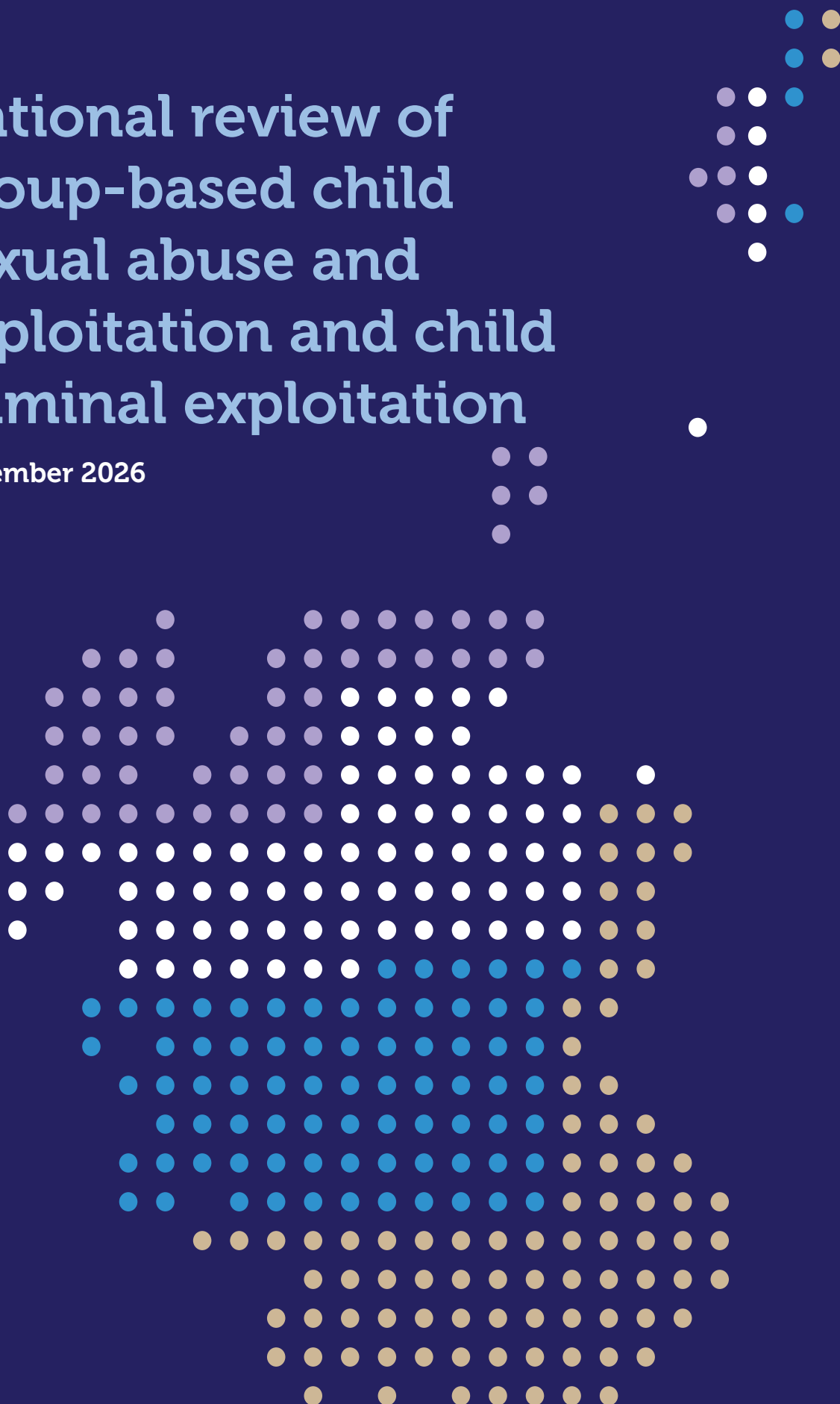


National review of group-based child sexual abuse and exploitation and child criminal exploitation

September 2026



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Foreword

Child sexual abuse and exploitation (CSAE) and child criminal exploitation (CCE) are significant harms that have a devastating impact on survivors, their families and carers, and on wider Scottish society. Children and young people impacted by these forms of harm require a careful, compassionate, trauma-informed and coordinated response that recognises the complexity of their experiences.

This national review into group-based CSAE and CCE was formally requested by Scottish Ministers in December 2025. The request outlined that this review be led by the Care Inspectorate and His Majesty's Inspectorate of Constabulary in Scotland (HMICS), working with Healthcare Improvement Scotland (HIS) and His Majesty's Inspectorate of Education in Scotland (HMIE).

The decision to request the four national scrutiny bodies to work jointly on this review reflects both the seriousness and complexity of group-based CSAE and CCE. All four scrutiny bodies are independent from the Scottish Government and the services responsible for public protection in local areas across Scotland.

Earlier this year, we set out the approach and methodology for the review, and this report presents our findings and recommendations. We would like to thank Professor Alexis Jay for the expert advice and guidance she provided in developing our approach. We are grateful for her input.

The national review assessed Chief Officers' Groups' (COGs) understanding and oversight of group-based child sexual abuse and exploitation and child criminal exploitation.

Our joint team undertook a significant programme of work between February and July 2026 to complete this assessment. The team reviewed over 150 national documents, 3,400 supporting documents and conducted structured interviews with all 30 COGs in Scotland.

Understanding the extent and quality of local leadership, professional awareness and strategic oversight is essential to strengthening protection for children and young people. This provides an important foundation to inform subsequent work.

The absence of a national definition, consistent data collection and specific reporting requirements means neither partnerships nor national bodies can accurately determine the scale, prevalence, characteristics or threat posed by group-based child sexual abuse, exploitation or criminal exploitation.

We are confident that the findings and recommendations within this report will help strengthen national understanding of the harmful nature of group-based sexual abuse and exploitation of children and young people. This report will support the collective efforts being made across Scotland to prevent harm, improve protection and ensure learning leads to meaningful change.

We would like to thank everyone who engaged with the review team, and provided documents and information, often in demanding circumstances and with tight deadlines.

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Craig Naylor, His Majesty's Chief Inspector of Constabulary in Scotland

Ruth Binks, His Majesty's Chief Inspector of Education Scotland

Robbie Pearson, Healthcare Improvement Scotland, Chief Executive

Introduction

About this review

In December 2025, Scottish Ministers requested that the Care Inspectorate and His Majesty's Inspectorate of Constabulary in Scotland (HMICS), working with Healthcare Improvement Scotland (HIS) and His Majesty's Inspectorate of Education in Scotland (HMIE), carry out a national review into group-based child sexual abuse and exploitation (CSAE) and child criminal exploitation (CCE). The review was to be conducted under S.115 of the [Public Services Reform \(Scotland\) Act 2010](#).

This national review was set within Scotland's commitment to [the promise](#) which aims to ensure that all children and young people grow up loved, safe and respected. The work of the review was also informed by the [United Nations Convention on the Rights of the Child \(Incorporation\) \(Scotland\) Act 2024](#), with particular focus on the expectation that children and young people are protected from all forms of abuse, exploitation and harm.

The promise and the UNCRC framework provided an important context for considering how services identify, prevent and respond to group-based child sexual abuse and exploitation and child criminal exploitation.

Child sexual abuse and exploitation (CSAE) and child criminal exploitation (CCE) are significant harms with profound impacts on children, young people, their families, carers and on society.

In the absence of a national definition, we consider group-based CSAE and CCE to be significant harms that involve two or more individuals who take advantage of a power imbalance to coerce, manipulate or deceive children and young people into sexual and/or criminal activity.

The purpose of the review was to assess the extent to which chief officers understood, oversaw and responded to group-based CSAE and CCE; and to provide assurance on the effectiveness of governance, leadership and accountability arrangements.

The review assessed the following areas.

- Chief officers' understanding of the scale and nature of group-based child sexual abuse and exploitation and child criminal exploitation.
- Local governance arrangements, guidance and processes for the prevention, identification and response to group-based child sexual abuse and exploitation and child criminal exploitation.

- Available data and information on children and young people's experience of support if they were at risk of group-based child sexual abuse and exploitation or child criminal exploitation.

Appendix 1 has a full glossary of terminology and abbreviations/acronyms used in this report.

Review context

The review was undertaken within a wider national context of increasing awareness and activity relating to group-based child sexual abuse and exploitation (CSAE) and child criminal exploitation (CCE).

Recent inquiries in England and Wales, criminal convictions and associated media reporting have increased public awareness of the significant issues related to group-based CSAE and CCE. These have also emphasised the complex and often hidden nature of group-based harms, as well as the challenges practitioners faced in identifying, preventing and responding to them.

In Scotland, a range of developments has increased national focus on CSAE and CCE. During the review period the landscape continued to evolve through the announcement of the Statutory Public Inquiry into group-based CSAE, the Scottish Truth Project and the continuing work within the Scottish Child Abuse Inquiry. While recognising this wider activity, the review was conducted independently of other national programmes and initiatives.

The scope of this work, as directed by the ministerial commission, did not include the review of records or engagement with practitioners or children, young people and families impacted by group-based harms.

The work did not extend to post school settings, including colleges. As a result, the review could not assess chief officers' groups' understanding of, and response to, group-based child sexual abuse and exploitation and child criminal exploitation that impacted young people up to the age of 18 within these settings. Where young people under the age of 18 are at risk of, or experiencing CSAE or CCE, we would expect chief officers' groups to have oversight of these risks regardless of the setting in which they occur. These young people remain within the remit of multi-agency child protection arrangements. This remains an area where further information and understanding is required.

How we conducted the review

The national review was underpinned by the [Quality framework for children and young people in need of care and protection \(November 2022\)](#).

Key lines of enquiry

The review was structured around the following key lines of enquiry.

1. Strategic and operational leaders work together to ensure there are effective arrangements in place for the prevention, identification and response to incidences of group-based child sexual abuse and exploitation and child criminal exploitation.
2. Effective processes are in place to support the prevention, identification and response to children and young people at risk of, or subject to, group-based child sexual abuse and exploitation and child criminal exploitation.
3. Supports are helping to improve the safety and wellbeing of children and young people who have experienced or have been at risk of experiencing group-based child sexual abuse and exploitation and child criminal exploitation.

Themes

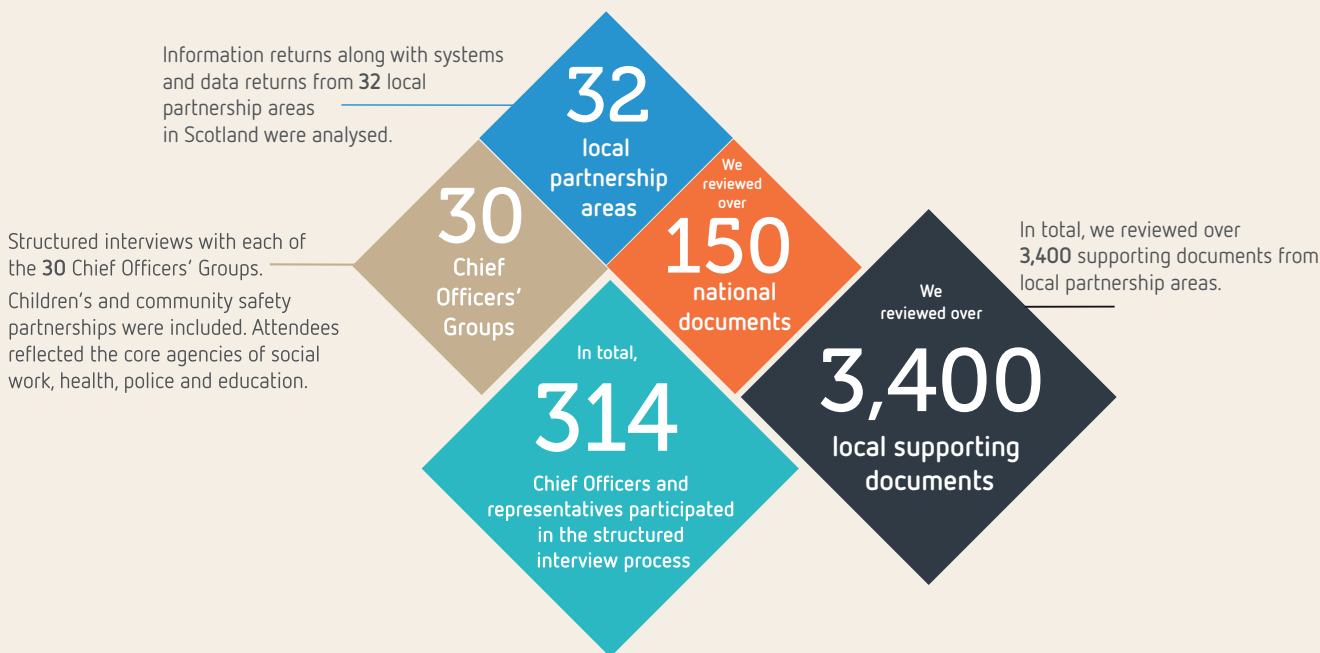
Through the key lines of enquiry, we addressed the eight themes set out in the ministerial request.

- Strategic leadership, governance and challenge
- Public protection interfaces
- Threat assessment, data, intelligence and information sharing
- Investigation quality, disruption and prosecution
- Early identification, referral and access to protection
- Workforce capability, culture and challenge
- Protection, advocacy and support
- Care experienced children and young people and other young people at increased risk of group-based harm

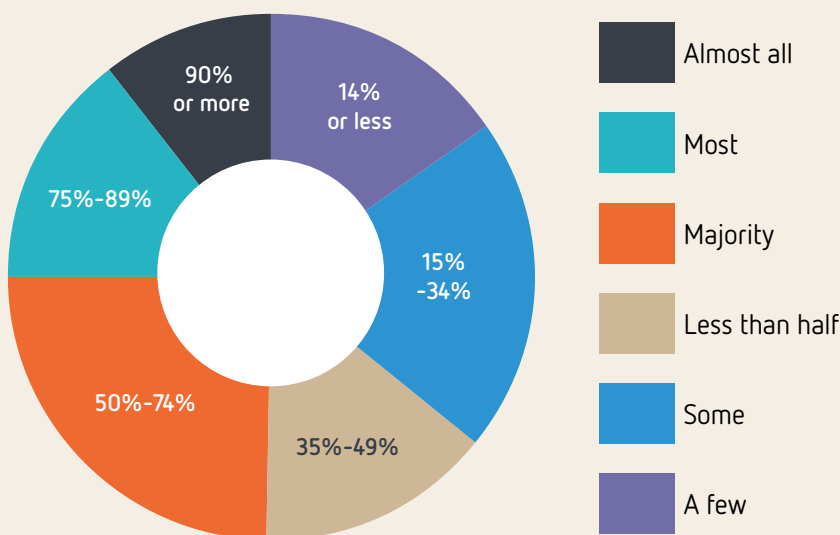
This report presents the key findings and recommendations of the review. These findings and recommendations are provided for consideration by the Scottish Government. Their implementation would provide opportunities to strengthen current arrangements and enhance the effectiveness of the collective response to group-based CSAE and CCE.

Review activity

The review team met with **314** chief officers and representatives from across the **32** local partnership areas in Scotland. They also gathered and analysed information from a range of sources during the review. We also asked partnerships to submit information returns, systems and data returns along with supporting evidence.



In this report we use the following quantitative terms:



Key findings

1. There was a lack of accurate national data related to group-based harms. While some partnerships collected local data, they were not required to collect or report data on group-based harms. This, together with the absence of a definition, limited the chief officers' groups' ability to report on the scale, prevalence, characteristics and threat of group-based harm. As a result, there is no reliable picture across Scotland of these types of harms.
2. Chief officers' groups were confident in their public protection arrangements. However, that confidence was based on existing approaches that did not focus sufficiently on group-based child sexual abuse and exploitation or child criminal exploitation.
3. Across Scotland, responses to group-based harms were inconsistent. Only a few partnerships were able to demonstrate effective multi-agency coordination to disrupt group-based child sexual abuse and exploitation and child criminal exploitation. Limited information sharing about disruption, prosecution and post-conviction activity restricted opportunities for learning and service improvement.
4. Required health assessments were not consistently offered or provided in a timely manner for care experienced children and young people. This resulted in potentially missed opportunities to identify those at increased risk of group-based harms.
5. Police Scotland's Partners Intelligence Portal (PIP) enables secure submission of key information by partnership agencies, which contributes to a broader intelligence picture on child sexual abuse and exploitation and child criminal exploitation. However, awareness and understanding of the portal were limited and its use was inconsistent across the country.
6. Contextual safeguarding, and similar approaches, were valued and helped staff to address harm beyond the family home, but implementation across Scotland was variable. Where well-established strategic and operational arrangements existed, partners reported they were better able to respond to non-familial harm through effective collaboration and information sharing.
7. Inter-agency referral discussions (IRDs) helped partners to effectively share child protection information and plan joint actions to protect children and young people. However, the data indicated that when child sexual abuse and exploitation and child criminal exploitation concerns were reported this did not always lead to an IRD.

8. Most partnerships identified a range of quality assurance mechanisms that helped them to demonstrate the effectiveness of public protection arrangements. While chief officers were confident these would effectively support staff to respond to group-based harms, most did not focus on it explicitly.
9. Routine enquiry was established within maternity, midwifery and health visiting services. Implementation was limited in emergency departments, addiction services and mental health services. This potentially resulted in missed opportunities for disclosure, early identification and intervention of group-based harms.
10. Chief officers valued multi-agency learning and guidance to support effective partnership working. However, learning, policies and guidance did not specifically address group-based harms or the risk factors associated with children and young people at increased risk of harm.
11. Current public protection processes helped staff work together to identify and support individual children and young people at risk of harm. However, there was limited evidence that these processes effectively addressed group-based harms.
12. Chief officers had confidence that children and young people who had experienced harm were being well supported through their relationships with social workers, residential workers and third sector practitioners. However, information on impact was not being routinely gathered and collated to demonstrate the difference services were making.
13. There was consensus across partnerships that children and young people impacted by criminal exploitation required protection and trauma-informed care and support.
14. National initiatives such as Bairns' Hoose, Scottish Child Interview Model (SCIM) and trauma-informed practice were helping partners to prioritise the experiences and views of children and young people. These approaches helped partners demonstrate effective practice and support service improvement.
15. Chief officers were confident that education services had established policies, procedures, guidance and learning to identify children and young people at increased risk of significant harm.

Recommendations

The Scottish Government, in partnership with stakeholders across the sector, should undertake the following actions.

- ▶ Develop a national definition of what constitutes group-based child sexual abuse and exploitation (CSAE) and child criminal exploitation (CCE).

- ▶ Update National Guidance for Child Protection in Scotland to include the new national definition of what constitutes group-based harms, supported by enhanced child protection guidance and nationally agreed key indicators of group-based child sexual abuse and exploitation and child criminal exploitation.

- ▶ Implement standardised data collection on group-based harms with consistent reporting requirements in order to strengthen approaches. This includes identification, categorisation, prevalence, scale and trend analysis to support strategic scrutiny at both local and national levels.

- ▶ Evaluate existing learning to ensure that it consistently covers group-based harms as part of public protection arrangements.

- ▶ Develop and embed robust national arrangements to support the consistent and comprehensive collection and sharing of information and data on the prevalence of group-based child sexual abuse and exploitation and child criminal exploitation.

Key line of enquiry 1: Strategic and operational leaders work together to ensure there are effective arrangements in place for the prevention, identification and response to incidences of group-based child sexual abuse and exploitation and child criminal exploitation.

Summary of findings and emerging issues

There were structural gaps that impeded strategic governance and oversight of group-based harm, notably inconsistent terminology, data and reporting arrangements.

Chief officers had high confidence in collaborative arrangements, including a diverse third sector network, to prevent, identify and respond to group-based child sexual abuse and exploitation (CSAE) and child criminal exploitation (CCE) within existing child protection arrangements.

Despite this high level of confidence, chief officers were not routinely provided with specific information on the prevalence, nature or patterns of group-based harms. Sharing of CSAE and CCE intelligence with Police Scotland, using the Partners Intelligence Portal, was limited. Threat assessments, information and data were all significantly impacted by the lack of national data and a defined national definition.

This directly limited partnerships' ability to report on the scale, prevalence, characteristics and threat of group-based harms.

Theme: Strategic leadership, governance and challenge

This theme assessed how chief officers and local partnerships provided strategic leadership and governance for child protection activity. It considered arrangements for planning, oversight, accountability, quality assurance and learning. This also included how partnerships seek assurance that children and young people at risk of harm are identified, protected and supported.

Child protection governance and oversight

Across Scotland, chief officers were effectively discharging their duties to work together and lead inter-agency protection work. Well-established chief officers' groups (COGs) provided a strong foundation for collaborative working.

Our assessment found Child Protection Committees (CPC), or in some areas Public Protection Committees (PPC), had clear accountability arrangements in place. Strong reporting mechanisms enabled chief officers to maintain effective oversight of joint protection work.

In some areas, dedicated sub-groups provided additional oversight. Examples of sub-groups included those focused on child sexual abuse, contextual safeguarding and protection of young people. In these areas, chief officers reported these arrangements helped support greater strategic focus on emerging risks. They also strengthened links between strategic priorities and operational activity.

Chief officers acknowledged that effective child protection processes were required to identify, assess and support children and young people impacted by group-based child sexual abuse and exploitation (CSAE) and child criminal exploitation (CCE).

Regardless of whether harm was caused by an individual or a group, there was a shared understanding that children and young people needed trauma-informed responses tailored to their individual circumstances. This child-centred approach underpinned child protection planning across Scotland.

Strategic planning arrangements

In the majority of partnership areas, chief officers were confident that appropriate mechanisms were in place to prevent, identify and respond to CSAE and CCE concerns. This was supported through strategic planning arrangements developed in collaboration with partners, including the third sector. Partnerships reported that arrangements were informed by the views and experiences of children and young people with lived experience.

While we shared this confidence, it was evident that group-based harm was not consistently reflected as a distinct theme within strategic plans. However, partnerships identified and responded to CSAE and CCE within broader child protection and public protection priorities.

On occasion, strategic planning arrangements reflected consideration of wider risks and vulnerabilities. Examples included missing children, trafficking, modern slavery, forced marriage and community safety.

Chief officers' confidence in these arrangements ranged from medium to high. However, there were opportunities for chief officers to strengthen strategic oversight and assurance in relation to emerging or less well-understood risks.

Oversight of group-based harms

Given the focus of the review, chief officers were asked to reflect specifically on their oversight and assurance of group-based CSAE and CCE. This took place within the context of there being no nationally agreed definition of group-based harms. Additionally, local partnerships were not required to collect or report information specifically relating to group-based harms. Therefore, existing reporting arrangements were limited in respect of group-based harms and primarily focused on individual incidents of harm.

In the absence of a nationally agreed definition, terminology relating to group-based harms was not used consistently across different partnerships. Local procedures and guidance generally addressed CSAE and CCE but did not typically reference group-based harms. However, chief officers were confident that child protection procedures provided an effective response to harms, whether carried out by an individual or a group.

Despite this high level of confidence, chief officers were not routinely provided with specific information on the prevalence, nature or patterns of group-based harms. This reflected the absence of systematic data and information collection along with analysis and reporting arrangements focused on group-based harms.

The lack of consistent terminology, data and reporting arrangements for group-based harms hindered robust strategic oversight and assurance.

Strategic developments: risks facing young people in communities

There were positive examples across Scotland of partnerships prioritising work to reduce risks to children and young people in community settings. This included multi-agency initiatives focused on CSAE and CCE, missing children and young people, organised crime, county lines activity and links to specific locations.

Where these initiatives were in place, leaders at all levels used them to identify those causing harms, recognise children and young people at risk, and coordinate effective multi-agency responses.

Some partnerships had strategically prioritised identifying and addressing harms arising outwith the family home through the implementation of contextual safeguarding or similar approaches.

When used effectively, these approaches helped practitioners move beyond a family-focused child protection model. They enabled the recognition of the impact peer groups, schools, communities and online environments had on children and young people's safety and wellbeing.

However, this strategic focus on harms outwith the home varied across the country. While some partnerships had developed these approaches effectively, others were at an earlier stage. This limited the consistency and quality of responses to extra-familial risks. This meant that there was potential variance in the level of practitioners' understanding of contextual risks.

Promoting a learning culture

Chief officers reported that they were assured of the promotion of a culture of learning and continuous improvement across partnerships. They drew on learning from reviews, inspections and wider developments across Scotland and the UK. Learning informed workforce development, service delivery and improvement activity. Quality assurance and performance reporting supported accountability and organisational learning.

Partnerships were asked whether they had undertaken, or were currently undertaking, learning reviews or other forms of learning activity relating to CSAE or CCE. Just under half of partnerships reported that they had completed reviews relating to CSAE or CCE within the previous two years.

Chief officers recognised the value of learning reviews in strengthening local understanding of risk, enhancing multi-agency responses, and informing service and practice development.

Theme: Public protection interfaces

This theme assessed how chief officers ensured that different services, agencies and systems work effectively. It included interactions between public protection systems, third sector organisations and with those with lived experience of services.

Engagement across public protection work

Most chief officers were confident in their collaborative arrangements to prevent, identify and respond to group-based child sexual abuse and exploitation (CSAE) and child criminal exploitation (CCE). These arrangements were developed with partner agencies, including the third sector. They also included Crown Office and Procurator Fiscal Service (COPFS), Scottish Children's Reporter Administration (SCRA), independent education providers, colleges, and adult services.

Partnerships recognised CSAE and CCE as cross-cutting public protection issues. Consequently, strong links existed between child protection, adult protection, violence against women and girls, and community safety structures. Although governance arrangements varied across partnerships, there was evidence of well-embedded representation across groups.

However, there was limited evidence of how partner agencies worked together to identify and meaningfully support children and young people at risk of group-based harms.

Engagement with third sector organisations

Chief officers recognised the contribution of third sector organisations in supporting children and young people impacted by CSAE and CCE. Across all partnerships, third sector organisations were represented on committees and contributed to a range of other strategic groups and governance forums. Only a few partnerships specifically focused on group-based harms.

Across the country, a diverse network of third sector services supported children and young people impacted by CSAE and CCE. This included both locally based organisations and larger national providers. Partnerships reflected the vital role of the third sector in delivering specialist support, advocacy and early intervention services.

Examples included:

- Services providing support for young people impacted by exploitation across multiple local authority areas.
- Targeted initiatives aimed at preventing involvement in serious and organised crime, drug distribution and CCE.
- Early preventative support from family support services.

While third sector partners were well-represented within strategic structures, variation in commissioning arrangements resulted in differing levels of service availability and support across the country. Opportunities remained for partnerships to fully understand the impact of third sector services in preventing, identifying and supporting children and young people experiencing group-based CSAE and CCE.

Engagement with children and young people

Almost all chief officers were confident that the views and experiences of children and young people with lived experience were heard and included. They believed this feedback informed and improved services.

Efforts to improve listening to, and understanding, children and young people's experiences were evident within child protection systems and frequently featured within improvement plans and activity. Chief officers described a range of approaches promoting participation, although the maturity and consistency of these arrangements varied across partnerships.

Despite some progress, partnerships recognised that further work was required to ensure the meaningful involvement of children and young people in shaping services. This was particularly evident in relation to understanding and responding to the experiences of children and young people impacted by group-based CSAE and CCE.

Continued attention was required to ensure that children and young people with lived experience consistently had opportunities to inform service design, planning and improvement.

Theme: Threat assessment, data, intelligence and information sharing

This theme assessed the processes used by partnerships in the identification, assessment, and response to group-based child sexual abuse and exploitation (CSAE) and child criminal exploitation (CCE). It involved analysing data and intelligence to ensure that agencies were effective in their approaches.

Threat assessment, information sharing and data

Most partnerships were confident in their information-sharing arrangements. This was underpinned by a positive collaborative culture, clearly established protocols and strong practitioner multi-agency relationships.

Chief officers reported that professional trust and confidence across agencies helped practitioners effectively share information. Examples of multi-agency collaboration included multi-agency hubs, inter-agency referral discussions (IRDs), child exploitation groups and public protection units. However, there was limited evidence of the effectiveness of multi-agency information sharing in relation to group-based harms.

National electronic systems and multi-agency screening processes helped enable agencies to identify and respond to CSAE and CCE. An example of this was Police Scotland's interim vulnerable persons database (iVPD). This facilitated the sharing of information across the country and captured data such as ethnicity and gender. It also included a Child Sexual Exploitation (CSE) marker, enabling the extraction and analysis of reports where this was identified as a risk factor.

While there were positive features of these examples, the iVPD system lacked the functionality to specifically record and analyse group-based harms. While the iVPD system was a useful information sharing tool the inclusion of group-based harms would improve national data collection.

The majority of partnerships were not routinely collecting data relating to group-based harms. Most partnerships reported that the absence of a national definition of group-based harms compounded this issue. Additionally, less than half of partnerships gathered data relating to characteristics, such as ethnicity, disability and care experience.

Overall, we assessed that the lack of national data, linked with a lack of a national definition, limited our ability to report on the scale, prevalence, characteristics and threat of group-based harms.

Partnerships positively reported that reviewing their information on group-based CSAE and CCE for this review was already helping to identify areas for improvement locally. In some areas, work had commenced to help partnerships improve their understanding of local exploitation risks, supporting better strategic oversight and decision-making.

The National Referral Mechanism (NRM) provided partnerships across the UK with a framework for identifying, reporting and planning responses to modern slavery. Across Scotland, partnerships identified 591 children and young people who were referred within the past two years. However, use of this was variable across partnerships and there was limited information available about the effectiveness of this mechanism.

Intelligence

Most partnerships described effective intelligence-sharing arrangements at local and national levels. Intelligence assessments and sharing were underpinned by national protocols, constructive operational relationships, daily Police Scotland intelligence reviews and clear escalation routes. These arrangements supported the identification, assessment and sharing of emerging risks while maintaining appropriate safeguards around the confidentiality of criminal intelligence.

The gathering of intelligence relating to CSAE and CCE are national priorities for Police Scotland. Partnerships demonstrated a range of intelligence-sharing and governance mechanisms in support of this requirement.

There was a clear commitment across partnerships in support of strengthening intelligence gathering around group-based harms. However, chief officers had limited assurance regarding the effectiveness and oversight of intelligence arrangements specifically relating to group-based CSAE and CCE.

Awareness of criminal groups, county lines activity and exploitation networks operating across local and regional boundaries varied according to local prevalence, geography and risk. There were further opportunities to strengthen and gather community intelligence and increase public awareness of group-based CSAE and CCE to support the earlier identification of emerging risks and patterns of behaviour.

Police Scotland's PIP provided an opportunity for partners from other agencies to share intelligence relating to CSAE and CCE with the police. However, partnerships were not consistently aware of or utilising the portal. Barriers to using this included a lack of practitioner awareness and confidence.

Partnerships emphasised the need for system improvements, renewed promotion and ongoing multi-agency learning. Our assessment fully supported this position.

Key line of enquiry 2: Effective processes are in place to support the prevention, identification and response to children and young people at risk of, or subject to, group-based child sexual abuse and exploitation and child criminal exploitation.

Summary of findings and emerging issues

Chief officers were confident that early identification was well embedded in child protection processes through a protective lens. While child sexual abuse and exploitation (CSAE) and child criminal exploitation (CCE) were commonly identified in early child protection processes, only a limited number of partnerships could effectively categorise or present data on this within the context of group-based harms.

Routine enquiry compliance was variable across health services. Contextual safeguarding was a developing feature nationally but not universally implemented. This was broadening the understanding of risk beyond the family.

Bairns' Hoose approaches further strengthened collaboration, practitioner confidence and support for children and young people in a trauma-informed way. Strategic partnership activity to disrupt criminal gang activity and use of associated legal powers was limited. Workforce learning and development for child protection was impactful, but group-based harms activity was limited.

Chief officers were less assured that services were adequately resourced to address group-based CSAE and CCE activity but were confident staff in place were being well supported.

Theme: Early identification, referral and access to protection

This theme assessed how effectively partnerships recognised when children and young people were at risk of group-based child sexual abuse and exploitation (CSAE) and child criminal exploitation (CCE).

It assessed whether concerns were recognised, shared and acted on promptly to reduce harms. It also examined partnership work with communities to raise awareness, strengthen prevention and enable early identification.

Early identification

Most partnerships reported that collaboration between statutory services, third sector organisations and community partners supported early identification of children and young people at risk of CSAE and CCE. Almost all partnerships reported work was underpinned by the Getting it right for every child (GIRFEC) National Practice Model.

Partnerships recognised the value of wider collaboration, including the third sector, to identify risks and harms. Partnerships aimed to strengthen prevention activity by focusing on harms outwith the home. Some partnerships had established strategy meetings and early intervention with the aim of providing timely, targeted support and reducing risk.

Almost all partnerships reported that practitioners viewed children and young people in conflict with the law through a protective lens. Partnerships recognised that when young people come into conflict with the law it may be an indicator of CCE.

Practitioners routinely considered exploitation indicators and protected and supported children and young people when concerns emerged. In some areas, protective screening occurred at first police contact with referrals into child protection. Partnerships reported that if a child came to the attention of Police Scotland, police routinely considered whether the child was at increased risk of CCE.

While partnerships expressed confidence in their arrangements, there was limited evidence to evaluate the effectiveness of multi-agency processes in identifying and responding to group-based CSAE and CCE. This included the extent to which these early interventions improved outcomes for children and young people.

Notifications of concern

Most partnerships reported practitioners across agencies were confident in recognising and responding to group-based CSAE and CCE concerns. However, when asked to identify the number of children and young people who were subject to notifications of

concerns relating to group-based CSAE or CCE within the past two years, less than half of partnership areas were collating data about this. As a result, this information is not available on a national basis.

Given the majority of partnerships were unable to provide data specifically relating to group-based CSAE and CCE, the review team also requested information on the number of concerns relating to CSAE and CCE more broadly over the previous two years.

There were significant variations in how partnerships recorded, classified and reported this information, limiting meaningful comparison and preventing firm conclusions being drawn from the data.

As a result, there were inconsistencies in recording and categorisation, highlighting the need for more robust and consistent approaches to data collection and analysis.

Inter-agency referral discussions (IRDs)

Almost all partnerships reported confidence that group-based CSAE and CCE concerns were managed through established child protection pathways. Coordinated intervention enabled prompt forensic medical examinations when required. Chief officers were confident in IRD processes and these would encompass group-based harms. However, evidence was limited as to how IRDs would specifically address these harms.

Partnerships were asked to provide the numbers of children and young people subject to IRDs due to concerns about group-based CSAE and CCE over the past two years. Almost all partnerships did not gather group-based data. Therefore, it was not possible to determine how many IRDs have taken place nationally relating to group-based CSAE and CCE.

In relation to CSAE and CCE more broadly, the data showed that in some partnerships notifications of concern did not always lead to IRDs. Reasons for those not proceeding to IRD were unclear, but may be related to recording issues, local procedural variation or alternative safeguarding processes.

These inconsistencies created uncertainty about risk assessment and decision-making for children and young people at risk of group-based harms.

Access to health services

Almost all partnerships reported confidence that sexual health services routinely undertook risk assessments, with most Sexual Assault Response Coordination Services (SARCs) also completing comprehensive risk assessments. These assessments included

consideration of CSAE, supporting the identification of children and young people who may be at risk.

However, relevant data could not be reliably extracted from clinical IT systems, limiting the ability to develop a national picture of CSAE prevalence and identify patterns, trends and areas of unmet need.

Routine enquiry, introduced through Chief Executive Letter 41 (CEL41) (2008), supported the early identification of abuse risk and safe disclosure, including among young people aged 16 and over accessing adult healthcare services. The majority of partnerships reported that routine enquiry was implemented, however assurance was limited as only half monitored compliance.

Partnerships reported that routine enquiry was well established within midwifery, family nurse partnership and health visiting services. Confidence was lower regarding its consistent application within emergency departments, addiction and mental health services, increasing the risk that opportunities for disclosure and early intervention may be missed.

By strengthening the consistent implementation, compliance monitoring, and evaluation of routine enquiry across all relevant health services, this would improve opportunities for early identification and disclosure of young people at risk of or experiencing group based CSAE.

Theme: Investigation quality, disruption and prosecution

This theme assessed the extent to which child-centred, intelligence-led investigations identified risk and protected children and young people. It assessed how partnerships disrupted those persons or groups presenting a risk of harm and supported prosecutions when appropriate. It also considered how partnerships responded to group-based child sexual abuse and exploitation (CSAE) and child criminal exploitation (CCE) through prevention, disruption, enforcement, and prosecution activity to protect communities and deter future offending.

Investigation and prosecution

Almost all partnerships where confident child protection investigations were supported by established information gathering processes. Partnerships reported that IRDs and developing contextual safeguarding approaches, or similar, were underpinned by coordinated partnership working. Chief officers believed that CSAE and CCE concerns were being appropriately identified, assessed and investigated.

Partnerships reported that current investigative approaches provided structured and systematic mechanisms to gather information relating to CSAE and CCE concerns. Partnerships reported that opportunities were maximised to support investigations, decision making, enforcement and criminal case reporting. This view was further reinforced where trauma-informed principles, child-centred approaches, Bairns' Hoose, Scottish Child Interview Model (SCIM) and prompt access to specialist forensic services were evident.

Bairns' Hoose approaches were implemented or were being actively developed across the country. The appointment of dedicated coordinators, development of specialist facilities and the establishment of governance and oversight arrangements demonstrated a commitment across statutory and third sector agencies. Bairns' Hoose strengthened collaboration, improved practitioners' confidence and enhanced support for young people impacted by CSAE, CCE and other harms.

Trauma-informed investigative practices, including SCIM, were structured around child protection. Partnerships reported that agencies worked together to gather evidence to assist with criminal investigations, while being sensitive to children and young people's needs.

Examples across partnerships of multi-agency investigations into group-based CSAE and CCE were limited. Chief officers commonly viewed existing investigation processes and plans as sufficient to capture and respond to concerns.

Most partnerships reported that relationships between key agencies, including Crown Office and Procurator Fiscal Service (COPFS), were viewed positively.

However, prosecution outcomes, investigative updates or learning from justice processes were not routinely requested or reported to chief officers or Child Protection Committees (CPCs).

Awareness of prosecution activity varied considerably across partnerships. Chief officers identified opportunities to strengthen engagement with COPFS. Our assessment across the review activity supported this position.

Disruption of criminal activity

Partnership-based disruption activity was widely acknowledged as a vital component of the response to CSAE and CCE, bringing together the expertise, intelligence and statutory powers of agencies. However, partnership-led disruption and prevention activity was only evident in a few areas.

In these areas, partnerships embedded pro-active, exploitation-focused activity within local police plans and community safety arrangements. This aimed to address the factors that increased the risks of group-based CSAE and CCE, indicating the development of good practice.

In some partnerships, this approach had strengthened collaboration with licensing authorities and businesses operating within the nighttime economy. Such activity provided a foundation for developing more effective approaches to identify and disrupt exploitation and reducing environmental risks. This activity safeguarded children and young people away from criminal exploitation.

However, this level of strategic and operational focus was not consistently evident across most partnerships. As a result, opportunities to identify, disrupt and prevent CSAE and CCE, including group-based harms, were not being fully maximised.

Awareness of criminal networks, organised exploitation and cross-boundary risks varied across agencies, particularly outwith Police Scotland. Limited local data on disruption activity, outcomes and effectiveness made it difficult for partnerships to demonstrate that disruption tactics were being consistently understood, applied and evaluated. This reduced assurance that available opportunities to prevent harms and target individuals and groups harming young people were being fully utilised.

Almost all partnerships reported that no Trafficking and Exploitation Risk Orders or Trafficking and Exploitation Prevention Orders were applied for within the previous two years. These legal measures designed to reduce risk, deter offending and protect people, including children and young people, were not being consistently considered as part of wider disruption activity.

Theme: Workforce capability, culture and challenge

This theme assessed the knowledge, skills and competence of practitioners working with children and young people at risk of group-based child sexual abuse and exploitation (CSAE) and child criminal exploitation (CCE). It considered the quality of learning opportunities, supervision and reflective practice. The theme also examined how practitioners developed professional curiosity and safely challenged decisions or concerns about safety.

Learning and development

Almost all partnerships were assured that practitioners received regular learning and development opportunities. This included trauma-informed practice, CSAE, CCE and online harms appropriate to their role in recognising and responding to such harms. Across partnerships, there was growing awareness of the risks associated with exploitation. Indicators of increased risk to CSAE and CCE were incorporated within professional learning programmes. This intended to support practitioners to recognise children and young people at increased risk, and contextual factors of exploitation.

Partnerships reported that multi-agency learning was highly valued and frequently shaped by practitioners' feedback and emerging local needs. Strong collaboration between statutory and third sector partners supported ongoing development and regular review of learning activities. Partnerships were assured practitioners involved in inter-agency referral discussions (IRDs), child interviews and investigative processes received appropriate learning opportunities and support.

While learning opportunities, policies and guidance were in place to support staff to identify and respond to CSAE and CCE, these did not consistently equip staff to identify and respond specifically to group-based harms. Consideration should be given to updating child protection learning, policies and guidance. This will support practitioners' ability to identify, assess and respond to the needs of children and young people who are at risk of or experience group-based CSAE and CCE.

The absence of a nationally agreed definition of group-based CSAE and CCE was also identified as a barrier to workforce development. If addressed, this may strengthen and enhance multi-agency learning relating to group-based harms.

Workforce capacity

Most chief officers reported a positive culture of learning, development and professional curiosity. However, just over half were assured services were adequately resourced to address group-based CSAE and CCE.

In the context of the ongoing national challenges around recruitment and retention of staff across public services, the review team recognised workforce capacity and resourcing may have impacted the level of assurance held by chief officers.

Challenges were identified in a few partnerships around releasing practitioners for learning and development opportunities. Some partnerships noted variation in uptake and content. Contextual pressures may have been a factor. However, such constraints could hinder timely identification and support for children and young people at increased risk.

Practitioner supervision and support

Almost all partnerships were assured of practitioners' access to appropriate supervision, support and constructive challenge. This aimed to help practitioners reflect on practice, explore professional curiosity, and escalate concerns.

Partnerships also had systems in place to support staff to raise and escalate concerns about practice and decision-making. Most had formal escalation as well as whistleblowing procedures and were confident that these enabled staff to speak up safely and without fear of reprisal. However, there was limited evidence that these arrangements were routinely evaluated, meaning there was little assurance about their effectiveness and impact in practice.

Key line of enquiry 3: Supports are helping to improve the safety and wellbeing of children and young people who have experienced or have been at risk of experiencing group-based child sexual abuse and exploitation and child criminal exploitation.

Summary of findings and emerging issues

Most partnerships undertook public awareness activity in relation to child sexual abuse and exploitation (CSAE) and child criminal exploitation (CCE) with the latter more prominent. Awareness activity was not focused on group-based harms. Home-educated children and young people as well as those not attending or who had left school commonly missed being engaged in awareness activity.

Trauma-informed practice was consistently applied but the risks, experiences and vulnerabilities of group-based harms needed to be strengthened. Health services provided important protective services but were hindered by capacity and resource issues making long waits in some instances an issue.

Initiatives such as Bairns' Hoose, advocacy services and rights-based approaches were helping to promote wellbeing recovery, and participation in the partnerships where adopted.

Delays in the timeliness, quality assurance and consistency of health assessments impacted the experiences of care experienced children and young people. There was a broad consensus that children and young people impacted by criminal exploitation required protection and support rather than criminalisation. Protective processes and support services were not always tailored to the specific risks associated with group-based harms. Across partnerships, there was variable confidence that risk factors would be recognised. Partnerships did not provide consistent evidence that supports were improving the safety of those impacted by group-based harms.

Theme: Protection, advocacy and support

This theme assessed protection and support for children and young people at risk of group-based harms. It evaluated prevention and awareness raising activities, targeted interventions, and trauma-informed support across education, health and recovery services. It also examined children and young people's involvement in decision making and access to advocacy services.

Awareness raising and prevention

Most partnerships delivered prevention and awareness raising campaigns to children, young people, families, schools and communities. These initiatives aimed to improve understanding of child sexual abuse and exploitation (CSAE) and child criminal exploitation (CCE), including online risks. Examples included online safety and Relationships, Sexual Health and Parenthood (RSHP) learning.

Schools, youth services and third sector organisations played a central role in delivering this preventative work and raising awareness in local communities. These included positive examples of multi-agency collaboration to deliver awareness raising campaigns.

However, there was variability across the country in both the scale and focus of awareness raising activity. Preventative work was not specific to group-based CSAE and CCE. Gaps also existed for children and young people who were home educated, not attending school or had left school.

A few partnerships recognised that campaigns related to group-based harms were an area for development. Further focus was required to strengthen multi-agency prevention strategies to ensure children, young people, families and communities understand the risks of group-based CSAE and CCE.

A few partnerships undertook targeted actions within specific local communities in response to identified harms outwith family settings or online harms. However, these were not specific to group-based CSAE and CCE, reflecting wider challenges in identifying the prevalence of these harms.

Partnerships had systems in place to monitor the impact of actions through reports, audits and performance data. These arrangements provided oversight, but they did not routinely measure the impact of interventions specifically related to group-based harms. Consequently, partnerships had limited evidence of the extent to which support and interventions had improved the safety, wellbeing and outcomes of children and young people impacted by, or at risk of, group-based CSAE and CCE.

Support for children and young people

Almost all partnerships were confident that trauma-informed and relationship-based approaches were well established and supported children, young people and families. Partnerships recognised the importance of maintaining stable home environments and supporting family relationships. Chief officers identified that relational approaches were a key strength in supporting children and young people.

These approaches were not routinely tailored to the needs of children and young people impacted by group-based CSAE and CCE. While trauma-informed practice was embedded across services, it did not consistently address specific risks, experiences and vulnerabilities associated with group-based harms.

Our review found there were opportunities to strengthen understanding of the impact of these forms of exploitation and to ensure that support and interventions were better aligned to the needs of impacted children and young people.

Across partnerships, there was a range of services supporting children and young people's health, wellbeing and mental health. Health services contributed to multi-agency supports, helping to identify needs and provide both universal and targeted interventions. Children and young people could access a variety of supports including Child and Adolescent Mental Health Services (CAMHS), school counselling and sexual health services.

However, partnerships consistently identified capacity and resource pressures across a range of services, resulting in waiting lists and delays in accessing support. These challenges affected the ability of services to respond to children and young people's needs at the earliest opportunity and may have reduced the effectiveness of early intervention and preventative approaches for those at risk of or impacted by group-based CSAE and CCE.

Support to recover

Almost all partnerships were confident that children and young people were effectively protected during and following investigations. Specialist recovery services were available, including support connected to Bairns' Hoose, Scottish Child Interview Model (SCIM) and other specialist services. The development of Bairns' Hoose approaches across partnerships was creating positive, child-centred pathways that promoted wellbeing. These services offered opportunities for children and young people to recover from their experiences and remain engaged with education and support networks.

Almost all partnerships were confident that children and young people could access appropriate sexual health care. However, a few partnerships identified challenges

associated with the availability of sexual health services due to geography and rurality. A few also highlighted delays in accessing specialist support because of waiting lists and resource pressures. While a range of services and supports were available, these were not specifically designed to meet the needs of children and young people impacted by group-based CSAE and CCE.

While partnerships expressed confidence in the support available, further work would be required to determine the extent to which interventions and recovery services improved longer-term outcomes for those impacted.

Participation and advocacy

Almost all partnerships were confident that children and young people had access to effective and responsive support, including independent advocacy services.

Partnerships actively sought the views of children and young people, with advocacy services often playing an important role in helping them express their views and participate in decision-making.

Trauma-informed and rights-based approaches were evident across partnerships and were reported to support children and young people to contribute to decisions affecting their lives.

Almost all partnerships reported that child-friendly complaints procedures were in place. They were also confident that multi-agency plans were established where children and young people required coordinated support. Audit and quality assurance processes were used to review practice, assess the quality of plans and identify areas for improvement. However, a few partnerships recognised the need to strengthen multi-agency planning to better enable and reflect the views and experiences of children and young people.

Our review did not include direct engagement with children and young people or an examination of individual records. As a result, it was not possible to evaluate the effectiveness of advocacy, complaints processes or multi-agency planning in improving outcomes or ensuring that children and young people felt heard, involved and supported.

Theme: Care experienced children and young people and other young people at increased risk of group-based harms

This theme assessed how effectively partnerships identified, understood, and responded to the needs of children and young people at increased risk of group-based child sexual abuse and exploitation (CSAE) and child criminal exploitation (CCE). It recognised that some children and young people were at increased risk because of their circumstances, experiences or support needs. This theme considered whether chief officers understood indicators of increased risk and used that knowledge to inform decision making.

Care experienced children and young people

Overall, almost all partnerships reported they were confident in supporting care experienced children and young people. Most partnerships had appropriate arrangements in place to monitor and support children and young people, including those living outwith their local authority areas.

A few partnerships recognised that supporting children and young people through changes in their care and living arrangements remained an area requiring further improvement.

Approaches such as oversight boards, virtual headteachers, lead professionals and review processes supported care experienced children and young people well. Health assessments as outlined in Chief Executive Letter 16 (CEL 16) (2009), were not consistently offered or provided to children and young people subject to compulsory supervision orders. Delays in completing assessments, inconsistencies in reporting and challenges associated with cross-border placements, affected the timeliness, quality and continuity of health assessment processes.

Opportunities existed to strengthen the quality assurance and consistency of health assessments for care experienced children and young people. Improving information sharing across organisational boundaries, reducing assessment delays and enhancing available support would help ensure that children and young people receive timely, coordinated and effective support. This would potentially reduce the risk that unmet needs or indicators of harm, including group based CSAE and CCE, are overlooked.

Understanding increased risk

Most partnerships reported confidence in their awareness and understanding of the factors that present an increased risk to CSAE and CCE. However, understanding of specific risk factors related to group-based CSAE and CCE was variable. Risk factors related specifically to group-based harms were not consistently reflected in policies, guidance or learning.

There was growing recognition of increasing risks for care experienced children and young people and those with additional support needs, learning disabilities and neurodiversity. A few partnerships incorporated these issues into professional learning. While a number of partnerships recognised risk factors, there was less evidence that this knowledge was systematically informing assessments, decision-making or interventions.

There were opportunities to further develop understanding of group-based CSAE and CCE by reflecting risk factors in policies, procedures and multi-agency learning. This included targeting workforce development to improve practitioners' confidence in identifying children and young people at increased risk and enabling earlier recognition, assessment and intervention.

Protective processes

Partnerships were confident that protective processes such as Scottish Child Interview Model (SCIM) and Care and Risk Management (CARM) were used well across partnerships to support children and young people. Confidence was also high that children and young people involved in/experiencing protective processes were being protected from group-based CSAE and CCE.

Partnerships valued the collaboration between schools and other services to identify children and young people at risk of group-based harms. The majority of partnerships collected education data, such as attendance and use of part-time timetables, for children and young people at risk of group-based harms.

Through GIRFEC approaches, partners worked together to assess need, share information, and coordinate support. School staff, campus police officers, social workers, health professionals and third sector organisations worked together to provide targeted support.

Missing children and young people and early intervention

Partnerships had well embedded arrangements to identify and respond to children and young people at increased risk. Risks included missing episodes, exclusion from education or involvement in offending behaviour. Almost all partnerships had appropriate missing persons protocols and guidance in place.

A range of approaches were well-embedded to safeguard children and young people away from formal justice systems. These approaches aimed to ensure that concerns were addressed at an early stage. CARM and Whole Systems Approach and Early and Effective Intervention (EEI) processes were well established. These provided opportunities for early intervention and reduced the likelihood of children and young people becoming further involved in offending behaviour.

There was limited evidence regarding how partnerships supported children and young people who experienced transitions, isolation or disconnection from services.

Child criminal exploitation, conflict with the law and organised crime

There was an increasing awareness across partnerships of risks associated with exploitation, particularly CCE. The majority of partnerships incorporated CCE risks into professional learning, and safeguarding arrangements. However, information sharing approaches related to serious and organised crime within areas were inconsistent, and intelligence relating to organised crime groups was variable throughout the country. Some partnerships identified this as an area for development. There was limited evidence on how disruption activity and intelligence sharing protected children and young people becoming involved in organised crime and criminal exploitation.

Continued attention was required to improve information sharing, intelligence gathering and disruption activity related to serious, organised crime and the criminal exploitation of children and young people.

Equality, inclusion and accessibility

Partnerships recognised the importance of ensuring accessible and inclusive support. Almost all partnerships identified services that supported children and young people to navigate immigration and justice systems, including support for unaccompanied asylum seeking children.

A few partnerships highlighted the availability of language translation services and British Sign Language (BSL) interpreting services. However, language and communication support for children and young people with additional support needs was inconsistent.

Limited information was presented as to how cultural, language and communication barriers were being systematically addressed across all services. This is an important area that required further attention from local partnerships.

Conclusion

The [Key findings](#) and [Recommendations](#) set out within this report are submitted for the information and attention of the Cabinet Secretary for Education, Culture and Gaelic and Scottish Ministers for their information, consideration and laying in parliament.

The implementation of our recommendations would provide opportunities to strengthen current arrangements and enhance the effectiveness of the collective response to group-based child sexual abuse and exploitation and child criminal exploitation.

Appendix 1: Glossary of terminology and abbreviations/acronyms used in this report

Adult Support and Protection (ASP): Duties and processes to protect adults at risk of harm aged 16 plus who are unable to safeguard themselves, their property or rights and are at risk of harm due to disability, illness or mental disorder.

Bairns' Hoose: A child centred, trauma-informed model that brings health, justice, social work and recovery services together in one place to support children and young people who have experienced or witnessed harm.

Care and Risk Management (CARM): A multi-agency approach used to assess and manage risks associated with children and young people whose behaviours may place themselves or others at risk of serious harm. It supports coordinated planning and decision making to reduce risk and promote safety and wellbeing.

Care experienced: Children and young people who are looked after or formerly looked after.

Care Inspectorate: The independent scrutiny and improvement body for care services in Scotland, responsible for regulating, inspecting and supporting improvement in services for children, adults and communities. The Care Inspectorate also undertakes strategic inspections of services for children and young people, including how local partnerships work together to protect and support children.

Chief Executive Letter (CEL) 16 (2009): Requires NHS Boards to ensure that children and young people who are looked after receive a health assessment within four weeks of becoming looked after, supporting early identification of health and wellbeing needs.

Chief Executive Letter (CEL) 41 (2008): Directs specified NHS staff to conduct routine enquiries about experiences of abuse, including domestic and child sexual abuse, to support early identification and intervention.

Chief Officers: Chief executives from key agencies, including local authorities, Police Scotland, health services and other relevant partners, who are responsible for overseeing local public protection arrangements.

Chief Officers' Group (COG): Chief Officers' Groups consist of chief executives of local authorities, chief executives of health boards and local policing commanders with delegated authority of the chief constable. They have collective responsibility for strategic leadership, risk management and inter-agency collaboration for public protection.

Child: Children and young people under the age of 18. This includes young people who are now over the age of 18 years but were under the age of 18 within two years preceding the commencement of the review.

Child and Adolescent Mental Health Services (CAMHS): Specialist NHS multidisciplinary services that provide assessment, treatment and therapeutic interventions for children and young people experiencing significant mental health difficulties.

Child protection: The processes involved in consideration, assessment and planning of required action, together with the actions themselves, where there are concerns that a child may be at risk of harm from abuse, neglect or exploitation.

Child Protection Committee (CPC): The local strategic partnership responsible for coordinating and improving the protection of children and young people from abuse and neglect. It brings together key agencies, such as social work, health, police, and education, to ensure effective child protection policies, practice, and inter-agency collaboration.

Child Protection Register: An administrative system used by local authorities to identify children and young people who are considered to be at risk of significant harm and who require a multi-agency child protection plan.

Child sexual abuse (CSA): An act that involves a child under 16 years of age in any activity for the sexual gratification of another person, whether it is claimed that the child either consented or assented. Sexual abuse involves forcing or enticing a child to take part in sexual activities, whether the child is aware of what is happening. For those who may be victims of sexual offences aged 16-17, child protection procedures should be considered. These procedures must be applied when there is concern about sexual exploitation or trafficking of a child. ([National Guidance for Child Protection in Scotland 2021 - updated 2023](#))

Child sexual exploitation (CSE): A form of child sexual abuse. It occurs where an individual or group takes advantage of an imbalance of power to coerce, manipulate or deceive a person under 18 into sexual activity in exchange for something the victim needs or wants, and/or for the financial advantage or increased status of the perpetrator or facilitator. The victim may have been sexually exploited even if sexual activity appears consensual. Child sexual exploitation does not always involve physical contact. It can also occur using technology. Children and young people who are trafficked across borders or within the UK may be at particular risk of sexual abuse.

Child criminal exploitation (CCE): The action of an individual or group using an imbalance of power to coerce, control, manipulate or deceive a child or young person under the age of 18 into any criminal activity in exchange for something the victim needs or wants, or for the financial or other advantage of the perpetrator or facilitator.

Violence or the threat of violence may be a feature. The victim may have been criminally exploited, even if the activity appears consensual. Child criminal exploitation may involve physical contact and may also occur using technology. It may involve gangs and organised criminal networks.

Contextual safeguarding: An approach that recognises that harm to children and young people can occur beyond the family home, including in schools, peer groups, online environments, and local communities. The approach involves partners working together to identify and address these wider risks and improve the safety of the contexts in which children and young people live.

County lines: A form of criminal exploitation in which organised crime groups use dedicated mobile phone 'deal lines' and often exploit children, young people or vulnerable adults to transport and supply drugs across areas.

Crown Office and Procurator Fiscal Service (COPFS): Responsible for investigating, prosecuting, and disrupting crime, examining sudden or suspicious deaths, and investigating criminal allegations against police officers.

Early and Effective Intervention (EEI): A multi-agency approach that aims to identify concerns about a child or young person at the earliest opportunity and provide support to prevent risks from escalating.

European Framework for Quality Management (EFQM): A management framework that supports organisations to manage change and improve performance. This includes assessing their direction, delivery and results. It underpins the quality framework used in the national review of children and young people in need of care and protection.

Forensic Medical Services (Victims of Sexual Offences) (Scotland) Act 2021: Requires Scotland's health boards to provide trauma-informed healthcare and access to forensic medical examination for people who have experienced rape or sexual assault, ensuring timely, victim centred support.

Getting it Right for Every Child (GIRFEC) National Practice Model: Scotland's national, rights-based approach to help children and young people receive coordinated support across services to improve their wellbeing.

Group-based child sexual abuse and exploitation: Significant harms that involve two or more individuals who take advantage of a power imbalance to coerce, manipulate, or deceive children and young people into sexual and/or criminal activity.

Healthcare Improvement Scotland (HIS): Scotland's national improvement agency for health and social care. HIS provides independent assurance of the quality and safety of the care provided by Scotland's health and care system to secure lasting, positive and sustainable improvements across the whole health and care system.

High-risk cohorts: Groups at increased risk of child sexual abuse and exploitation

- abuse, neglect or an early adverse experience
- disrupted family life, including family breakdown and care experience
- domestic abuse
- bullying and peer pressure
- absence from education, running from home or care
- experience of exclusion or isolation, especially in transitional phases
- drug and alcohol use
- poverty or homelessness
- poor health and low self-esteem
- learning disabilities and autism
- living with attitudes that normalise exploitation and violence in sexual relationships
- access to adult pornography and experience of attitudes that normalise sexual violence
- exploration of same-sex relationships and questioning of sexual orientation or gender.

His Majesty's Inspectorate of Constabulary in Scotland's (HMICS): The independent body responsible for inspecting Police Scotland and the Scottish Police Authority. It provides assurances to the public and ministers by evaluating policing services and making recommendations for improvement.

His Majesty's Inspectorate of Education (HMIE): The independent inspectorate of education in Scotland, inspecting and gathering evidence across all education sectors to assess quality, support improvement and inform policy.

Indicators of risk of child sexual abuse and exploitation:

- going missing from home or school during the day, overnight or longer
- multiple callers/visitors, including unknown adults/older young people entering/leaving vehicles driven by unknown adults
- evidence of/suspicion of physical or sexual assault
- disclosure of assault followed by withdrawal of an allegation
- unplanned pregnancy and/or sexually transmitted infections (STIs)
- peers involved in sexual exploitation
- drug/alcohol use
- isolation from peers/social networks
- exclusion or unexplained absences from school or college
- relationships with controlling adults
- unexplained money or 'gifts', including expensive clothing, new phones and other items
- frequenting areas known for adult prostitution
- children under 13 years asking for sexual health advice
- concerning use of mobile/internet/online devices (sending/receiving sexual images)
- multiple phones or SIMs, being protective of a phone, abnormally high volume of secretive calls, change in behaviour because of phone contacts
- depression, self-harm and suicidal thoughts.

Inter-Agency Referral Discussion (IRD): Formal multi-agency process used to share information, assess child protection concerns and agree immediate protective actions.

Interim Vulnerable Persons Database (iVPD): An incident-based police database which was introduced in 2013 and became a national system in 2014. The iVPD is a crucial tool for police in Scotland to manage concerns about children, young people and vulnerable adults. It allows officers to record and evaluate concerns that may impact their wellbeing, ensuring that appropriate support and safeguarding measures are in place. The iVPD is not a direct referral to partner agencies but serves as a record of police contact with vulnerable individuals.

Learning Reviews: The formal multi-agency process used to examine situations where a child has died, experienced significant harm or been at risk of significant harm. The purpose is to identify learning that can improve child protection systems and practice. Learning reviews replaced the former Significant Case Review (SCR) process.

Modern slavery: Forms of exploitation, including human trafficking, slavery and forced or compulsory labour. Victims may be exploited for sexual purposes, criminal activity, labour exploitation, domestic servitude or other forms of abuse.

National Referral Mechanism (NRM): The UK-wide framework for identifying, referring and supporting potential victims of human trafficking and modern slavery.

Partnerships: Multi-agency structures, most commonly Health and Social Care Partnerships (HSCPs), through which local authorities, NHS Boards and other partners work together to plan, resource and deliver integrated services.

Partners Intelligence Portal (PIP): A secure, confidential online system developed by Police Scotland that enables approved partner agencies, such as local authorities, health services, housing providers, and third sector organisations to submit information or intelligence directly to police that may assist in preventing, detecting, or disrupting harm. It enhances crime prevention by capturing low-level information (such as suspicious activity and antisocial behaviour).

Protected characteristics: Under the Equality Act 2010, there are nine protected characteristics. These are personal characteristics that are protected by law from discrimination, harassment and victimisation in employment and wider society. The protected characteristics are age, disability, gender reassignment, marriage and civil partnership, pregnancy and maternity, race, religion or belief, sex, sexual orientation.

The promise: Scotland's national commitment to ensure that all care experienced children and young people grow up loved, safe and respected, by fully implementing the recommendations of the Independent Care Review by 2030.

Public Protection Committee (PPC): Multiagency services, such as social work, police, health, education and other relevant bodies, which work together to prevent, identify and respond to risks of harm, including group-based child sexual abuse and exploitation.

Relationships, Sexual Health, and Parenthood (RSHP): A learning and teaching resource used in Scotland to support delivery of relationships, sexual health and parenthood education. It is aligned to Scotland's Curriculum for Excellence.

Sexual Assault Response Coordination Service (SARCS): Service which provides NHS-led healthcare and support for people in the days after a rape or sexual assault.

Scottish Child Abuse Inquiry (SCAI): An independent public inquiry established in October 2015 to investigate the abuse of children in care in Scotland.

Scottish Child Interview Model (SCIM): Scotland's national approach to interviewing child witnesses and victims, designed to obtain accurate and reliable information while minimising trauma. Within a local authority, it supports multi-agency practice by ensuring specially trained professionals conduct child-centred interviews that have the child's wellbeing as a priority.

Scottish Children's Reporter Administration (SCRA): National organisation that employs and supports children's reporters and administers the children's hearings system.

The Scottish Index of Multiple Deprivation (SIMD): Scotland's official measure of area-based deprivation. It ranks small geographical areas according to levels of deprivation using indicators including income, employment, education, health, crime, housing and access to services. SIMD is commonly used as a measure of socio-economic disadvantage associated with where people live.

Trafficking and Exploitation Prevention Order: A civil order provided for under the Human Trafficking and Exploitation (Scotland) Act 2015 that can be imposed following a conviction for a human trafficking or exploitation-related offence, where the court considers it necessary to protect people from the risk of further trafficking or exploitation. The order can prohibit specified activities or impose conditions on the offender for a set period, helping to prevent future offending and safeguard vulnerable individuals.

Trafficking and Exploitation Risk Order: A civil order provided for under the Human Trafficking and Exploitation (Scotland) Act 2015 that can be imposed on an individual who has not been convicted of a trafficking or exploitation offence but whose behaviour gives rise to a risk that they may commit such an offence in the future. The order allows the court to place restrictions or requirements on that person to protect potential victims and reduce the risk of trafficking or exploitation occurring.

United Nations Convention on the Rights of the Child (UNCRC): An international treaty that sets out the rights of all children, which Scotland incorporates into domestic policy and guidance to ensure children's rights are upheld in all decision making.

Violence Against Women and Girls Partnerships (VAWG): Partnership of agencies to prevent and respond to violence, abuse and exploitation affecting women and girls, and form part of Scotland's wider public protection arrangements.

Whole Systems Approach: A multi-agency, child-centred approach that brings together services to provide early intervention, prevention and coordinated support for children and young people who are at risk of harm or involvement in offending behaviour.

Appendix 2 – Information return overview report

Link to [Information return overview report](#)

Appendix 3 – Systems and data return overview report

Link to [Systems and data return overview report](#)

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