Staff at all levels knew to whom they were accountable and for whom they had management responsibilities. As noted above, there were also systems for escalating concerns even if there was not much evidence of their use.

Supervision across forces was mixed. In some teams, cases were regularly monitored and staff were supervised well in their work, but this was not universal. Although overall, supervision was associated with better practice, it had not led to improvements in some teams where it appeared to be undertaken largely as an administrative task rather than one designed to develop or correct practice. A number of staff told inspectors that supervisors were overworked, particularly with the volume of inter-agency case conferences and meetings, and as a result, they did not have time to supervise the work properly.

All forces ensured that staff new in post had access to training and that certain training, for example on recognising the signs of children at risk, was undertaken on a whole force basis. Refresher training was less in evidence and some training was slow to come on stream. Overall however, the contribution of training to good quality practice was doubtful. Some reports noted that online training, which does not provide any opportunity for reflection and learning from others, is viewed by staff as ineffective.

HMIC’s online CSE inspection report, *Online and on the edge: Real risks in a virtual world: An inspection into how forces deal with online sexual exploitation of children*, referenced Australian research showing that Investigators who were the most resilient tended to enjoy and to be committed to their work, reflected on and shared their thoughts and feelings about their work with colleagues, and received support from family and friends.\(^\text{112}\)

Inspectors went on to note that this finding was very similar to their own and that counselling for staff and other ‘add on’ forms of support, might be less effective than getting the conditions right within the team. Only one inspection report has noted and reported on this: we think it may be an important finding that merits further consideration.

**Inter-agency work**

Although inter-agency relationships were generally good, there were some problematic areas not being addressed, or not being addressed with sufficient commitment and urgency. Children exposed to domestic abuse were still not receiving the help they needed, when they needed it. Looked after children, arrested by the police but the responsibility of the local authority, were refused accommodation, and other children were not provided with an alternative to police

\(^{112}\) *Understanding and Managing the Occupational Health Impacts on Investigators of Internet Child Exploitation*, Wortley R, Griffiths and Deakin University, Brisbane, 2014.
cells as required by law. There were still problems in the detention of mentally ill people for their own protection, including children, as evidenced in our report, *The welfare of vulnerable people in police custody*. Inspectors found that in some cases, children were more at risk of being detained in police custody because the local emergency health service facilities did not accept them.

Most areas had policies and processes in place for ‘escalating concern’ (i.e. when staff are concerned that another section or another agency is not fulfilling its responsibilities, they could report the matter to more senior staff who would then take up the matter with their counterpart in the other organisation or section). We saw very little evidence of this facility being used by staff even though complaints about other agencies or other parts of the police service were widespread. For example, in our National Child Protection Inspections police officers told inspectors that children’s social care services ‘never’ had any places for detained children, the CPS were slow in reaching charging decisions; and delays in the hi-tech crime units were common. We have noted elsewhere in this report that inter-agency arrangements and discussions do not always lead to positive action to protect children. It is essential that relationships between agencies are respectful and constructive, but the police or their partner agencies should not shy away from robust discussion where they feel the interests of children are being compromised.

**Management information**

Management information was seen to be a weakness across all forces inspected and in all the inspection reports. Management reports provided information about the number of cases, detection rates and conviction rates, costs and staffing. Managers (to varying degrees) also received reports on compliance with policies and practice guidance, and local safeguarding children boards (LSCBs) undertook some reviews of practice. However, managers were poorly informed about how well their services were meeting the needs of vulnerable children. Forces knew very little about the views or experiences of children; likewise, they knew little about the outcomes following police involvement.

Our recently published reports on the management of police information, *Building the picture: an inspection of police information management*, also noted that information was not kept as securely as it should be, and the construction of the various stand-alone systems make the cross referencing of information and intelligence very difficult. This inability to ‘join the dots’ at individual child or offender level, and more widely at agency or inter-agency level, affects on police prevention and planning activity as well as on investigations.

Improving the quality of information on issues such as race, ethnicity and disability would be of great use in service planning and in measuring how well services are meeting the needs of communities. The collation and use of this information would also help managers to assess the extent to which forces are treating all children
fairly, particularly those from ethnic minorities, or children with learning disabilities. Better data would also enable forces to plan responses that take account of the age and stage of children’s development when planning interviews with child suspects or victims, or when setting bail conditions.

**Workloads**

Across all force areas and all inspection reports there were complaints about workloads or understaffing. Inspectors also read in case notes that lack of time was the reason given for tasks not being undertaken or not completed. Some forces had looked closely at staffing levels and workload pressures and were taking steps to address the problems. Many forces had increased the staffing for protecting vulnerable people.

The reports we have analysed describe the increased pressures on staff managing child protection issues. It was clear that there were too many staff who were over-stretched and working long hours in order to cope with demand. Without information on outcomes, it is difficult to know if resources were well spent or whether the activities in which teams were engaged, were worthwhile. For example:

- In most forces police officer attendance at initial child protection case conferences was good, as required by statutory guidance, but given the (sometimes) low level of police contribution to safeguarding plans, personal attendance at case conferences might not have been the best use of their time.

- Children who went missing from home were usually interviewed on their return by the police (or a voluntary agency on the police’s behalf) according to guidance, but the content of these interviews was not informing plans to prevent a recurrence.

- In cases of domestic abuse where children were present, a risk assessment was usually completed and forwarded to children’s social care services but, with the exception of the most serious cases of physical injury, there was little indication of any protective work being undertaken as a result.

The relationship between activity and outcomes was opaque. More resources have been invested in child protection in the past few years but there has been little evaluation of how well the resources are contributing to protecting children or improving outcomes.
Local Safeguarding Children Boards

Most of the time, police officers with sufficient authority and knowledge attend LSCB meetings (at both board and sub-group levels). Additionally, police officers and staff contribute to work programmes, serious case reviews and thematic reviews into the quality of practice, even if these reviews are not frequent. While the arrangements appear to be sound, we have seen little focus on outcomes for children. The focus has been primarily on whether agencies are doing what guidance requires of them.

There are established mechanisms for resolving inter-agency difficulties. This report has already noted some problems that can only be tackled on an inter-agency basis, in particular responding to domestic abuse, CSE and children in police custody. CSE is on most LSCB agendas and domestic abuse is discussed on occasion. Child detention has not been sufficiently addressed although, this may be changing in light of our National Child Protection Inspection programme.
Chapter 6 – Conclusions

This thematic report provides an overview of police practice in respect of vulnerable children. The findings, which are largely consistent from report to report, even where the focus of inspection is different, paint a powerful picture of current police practice. This report records many cases where children have been protected and their needs met, but also notes a number of failures. The high level of commitment to protecting children evidenced in forces has, to date, been insufficient to ensure that all vulnerable children are safeguarded.

Inspection reports are clear about what is wrong (or right), but reasons for success or failure are not always apparent. In this section, we summarise the strengths and weaknesses, suggest some areas that could be addressed nationally, and consider what further work needs to be undertaken to understand the problems better.

Chapter 2 outlined the extent of the problem. We could draw encouragement from some statistics, such as the numbers of child deaths at the hands of their parents which are few in number, and decreasing. However, other statistics showing the levels of child abuse and neglect, especially CSE, reported to the police and other agencies are shocking.

Chapter 2 also provides information about the number of children who are at risk or who are referred to the police or children’s social care services for child protection concerns. It also provides information about the number of children on child protection plans or where an adult has been prosecuted for an offence. Just under 1.8 million children were living with domestic abuse and there were 74,000 victims of child sexual abuse under 16 in the 2011/2012 year. At its highest, there were less than 53,000 children for whom there was a protection plan in place. While some children may be protected as children in need (the NSPCC report indicated that at 31 March 2013 there were just under 10,000 in this category), the overwhelming conclusion is that the vast majority of children known to be at risk of abuse and neglect are not in the child protection “system”.

That said, many children at risk will be helped by other agencies, and being drawn into the child protection system is not necessarily the best approach; particularly if the same goals can be achieved in some other way. Inaction may also be the right decision at times, but this too needs to be considered and based on the child’s circumstances. Our concern in these reports is that some children identified as being at risk by the police and clearly in need of some help, did not appear to have any plans in place to protect them. By plans, we mean considered action which might be undertaken by the police acting alone, or with other agencies.
HMIC observed that some parts of the police child protection system work well some of the time, and the system could be improved if the poorer performing teams or forces learned from the best. Yet, even in the better performing forces there were pockets of weakness.

Overall, in its annual assessment of forces in England and Wales\textsuperscript{113}, HMIC rated 39 out of 43 forces as good at preventing crime and reducing offending, one as outstanding and three as needing improvement. The findings of this overview report, which focuses on children, paints a less positive picture and suggests that work to safeguard vulnerable children may be an area of weakness for the police.

**Summary of findings**

In summary, police child protection practice is characterised by the following:

- good police practice in an emergency or in those cases that are clearly understood as ‘child protection’ from the outset;
- weaknesses in investigations, assessments and plans and communicating with children;
- poor police response when harm is cumulative and chronic rather than acute – responses to domestic abuse, neglect, CSE and child detention are inadequate;
- specialist teams, such as child protection teams and sex offender management teams, perform better than generalists;
- good practice is marred by delay at every point in the system except in the most straightforward of cases;
- children who offend, are in custody, are looked after by the local authority, go missing on a regular basis or are uncooperative, are poorly served;
- good practice is too dependent on highly skilled, well-motivated and committed police officers; and
- police officers’ attitudes and behaviour towards children are, in some cases, unacceptable.

The management of child protection in forces is characterised by the following:

- clearly articulated police and crime commissioner and chief officer commitments to protecting vulnerable people;
- resources, policies, guidance, structures and processes to tackle the problem are in place;
- considerable recent investment in improving responses to risk especially for children who go missing from home and those at risk of CSE;
- police information systems that hamper good practice and do not provide management with the information they need;
- insufficient management information about outcomes and children’s experiences;
- variable quantity and quality of staff training, supervision, oversight and support and little evidence of its affect on the quality of practice.
- there is not yet a sufficient number of highly skilled, well-motivated and committed police officers to ensure all cases will be dealt with well; and
- positive relationships between agencies but inadequate multi-agency responses to particular problems such as the detention of looked after, or mentally ill children.

**Barriers to good practice**

In the light of these findings, and in an effort to identify what makes it so hard to do well, HMIC has looked at the national policing and governance structures, policies, guidance and training to see if there are any gaps or factors that may be pulling practice in the wrong direction. National and local policing priorities all include safeguarding children: child sexual abuse was identified as a national threat in March 2015 and included as such in the strategic policing requirement. There is no lack of commitment and interest at the highest levels.

The move away from a target – driven culture to one that places the needs of victims at the centre of policing practice has been widely welcomed by police forces. However, this shift has yet to be fully reflected in forces’ arrangements for managing performance, in the mind-set of staff on the ground and in day to day policing routines. The interests of and responsibilities for children reside with the National

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114 The Strategic Policing Requirement was issued in 2012 in execution of the Home Secretary’s statutory duty (in accordance with s37A Police Act 1996 as amended by s77 Police Reform and Social Responsibility Act 2011) to set out what are, in her view, the national threats at the time of writing and the appropriate national policing capabilities required to counter those threats.
Police Chiefs’ Council (NPCC) and there is scope for greater attention to be paid to vulnerable people within the NPCC’s work plan and structures. However, we also note the commitment, energy and effort brought by the current child protection lead within the NPCC. The current NPCC work programme includes:

- through the College of Policing, peer reviews of the effectiveness of every force’s response to CSE – to be completed by the end of the autumn;
- the development of a national safeguarding strategy by the NPCC’s child protection and abuse investigations working group which will incorporate the current CSE strategy;
- improved police responses to CSE through new Home Office funded posts of a national CSE coordinator, ten regional CSE coordinators and nine regional CSE analysts responsible for overseeing regional implementation of the CSE action plan. These officers are also working closely with National Crime Agency/Child Exploitation and Online Protection (NCA/CEOP) colleagues to address online CSE; and
- Home Office-funded Operation Hydrant which is coordinating and overseeing investigations of persons of public prominence or within institutions and building a body of evidence and best practice. In conjunction with the College of Policing, learning from this operation will be disseminated in the summer.

There is a considerable amount of national multi-agency and police-specific guidance on child protection matters which, if somewhat lengthy, is sound. The Authorised Professional Practice is evidence based and, if followed, would improve practice. The guidance on domestic abuse is being updated. Inspection reports identify some training weaknesses, such as overuse of e-learning and limited learning from serious case reviews, and also the delays in the training of specialist investigators. Improving training is likely to have a positive impact on practice but, on its own, it is unlikely to result in the step change required to ensure that all police forces fulfil their responsibility to protect vulnerable children.

Areas for attention

This overview report and the summary of recommendations set out in Annex B, have highlighted some areas of policing that are currently underdeveloped which, if addressed, may have a positive impact on future practice.

- The first is performance management and information systems. At present senior officers do not know the outcomes for children following on from police activity. Nor do they know enough about the experiences and views of children who have been in contact with the police in order to inform service development. Information systems are poorly integrated and inputting data takes up considerable time that might be more usefully spent on
investigations and enquiries. In failing to record basic data accurately such as the age, gender and ethnicity of children, police forces are unable to demonstrate they operate without discrimination.

- The second area relates to increased police use of data and information in the management of crime and offenders. For example, inter-agency approaches which use police data to identify and target for intervention the most serious and prolific offenders are relevant to child protection, especially in cases of repeat domestic violence. Similarly, the data analysis approaches that can identify those most at risk of repeat vulnerability (as currently used in domestic burglary) may be useful in child protection work. Better crime mapping could target police preventive efforts by identifying localities or communities of greatest risk.

- The third area relates to recruitment, training, staff development and staff supervision. Police activity is enormously varied. The skills required to be a good firearms officer are very different from those required to investigate child neglect or the sexual exploitation of a teenager. Many child protection developments emanate from failures in practice. There needs to be more learning from good practice based on evidence of the most effective combination of recruitment, training, learning, experience, supervision and support that enables and sustains the employment of good police staff. The NPCC and College of Policing would be best placed to take this forward.

- More attention needs to be given by senior officers to the practice on the ground. Not only should they receive reports about outcomes and children’s experience, they should also go and see for themselves what is happening in police cells, on the street and in interactions with children and how the day to day details of the job promote or hamper their high level aspirations for policing. Statistics that provide data on levels of arrests or convictions are not helpful unless accompanied by details about who is being arrested, charged and prosecuted. The findings of these reports suggest that children, perhaps because of their vulnerability, are at risk of being charged inappropriately with domestic abuse offences or with wasting police time when they withhold information or change their evidence.

Areas for further thought and consideration

Inspections can and do tell us whether or not practice is as it should be, and identify some of the factors contributing to less than optimal performance. They are less able, however, to identify the root or systemic causes of success or failure. Understanding why evidence based, well thought through procedures and guidance do not result in good practice is a conundrum which requires further thought.
Current child protection practice has built up over a number of years. Much of it is reactive in that it has been developed following inquiries into cases that have gone wrong or have received further attention when new concerns are raised. As each new weakness is identified, relevant measures are taken to prevent future error. There is now a considerable volume of procedural and guidance material and a great number of specialist officers, each of whom is expert in their own part of the system or problem area. There are also a number of inter-agency protocols and procedures designed to enable children to get appropriate help more quickly.

The inspection reports have found that in serious and urgent cases of abuse or neglect, agreed processes enable action to occur quickly and smoothly however, these cases are but a very small minority of those that come to the attention of the police and children’s social care services. In those cases that appear, initially to be less serious or are understood as something other than a child protection matter (i.e. the majority of all cases – children missing from home, CSE, domestic abuse, offending or anti-social behaviour, and low level neglect) the police safeguarding response is often weak. The police and other agencies are very aware of the risk of failing to respond to persistent low-level concerns, and have developed systems to address this including shared assessments, joint oversight and inter-agency meetings and discussions. However, these are only partially effective.

Poor practice may be caused by, or attributed to, a number of systemic weaknesses, such as insufficient knowledge or awareness, force culture, poor case supervision or management, lack of resources or poor leadership. Poor practice may also be indicative of practitioner discretion in case handling in an attempt to manage a workload over which they may, otherwise, have very little control. If the correct procedures are followed, and to a good standard, it is likely that many more children would be assessed as being at much higher risk than is the case at present. It is also possible that more thorough enquiries or investigations would lead to many more likely victims being identified.

By not ‘seeing’ abuse or neglect, undertaking only superficial enquiries and investigations which fail to reveal the extent of a problem, or assessing the bulk of cases as low risk, officers may be prioritising work according to what is manageable. Where police staff have little control over which activities they undertake, but have some control over how well they undertake them or the depth of their enquiries, they may use this discretion as a time management tool.

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Adherence to guidance results in considerable activity (if followed as intended) but may only rarely result in a plan or action to improve a child’s circumstances or to obtain a conviction in a court. We saw routine referrals to children’s social care services but very few safeguarding plans. Unless a child’s circumstances had deteriorated to the extent that significant harm had already been caused, or the incident was so serious that it demanded immediate protective action, it was unlikely that an inter-agency plan would be formulated. The rising thresholds of harm that prompt an inter-agency approach were a common theme in discussions with police staff, while children’s social care services staff commented that they were ‘drowning’ in the number of (what they considered to be) low-level concerns that the police were forwarding to them. It is not clear what, if anything is happening in respect of those children who are referred, but who are not then taken on by children’s social care services.

Although there may be cases where the police are over-responding (and we found this was a feature of sibling domestic abuse) the overwhelming findings from our child protection inspections demonstrated an under-recognition and under-estimation of risk, rather than an over-estimation. We think that there are many children about whom services should be much more concerned than they are at present and who, if their circumstances were more fully investigated (according to current guidance) would be assessed as being in need of protection.

We are particularly concerned that a child may witness a great many incidents of domestic violence before agencies come together to consider the risks and plan to protect them.

We discussed earlier the high levels of children living with domestic violence and that domestic violence was a feature in more than 50 percent of child deaths reported upon in serious case reviews.

The findings raise the question of whether assessments, meetings and case conferences are functioning as a means of avoiding further police action, rather than as a means by which agencies determine together the best means of helping children.

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116 The 2014 NSPCC report *How safe are our children?* provides some confirmatory data. The proportion of children referred to children’s social care services who are then made subject to a child protection plan; the number of children referred and who become looked after; and the number of children on whom there is a subsequent referral in the next twelve months have all grown suggesting that children in the child protection system are in much greater need of help than those in the system a few years ago. *How safe are our children?* Jutte et al, NSPCC, 2014. Available from: [www.nspcc.org.uk/globalassets/documents/research-reports/how-safe-children-2014-report.pdf](http://www.nspcc.org.uk/globalassets/documents/research-reports/how-safe-children-2014-report.pdf)

117 While the number of recorded offences of cruelty and neglect of children rose 400 percent between 2007/8 and 2012/13 and 2012/13, the number of referrals to the NSPCC help line increased by 49 percent, the number of referrals accepted by children’s social care services rose by only 9 percent:
We have noted in this report concerns about the failure to record crimes (Chapter 4 initial contact), failures to identify risk of abuse and neglect (Chapter 4 assessment and help), and the low rate of prosecutions of offenders in comparison with the number of child victims (Chapter 2). These findings are suggestive of possible inappropriate filtering by the criminal justice and child protection systems and this merits further exploration.

As a starting point, police and partner agencies need to understand better the number of children referred to the police and social workers as a child protection concern (not only those cases accepted as such by the agency); how many of those children are correctly identified as needing help and protection; and how many of those identified as needing help, are getting it. More widely, agencies, inspectorates and policy makers need a better understanding of the relationship between procedures and outcomes, and the extent to which they function as a driver for effective action. Although the investment in child protection is considerable, the costs and benefits of current approaches have not been sufficiently explored by agencies or across the system as a whole.

Greater attention needs to be paid by agencies and inspectorates to those children about whom concerns are raised, but who are not referred to children’s social care services, not accepted by children’s social care services as a child protection referral, or who are accepted but then screened out following an initial assessment. These are the bulk of cases. A number of these children might be helped by other services, including early help services, but this is not recorded on police records. It is not clear what agency, if any, is dealing with them. An examination of the cases that are not recorded as being in the child protection system will identify the gaps in safeguarding through which children are at risk of falling. This is particularly important for the police as, unlike early help agencies or children’s social care services, they are largely dependent on other agencies to address the care needs of children.

HMIC notes that crimes are better recorded by call handlers than police officers receiving referrals directly of from another agency. It also notes the considerable discretion police and children’s social care services have in determining whether a concern is a child protection matter. We think this discretion may be unhelpful as it obscures the true level of concern, and gives a false sense of security that children at risk are being properly safeguarded.

The abuse and neglect of children is not new but the scale of current and past sexual abuse revealed by recent investigations is shocking. The prioritisation of child sexual

abuse as a national threat (which requires PCCs and police forces to consider and develop their capability in this area) is welcome. There are some indications that forces are struggling to deal well with non-recent allegations of abuse alongside recent cases of children who are currently at risk. A number of agencies have raised concerns that the levels of neglect are rising, and there are new concerns regarding the welfare of displaced children (failed asylum seekers who are not entitled to benefits or to work and families evicted from their homes).

The considerable activity at national level to bring more offenders to justice will also increase the number of concerns reported to the police:

- new offences under the Serious Crime Act 2015 which more readily enable the emotional abuse of a child and coercive behaviour within relationships of people aged 16 or over to be prosecuted;¹¹⁸

- new measures such as the pre-recording of cross examination of evidence (currently being piloted) and training for barristers on how to handle vulnerable or intimidated witnesses may encourage more people to come forward and report crimes in the future; and

- additional funding (£10 million) for the tracking down of online offenders will also identify more offenders and victims, in this country and abroad.

In the light of the findings from all these reports, we conclude that, if the child protection system does not have the capacity to manage well the current demands made of it, the system will not cope with those coming down the track.

If police and children’s social care budgets are to reduce further as anticipated, a radical rethink is needed about how we safeguard children.

The current child protection arrangements which deal with incidents on a case by case basis with their focus on procedures may be inadequate for the task and different approaches may need to be considered. This is not a matter for the police alone. As well as developing new thinking with partner agencies, there needs to be consultation with the public, and with children, about what they expect of police forces and how police activity must fit within a broader whole system approach.

**Implications for HMIC**

Together, the findings from all these reports reveal a complex picture. They reinforce the need for inspections to focus on outcomes and the child’s experience, within the

¹¹⁸ The Serious Crime Act 2015 amends section 1 of the Children and Young Persons Act 1933 and extends the definition of child cruelty to include psychological harm which may include isolation, humiliation or bullying. Section 76 also makes it an offence to “repeatedly or continuously engage(s) in behaviour towards another person (B) that is controlling or coercive”.
context of agreed procedures and guidance – not driven solely by them. More attention will need to be given by HMIC to obtaining the views of children (work is about to commence on this) and engage with forces so that they listen to children and record their views.

How vulnerable children who behave badly are treated by the police is a concern, and warrants particular attention in future inspection reports.

The strengths identified in this report also merit fresh attention. The impact of good quality policing by skilled, engaged and empathetic police staff cannot be over-stated. Every case deemed to be good by inspectors in the National Child Protection Inspections had at least one good police officer taking responsibility for it – communicating well with the child, pursuing enquiries and chasing up other parts of the system or advocating for the child with other agencies. Identification of the conditions in which this behaviour can thrive would help extend good practice.

Simple data on the number of police referrals, convictions and child protection plans are not readily available. Nor are data about children who go missing, children detained in police custody, or children at risk of sexual exploitation. HMIC, together with other inspectorates and agencies, could usefully identify the data to comprise part of an annual data return to the relevant government departments.

HMIC, along with police forces, would also benefit from a better understanding of the costs of police practices as weighed against their impact. A joint inspectorate approach may be necessary to take this work forward.
Annex A
National Child Protection Inspection methodology

Objectives
Following two initial pilots, HMIC commenced a programme of child protection inspections of all police forces in England and Wales in April 2014.

The objectives of the inspection are:

- to assess how effectively police forces safeguard children at risk;
- to make recommendations to police forces for improving child protection practice;
- to highlight effective practice in child protection work; and
- to drive improvements in forces’ child protection practices.

The expectations of agencies are set out in the statutory guidance *Working Together to Safeguard Children: a guide to inter-agency working to safeguard and promote the welfare of Children*,\(^{119}\) published in March 2013. The specific police roles set out in the guidance are:

- the identification of children who might be at risk from abuse and neglect;
- investigation of alleged offences against children;
- inter-agency working and information-sharing to protect children; and
- the exercise of emergency powers to protect children.

These areas of practice are the focus of the inspection.

Inspection approach
Inspections focused on the experience of, and outcomes for, the child following its journey through child protection and criminal investigation processes. They assessed how well the service has helped and protected children and investigated alleged criminal acts, taking account of, but not measuring compliance with, policies and guidance.

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The inspections considered how the arrangements for protecting children, and the leadership and management of the police service, contributed to and supported effective practice on the ground. The team considered how well management responsibilities for child protection, as set out in the statutory guidance, were met.\textsuperscript{120}

**Methods**

- Self-assessment – practice, and management and leadership.
- Case inspections.
- Discussions with staff from within the police and from other agencies.
- Examination of reports on significant case reviews or other serious cases.
- Examination of service statistics, reports, policies and other relevant written materials.

The purpose of the self-assessment is to:

- raise awareness within the service about the strengths and weaknesses of current practice (this formed the basis for discussions with HMIC); and
- serve as a driver and benchmark for future service improvements.

**Self-assessment and case inspection**

In consultation with police services the following areas of practice have been identified for scrutiny:

- domestic abuse;
- incidents where police officers and staff identify children in need of help and protection, e.g. children being neglected;
- information-sharing and discussions regarding children potentially at risk of harm;
- the exercising of powers of police protection under section 46 of the Children Act 1989 (taking children into a ‘place of safety’);
- the completion of Section 47 Children Act 1989 enquiries, including both those of a criminal nature and those of a non-criminal nature (Section 47 enquiries are those relating to a child ‘in need’ rather than a ‘child at risk’);

• sex offender management;
• the management of missing children;
• child sexual exploitation; and
• the detention of children in police custody.
Annex B
Recommendations from National Child Protection Inspections

This annex sets out, in general terms, the most frequently made recommendations.

Child sexual exploitation
Better force plans to identify disrupt and prosecute perpetrators.
Better staff awareness and understanding, including the understanding of police staff responsibilities to protect children.
Better staff understanding of the links between missing from home and child sexual exploitation and police responsibilities for missing children.

Domestic abuse
Improve staff awareness and understanding of the impact of long standing domestic abuse on children (and the importance of good risk assessments).
Improve information collation, exchange of information with other agencies and oversight of assessments.
Ensure full information including previous incident and details of all family members are available for meetings.
Ensure plans identity what action the police can take to safeguard children for the future.
Improve recording of the views and concerns of children including their behaviour, and demeanour, to inform assessments.

Looked after children
Review of arrangements to safeguard children in care homes, especially those at risk of child sexual exploitation.
Ensure children who are looked after are not refused accommodation by the local authority and ensure alternative accommodation is provided for those children who would otherwise be remanded in police custody.
Work with local authorities to avoid the arrest and detention of looked after young people who are disruptive in their children's home.
**Child detention**

That staff act within the law and detain only those who need to be detained, and for the minimum amount of time.

Meet the statutory requirement to complete and present to a court a child detention certificate to explain the necessity of police detention.

Meet the welfare needs of children in custody including the provision of food and drink.

Improve staff awareness of child vulnerability and assessing needs.

Engage families better in helping a child meet their bail conditions.

Ensure children have an appropriate adult who can advocate on their behalf.

Ensure early assessment of likely need for alternative accommodation and early consultation with children’s social care services.

Ensure all looked after children are not refused accommodation by the local authority for whom they are responsible.

**All children**

Better communication and engagement with children.

Record children’s needs and views and ensure they inform individual and corporate plans.

Keep children and their families informed about what is happening in their case.

In child protection plans, identify a range of responses and action that the police can take.

Record what action is to be taken and action that has been taken.

**Investigations**

Set force wide standards for investigation, implement and quality assure them.

Improve investigation skills.

Supervise and audit investigations.

**Delay**

Speed up analysis of computers in high-tech crime unit.
Review child protection investigations that are outstanding to ensure children are not at risk or have been protected in the interim.

Improve timeliness of information sharing between police and other agencies.

Monitor and improve timeliness of case reviews and charging decisions with the CPS.

**Decision making and recording**

Ensure staff have access to relevant information such as an offender being on the sex offender register or children being on a child protection plan as they make first contact.

Improve recording (accuracy, content, timeliness) and the management and retention of records.

Ensure records include history of abuse, number of children in the family before decisions are made at multi-agency risk assessment conferences.

Quality assure records.

Ensure all decisions actions and discussions are recorded by joint investigation teams.

Use all relevant police information in undertaking risk assessments.

Improve skills in drawing together information and forming an assessment.

**Leadership and management**

Better oversight of work.

Quality assurance checks on all aspects of the work.

Ensure consistency and quality of response irrespective of the team to which a case is allocated.

Review how new approaches are meeting objectives including multi-agency safeguarding hubs and multi-agency risk assessment conferences and CSE teams.

Resolve problems that require an inter-agency focus, especially child detention.

Gather information and report on outcomes of police involvement.
Annex C
Glossary

adolescent  
young person who has started puberty and not yet reached adulthood

anti-social behaviour  
behaviour by a person which causes or is likely to cause harassment, alarm or distress to one or more other persons not of the same household as the person (see section 101 of the Police Reform and Social Responsibility Act 2011)

authorised professional practice  
official source of professional practice on policing, approved by the College of Policing, to which police officers and staff are expected to have regard in the discharge of their duties

child  
person under the age of 18

child protection plan  
a written record for parents, carers and professionals which identifies specific concerns about a child and assesses the likelihood of a child suffering harm; sets out what work needs to be done to protect a child from harm, by when, and who is responsible for that work; a child is no longer subject to a protection plan when it is judged that he or she is not believed to be suffering or at risk of suffering harm

College of Policing  
professional body for policing in England and Wales, established to set standards of professional practice, accredit training providers, promote good practice based on evidence, provide support to police forces and others in connection with the protection of the public and the prevention of crime, and promote ethics, values and standards of integrity in policing; its powers to set standards
have been conferred by the Police Act 1996 as amended by the Anti-social Behaviour, Crime and Policing Act 2014; under section 40C, Police Act 1996, the Home Secretary has power to direct the College, requiring it to exercise any statutory function vested in the College, and to carry out such other duties for the purpose of furthering the efficiency, effectiveness or integrity of the police as he or she specifies.

CPS

Crown Prosecution Service

independent body and the principal prosecuting authority in England and Wales; established in 1986; responsible for advising the police on cases for possible prosecution, reviewing cases submitted by the police, determining any charges in more serious or complex cases, and preparing and presenting cases for both magistrates and the high courts.

female genital mutilation

procedures that intentionally alter or cause injury to the female genital organs for non-medical reasons; illegal in the UK; sometimes referred to as female circumcision.

forced marriage

marriage conducted without the valid consent of one or both parties, and where duress is a factor.

high-tech crime unit

police computer crimes unit which undertakes examination and retrieval of evidence or intelligence from computers, computer-related media and other digital devices.

local safeguarding children board

board set up in each local authority area to develop local safeguarding policy and procedure, co-ordinate how agencies work together to safeguard and promote the welfare of children, and ensure that
safeguarding arrangements are effective; established under the Children Act 2004

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<th>LSCB</th>
<th>local safeguarding children board</th>
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<tr>
<td>MARAC</td>
<td>multi-agency risk assessment conference</td>
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<td>MASH</td>
<td>multi-agency safeguarding hub</td>
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| multi-agency risk assessment conference | locally-held meeting where statutory and voluntary agency representatives come together and share information about high-risk victims of domestic abuse; any agency can refer an adult or child whom they believe to be at high risk of harm; the aim of the meeting is to produce a co-ordinated action plan to increase an adult or child’s safety, health and well-being; agencies that attend vary, but are likely to include the police, probation, children’s, health and housing services; over 250 currently in operation across England and Wales |
| multi-agency safeguarding hub | entity in which public sector organisations with common or aligned responsibilities in relation to the safety of vulnerable people work; comprise staff from organisations such as the police and local authority social services, who work alongside one another, sharing information and co-ordinating activities to help protect the most vulnerable children and adults from harm, neglect and abuse |

| National Crime Agency | non-ministerial department established under Part 1 of the Crime and Courts Act 2013 as an operational crime-fighting agency to work at a national level to tackle organised crime, strengthen national borders, fight fraud and cyber crime, and protect children and young people from sexual abuse |
and exploitation; provides leadership in these areas through its organised crime, border policing and economic crime and child exploitation and online protection centre commands, the national crime cyber unit, and specialist capability teams

National Police Chiefs' Council organisation which brings together 43 operationally independent and locally accountable chief constables and their chief officer teams to co-ordinate national operational policing; works closely with the College of Policing, which is responsible for developing professional standards, to develop national approaches on issues such as finance, technology and human resources; replaced the Association of Chief Police Officers on 1 April 2015

NPCC National Police Chiefs' Council

PCC police and crime commissioner

elected entity for a police area, established under section 1, Police Reform and Social Responsibility Act 2011; responsible for securing the maintenance of the police force for that area and securing that the police force is efficient and effective; holds the relevant chief constable to account for the policing of the area; establishes the budget and police and crime plan for the police force; appoints and may, after due process, remove the chief constable from office

peer bullying bullying of another person of a similar age or position

registered sex offender person required to provide his details to the police because he has been convicted or cautioned for a sexual offence as set out in Schedule 3 to the
Sexual Offences Act 2003, or because he has otherwise triggered the notification requirements (for example, by being made subject to a sexual offences prevention order); as well as personal details, a registered individual must provide the police with details about his movements (for example, he must tell the police if he is going abroad and, if homeless, where he can be found); registered details may be accessed by the police, probation and prison services.

**SARC**

sexual assault referral centre

**sexual assault referral centre**

specialist centre providing examinations, health care and other support for victims of sexual assault; the centre offers immediate medical services and care to anyone who has been sexually assaulted, regardless of whether they wish to report an assault; run in partnership between police, health and voluntary services.

**so-called honour-based violence**

a collection of practices used to control behaviour within families or other social groups to protect perceived cultural and religious beliefs and/or honour; can occur when perpetrators perceive that a relative has shamed the family and/or the community by breaking their honour code.