

### CSE Post Abuse Services Update for Scrutiny Panel June 2017

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#### **1 Context**

In the wake of the Jay Report in October 2014 a number of Voluntary Community Sector (VCS) organisations with experience of working with people affected by CSE were commissioned as an interim measure to ensure that support would be available to any individual coming forward with disclosure of such issues.

The organisations commissioned in the short term were GROW, Rotherham RISE (Previously Rotherham Women's Refuge), Rotherham Abuse Counselling Service (RACS) formerly Women's Counselling Service, Swinton Lock, Rape Crisis and Apna Haq. A helpline was also commissioned to allow 24 hour access to telephone advice through the NSPCC, however take up of this service was extremely low and this ceased 31<sup>st</sup> March 2016.

It must be recognised that the support offered is needs led and therefore dictated by the individual/family accessing it. Whilst the Council is actively encouraging people to come forward it is recognised that it can take months or years of support and therapy before the individual is ready to take this step. Post disclosure support and therapy can again take months and years before that individual can move on with their lives. Recent successful convictions of perpetrators will add to the growing confidence in statutory and VCS support being offered.

Support is taking many different forms: case studies include families who have needed to relocate where support for things such as organising the logistics of relocation, settling children into new schools and changing utilities has been needed. Others have required more therapeutic intervention, counselling, group work and art therapy.

The needs analysis 2015 undertaken by Public Health colleagues describes a breadth of support needs ranging from 'hand holding', practical support through to high level mental health intervention. This range is reflected in the suite of services now on offer. The analysis included voice and influence of individuals and groups taking into account the experiences of those who had previously been failed by the system.

To ensure that all communities with the Borough had a voice in the development of services and to identify if there were any barriers to accessing post abuse support services, Salford University were commissioned to work with a number of VCS organisations to capture their thoughts, ideas and experience post Casey and Jay Reports.

This report along with the Needs Analysis and other voice and influence work has helped to shape the CSE services now in place and those being commissioned for the longer term.

## **2 CSE Post Abuse Support Service Specification 2016**

The Service Specification is for the long term post CSE support services for victims, survivors and their families in Rotherham that have been commissioned from the 1 July, 2016 for 3 years, with an option to extend for a further 2 years.

There are two main service areas that have been commissioned which provide a range of services to meet the levels of needs identified and also to offer a choice to individuals. These services include:-

- i. Practical, emotional support and advocacy and
- ii. Evidence based therapeutic interventions.

The demand for post CSE support services from July was estimated based on above needs analyses and the number of victims, survivors and family members that are currently receiving services including those supported by the former BASE Project, funded by Minister of Justice (MoJ). The service specification was been developed with direct input from people affected by CSE.

A transition plan for victims and survivors currently accessing services through organisations that were not re-commissioned was developed in line with the arrangements described for step down. Additional capacity has been factored into the first year of the long term post CSE contract to enable victims and survivors currently receiving support to continue to receive support.

The organisations that are now delivering the long term post CSE support services are GROW, Rotherham Rise and Rotherham Abuse Counselling Service. Swinton Lock has also been awarded a 12 month contract to enable existing service users to continue to receive support without the need to transfer to a different provider.

### **Numbers of Adults Supported – October 2014 to March 2017**

Counselling Services - 464 adults aged between 18 - 64

Practical and Emotional Support and Advocacy – 399 Adults aged between 18 - 64

## **Rotherham Abuse Counselling Service (RACS) (formerly Rotherham Women's Counselling Service and Pit Stop for Men)**

RACS and Pit Stop for Men provide one-to-one specialist trauma counselling for adults (10% are male). They also offer therapeutic group counselling for women who choose this while they await one-to-one counselling, or following the ending of their counselling sessions. This professional counselling service offers the individual the opportunity to reach a greater understanding of how past abuse has affected them and enable survivors to make informed choices whilst minimising the cycle of abuse.

Between October 2014 and March 2017, 215 new referrals for CSE were received for counselling.

In April 2015 the Counselling Service purchased a new database and improvements are being made to the collection and validation of data. Improvements have been achieved in relation to analysing the data especially around waiting times. Outcomes are now also being monitored on the database, using the Patient Health Questionnaire scores (PHQ) and determining the progress achieved between each counselling session.

## **GROW**

GROW's Involve Project operates a bespoke trauma service model, incorporating a person centred approach to support children, young people and families. They work in partnership with Children and Young People's Services and receive referrals for young people as both new victims and to those survivors who are now coming forward and disclosing historical abuse. These workers also provide support to the survivor's family to enable their recovery, and their ability to be a protective factor for their child/young person.

The majority of the young people referred to the service for practical, emotional support and advocacy due to historic sexual exploitation also had other support needs such as drugs, isolation, internet grooming, attachment issues, suicidal tendencies and the need to develop positive relationships. The total number of referrals between October 2014 and March 2017 is 157. The majority of victims and survivors being supported are adults with 84 aged 24+ and 50 aged 18-24. 23 young people under the age of 18 have also been supported. Support to parents is also being provided, helping them to come to terms with their child's sexual exploitation and supporting them to help their child. Some of the outcomes achieved include referrals for specialist support such as Know the Score, Young Women's Housing Project, counselling and also one to one support to build resilience such as understanding about stranger danger, positive relationships, life skills, building confidence.

## **Rotherham (RISE) – Project Survive**

Building on their experience of providing support for women and their children where domestic abuse has been a feature, RISE utilise this experience and approach to enable the delivery of specialist support for survivors of Child Sexual exploitation (CSE). They work with young people 12 - 18 and women aged 18+, also offering family support and counselling.

The number of new referrals to the service between January 2015 and March 2017 is 122 in relation to practical, emotional support and advocacy. This included 32 young people under the age of 18. Rotherham Rise also delivers counselling to victims and survivors and has received 92 referrals between March 2016 and March 2017, 20 of which were under the age of 18.

### **Swinton Lock**

Between October 2014 and March 2017, 127 victims and survivors have been supported. Swinton Lock are supporting victims, survivors and family members around a variety of issues, often practical support but includes Police interviews and Court Hearings. The outcomes achieved include: support to parents about parenting skills and safety, referrals to social care and other statutory organisations, referrals for counselling, support to witnesses in Operation Clover, referrals to specialist services such as drugs and alcohol services, support to attend college, attendance at group therapy and family support.

### **Commissioned Services Waiting Times**

Waiting lists and times vary between providers from no wait to 8 - 20 weeks currently. The Council has requested that should any service be operating a waiting list that they make the other services available known to the service user so that an interim support measure can be taken if required. All Commissioned Services have variable capacity as the offer is 'needs led' and, therefore, can range from a telephone call check to an intensive support package.

### **Mental Health Services Related to CSE**

CAMHS (Children and Adolescent Mental Health Services) is meeting its target of seeing non-urgent cases within 3 weeks of referral for the first appointment and there is no waiting list into the service for this first assessment. CSE post abuse cases where there is a mental health concern would currently be seen within this structure.

For adult survivors with mental health difficulty, support would depend on the nature of the need, from GP based services to therapy support, with waiting lists varying according to the GP surgery. If they are too complex or risky they would then be referred to secondary care and then they would be assessed for an appropriate service, and these will all have a variety of waiting times depending upon need.

In July 2016 the Clinical Commissioning Group (CCG) made the post of CSE Psychotherapist permanent and agreed to fund a 0.8 post for a

CAMHS practitioner to support the CSE pathway. The Psychotherapist post works 2 days per week with children, 2 days with adults and 1 day with the Voluntary Sector organisations delivering commissioned services offering clinical case consultation and support to delivery staff.