



Reference: FOI.ICB-2526/080

Subject: Evaluation of Operation Topaz

I can confirm that the ICB does hold some of the information requested; please see responses below:

QUESTION	RESPONSE
Please could you provide me with the final evaluation/report that was conducted as part of the following work: The evaluation of Operation Topaz for child sexual and criminal exploitation on the health and wellbeing of service users. The work is outlined on this BNSSG page: https://bnssg.icb.nhs.uk/research-and-evidence/our-research-portfolio/previously-supported-projects/the-evaluation-of-operation-topaz-for-child-sexual-and-criminal-exploitation-on-the-health-and-wellbeing-of-service-users/	The work referenced in this Freedom of Information Request was an award of ICB Research Capability Funding to UWE to undertake the work required to develop an application for National Institute for Health Research (NIHR) funding that would be used to undertake the evaluation of Operation Topaz. It was not funding to deliver an evaluation of Operation Topaz. Research Capability Funding awards are for early-stage research development. The ICB does not expect all Research Capability Funding awards to lead on to an application to the NIHR as there are many factors that may make this unfeasible that would only become apparent during the preparatory work. Further, we would expect that over half of the applications for NIHR funding would be unsuccessful due to these funding opportunities being highly competitive. Therefore, the ICB's Research Capability Funding awards are no guarantee that the planned research (in this case, the evaluation of Operation Topaz) will be delivered.





This particular Research Capability Funding award did not lead to an application for NIHR funding due to factors that made evaluative research unfeasible.
The ICB received a report on the work undertaken and outcome, which can be found enclosed. However, this is a report of the activities undertaken and learning gained, and not an evaluation of Operation Topaz.

The information provided in this response is accurate as of 21 July 2025 and has been approved for release by Dr Joanne Medhurst, Chief Medical Officer for NHS Bristol, North Somerset and South Gloucestershire ICB.

A feasibility study to consider the outcomes and impact of Operation Topaz on the health and well-being of young people.

Prof. Kieran McCartan, Dr Sarah Senker.

University of the West of England (UWE) Bristol. October 2023.

Background:

Child Exploitation:

Child Sexual and Child Criminal Exploitation (CSE/CCE) are growing concerns in the UK currently in terms of social justice and health outcomes. The Independent Inquiry into Child Sexual Abuse (IICSA) indicated exploitation has significant, ongoing lifetime impacts on physical, social, emotional, and psychological health (including, social/emotional problems, incarceration, unemployment, poor physical health, drug/alcohol issues, and depression/anxiety/PTSD) (Fisher, Goldsmith, Hurcombe, & Soares, 2017), estimated to be approximately £10.1 billion per annum (2018/19) (Home Office, 2021). IICSA has also identified the city region of Bristol as one of the worst impacted parts of the country. The growing concern around the impacts of CSE on young peoples', and eventually adults', health and wellbeing is demonstrated by an increasing number of NIHR funding calls specifically addressing sexual violence. This is reinforced by criminal justice, and related organisations who are moving towards a more trauma informed, compassion, and wellbeing related approach in working with populations impacted by CSE. To this end CSE and CCE are offences that are important to deal with, but are also attached to specific health outcomes for those who are affected by it. Over the past 10 years there has been an emerging interface between Public Health, Health, and Criminal Justice with criminality being a wider determinant of poor health and wellbeing. This requires a reconsideration and, potentially, redevelopment of outcome measurement and reporting, affording consideration to how health data and health outcomes are measured and used in criminal justice.

Operation Topaz:

Operation Topaz is the first of its kind in England and was born in 2016 following, in part, the findings from Operation Brooke. It is a police led, Avon & Somerset based intervention to disrupt Child Sexual Exploitation (CSE) and Child Criminal Exploitation (CCE). Operation Topaz¹ focuses on three core principles: collating, processing, assessing and sharing intelligence about CSE risk; engaging victims to secure more timely disclosures; and proactively pursuing all opportunities to disrupt CSE offenders until such time as a disclosure is secured and a CSE investigation is initiated and picked up by the Investigations Team. A Detective Chief Inspector has responsibility for Topaz within their portfolio, and is supported by a Detective Inspector dedicated to Topaz. Topaz North covers the local authority areas of Bath and North East Somerset, Bristol, North Somerset and South Gloucestershire. It has a CSE team and a CCE team, each of which consists of a Detective Sergeant, three Disruption Officers and two Engagement Officers. Topaz South is a joint child exploitation team dealing with both CSE and CCE and covering the local authority area of Somerset. The team consists of a Detective Sergeant, three Disruption Officers and two Engagement Officers. There was historically an intelligence analyst attached to Topaz but this was not the case at the time of the current study.

¹ Operation Topaz changed during this project with a renewed focus on missing children and therefore the description given here is how it was profiled at the start of the work

There is also a Topaz Prevention Officer who covers the entire force area and proactively seeks out "hidden" victims of CSE and CCE through outreach work, acting upon intelligence, and targeting the kinds of groups, institutions and locations where victimisation is most likely to be occurring.

The model is outlined below and the information is taken from the 'Topaz ways of working' document produced in 2022.

Team & Location	Local Authority Area	Resource		
Topaz	Bath and North	CSE	CCE	CSE and CCE
North	East Somerset	1 x DS	1 x DS	
	Bristol	3 x Disruption	3 x Disruption	
Kenneth	North Somerset	Officers	Officers	
Steele	South	2 x Engagement	2 x Engagement	1 x Prevention
House	Gloucestershire	Officers	Officers	Officer
		1 x Intelligence		(force-wide)
		Analyst (vacant)		
		1 x Intelligence		
		Researcher(vacant)		
Topaz	Somerset	CSE and CCE		
South		1 x DS		
		3 x Disruption Officers		
Bridgwater		3 x Engagement Officers		
Police		1 x Intelligence Analyst (CSE only) (vacant)		
Centre		1 x Intelligence Researcher (CSE only)		
		(vacant)		

The role performed by the Engagement Officer is a direct response to feedback from victims of CSE who highlighted that they felt most safe and supported when they were dealt with by a single officer as opposed to multiple officers. The role of the Engagement Officer post is also a response to the Constabulary's 2015 CSE Problem Profile which identified difficulties experienced at that time in gaining victim disclosure as a common feature in such cases.

The Engagement Officer's sole concern and remit is victim engagement, freeing them up to fit around the victim's lifestyle, commitments and needs, and to act as a single point of contact for the victim and support services. The allocation of an Engagement Officer to a victim means that their needs can be prioritised above investigative priorities. The Engagement Officer works alongside victims to build relationships and trust, to gain intelligence and evidence which enables well-informed safeguarding and disruption, and supports victims through to disclosure and ABE interview and through court proceedings. The allocation of an Engagement Officer to a victim is determined by the team identifying that the child is at risk; if it is determined that this is a requirement at a child protection strategy discussion or professionals meeting; or as determined by the team's Detective Sergeant. There is no requirement for a victim to disclose. Overall, the role of the Engagement Officer is to:

- work with multi agency partners to undertake the building rapport with potential victims of Child Sexual Exploitation and Child Criminal Exploitation in order to safeguard them and secure the best possible evidence to aid the investigation of offences and disruption of suspects.
- work closely with multi agency partners to build rapport with potential child victims of child criminal exploitation and manage and support them through the investigation process.

- facilitate long and short-term welfare support for the victim working with multi agency partners.
- attend at multi agency meetings where a child victim is being discussed and manage Topaz safeguarding actions around that child.
- ensure intelligence from victims and partner agencies is recorded accurately and the Topaz DS / Disrupt DC are made aware to maximise investigation and disruption opportunities.
- access the needs of the victim and carry out video interviews following the guidance in Achieving Best Evidence.
- support the victim through the court process ensuring special measures are put in place where required.
- carry out investigation and disruption actions as directed by the Topaz DS to support Topaz Team tasks.
- work with partners to consider CCE and CSE disruption which is place/location based.

Disruption is recognised as often being the most effective means of safeguarding victims, and cases are continually reviewed with the purpose of identifying disruption opportunities in order to inform tasking processes and review progress and effectiveness in disrupting suspects.

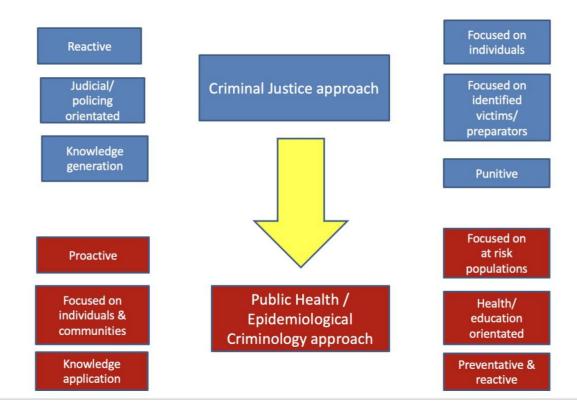
The role of the Disruption Officer is to:

- consider all potential opportunities to disrupt the perpetrators of child exploitation as appropriate to the individual cases
- disrupt Organised Crime Groups where the main crime is child exploitation
- stay up to date with disruption tactics
- be creative and innovative in considering disruption tactics
- work with Neighbourhood, Patrol and Remedy to disrupt perpetrators
- apply a contextual safeguarding approach
- use contextual safeguarding approaches to locations as well as the safeguarding of victims and disruption of perpetrators
- lead in obtaining civil orders
- work with Iris (IOM team) and offender manager teams to increase referrals
- work with partner agencies such as Inland revenue, Benefit Fraud, Immigration, Training Standards, Licensing

The Task:

In January 2023, the University of West England were successful in securing a grant from Research Capability Funding to understand the feasibility of evidencing, collecting, and measuring health and wellbeing outcome data for young people, who are victims of exploitation, that Operation Topaz works to safeguard.

As criminal justice organisations, like the police, are starting to think about the health and wellbeing outcomes of their work, the research wanted to consider how this is currently measured, whether it's fit for purpose and if it can be improved. This fits with an epidemiological criminology (EpiCrim) approach which has previously been seen in public health and offending literature (McCartan & Kemshall, 2023). Work from McCartan and colleagues (2017) demonstrates the distinction between an approach solely rooted in criminal justice and one which considers health and criminology.



In many ways the Topaz model, its focus on being proactive and at risk populations lends itself to the EpiCrim approach. Therefore the current work wanted to look at how this is applied pragmatically to an existing and unique police operation. Where police are usually focused on arrests, achieving best evidence interviews (ABE's) and subsequent charge, prosecution and conviction outcomes, this work wanted to consider the other outcomes associated with safeguarding young people out of exploitation. It wanted to consider what the impact of Operation Topaz involvement was for young people's health; and all that might encompass, acknowledging the difficulties in defining this, capturing and sharing it. As such, the purpose of the exercise was not to evaluate Operation Topaz through a health lens, but to understand what mechanisms were already in place should this be conducted, and what would need to be implemented to allow this to occur.

The research questions can be articulated as follows:

- What is the feasibility of linking existing police data to existing health outcomes? To what extent do they match and are useable?
- If they are not, then what should 'police' health outcomes be? How they should be measured? Who and how is best to implement them?

Method:

In order to answer these questions the research team first met with Operation Topaz colleagues to gain an understanding of how it was currently operating and functioning. The existing Detective Inspector was due to leave and be replaced but before his departure he was able to give us an overview of Operation Topaz. He provided a list of officers and external stakeholders to contact alongside the following documents which were reviewed:

- Topaz write up for CID newsletter
- Topaz ways of working document
- Spreadsheet which details current outcomes recorded for Topaz
- Topaz evaluation from 2017.

The research team held an initial teams meeting/focus group with senior TOPAZ staff followed by 20 semi-structured 1-1 interviews. This included people from CSE and CCE teams; disruption and engagement and is broken down below:

- 3 officers in the North
- 3 officers in the South
- 3 officers who had oversight of North and South including the TOPAZ prevention officer
- 1 officer from Operation Ruby²
- 9 external stakeholders who work alongside Operation Topaz
- 1 individual from ICB

With consent, all interviews were recorded using a Dictaphone/MS Teams, transcribed and then reread and analysed. Having verbatim transcripts allowed an accurate record of the conversations and for our write-up to be grounded in quotes. The work was inductive and exploratory in nature, led by the participants experiences and recommendations.

Findings:

Benefits associated with Topaz:

Firstly, Topaz is an opportunity to consider child protection and safeguarding in a way that differs to traditional policing. This was welcomed by police *and* wider stakeholders but it was acknowledged that there are still cultural challenges within the wider police force around child protection and safeguarding.

'I think child protection is still the poor cousin, within all professions really. The bigger picture is that the police don't really put that much value in it, because it's not recorded. And it's not what gives us the money from government. And the government gives sound bites around the children that are being exploited, but they don't actually put the money, the time and the resources that it deserves' (Police Interview)

'We don't educate our new officers coming in about child protection at all, or certainly not enough. You know, they could stop check a car with three teenage girls in the back of it. And they might not take their details, or record it or share it on intelligence...there's a real missed opportunity' (Police Interview)

Prior to Topaz, if a victim made a disclosure but then did not want to give an evidential account then the pursuit of that offence would be limited. However, with Operation Topaz, the engagement officers are able to continue to work with that victim.

'We have got the time to work with them and see the bigger picture and to see potentially why they are going missing all the time, why they're self harming, why they're doing this, which is really rare in police, actually, to have that time to work with someone long term, because sometimes you just gotta move on but Topaz is really special in that way...' (Police Interview)

² Within Avon and Somerset Police, Operation Ruby works with child sexual abuse and mainly focuses on intrafamilial harm

'I work with those children for a very long period of time and we engage with them to see how we can help them and what we can do for them. So the initial visit may be very brief, very 'Hi, this is me' and usually you get told to do one and that's fine and you come away. And then you just keep going back and you keep going back. And they then gain that trust in you to talk about what's happened. And it's amazing, they continue to tell you to sod off for weeks and weeks, and then you get that text saying 'are you going to come and see me again?' (Police interview)

Indeed, stakeholders and police gave examples of where this persistence and non-time limited approach enabled things to progress to an ABE in some instances which is viewed as a positive police outcome; especially if attached to a prosecution or conviction.

'...there's a brilliant officer that I'm working with at the moment and we've had multiple disclosures, and there's like a big case investigation that is happening, it's going again to Crown Court and I think that this girl has been able to do her ABE interviews and work with the police simply because this police officer has spent time really getting to know her. Looking at her more holistically' (Stakeholder Interview)

'I did a joint visit on Thursday, to a young person who we suspect has been sexually exploited for years and years and years by a man who has finally gone down with a custodial last week. But she has, because of the culture that she's grown up in, and because of the fact that she's been exploited by a very controlling, frightening man, who was really skilfully grooming her, and many other people around her, including her family, she's always been very wary of the police. And yet, she's now built this amazingly positive relationship with this engagement officer... and I do believe that now she is 1000 times more likely to go 999' (Stakeholder Interview)

During interviews, police and stakeholders were also able to reflect on the implications a prosecution had on a young person's presentation, engagement with other services and health.

'I would say quite often, the ones that I've got supported by Topaz, once you're in the thick of it, obviously, their health is quite poor. I would say what is hugely obvious is when they do manage to get a conviction, and the perpetrators are locked up, their health improves drastically... I did an initial visit with Topaz a year ago, when this girl was pretty much living with this horrendous perpetrator, he was physically and sexually harming her really regularly. And she was chronically underweight, mental health was very poor. And she was very unwell, really. And she's now actually in the care system and he's been on remand. And now he's got a custodial sentence. And we're reflecting with her actually, she literally looks like a different person. Physically she's eating really healthy food three times a day, which she wasn't at all, when we met her. Her mental health is much, much better. And I think that, you know, part of that will be because she's now in care and home wasn't, wasn't meeting her needs, I think a huge part of it as well will be linked to the fact that they got this man remanded and physically away.' (Stakeholder Interview)

'The first time I met her she was in bed under the covers, didn't see her face. No idea what she looked like, wouldn't speak to us. And then my colleague went back several times, tried to engage with her, no chance. And so eventually, we just put it on hold... this case came up two years ago, but she wasn't able to talk about it. Her mental health has been catastrophic, really. And she's only just got to the point in the last six months that she has been able to talk to us, right and disclose. So it's taken us 18 months. We knew she was there, we knew it had happened. But we couldn't do anything with it, because she wasn't able to talk about it. But in that 18 months, we've come on so far... she is a different girl, completely. She's re-engaged in college, she looks well she's going to the gym, she's got herself a boyfriend, completely different person' (Police Interview)

There were also examples given where Topaz had used their disruption officers to tackle those exploiting young people. This included issuing child abduction warning notices (CAWNS), targeting adults for drug supply, undertaking work with licencing and trading standards in known hot-spots, using high visibility patrols and increasing 'stop and search' efforts in high risk areas. This was noted as being distinct from arrests or prosecutions but still a salient outcome which served to safeguard young people.

'We can't arrest these people, we're not going to get a prosecution against them. But what can we do to make their lives as uncomfortable as possible, so that we can break up what's going on?'

(Stakeholder interview)

'I don't think success means a conviction. I think just disrupting somebody, just stopping something. So even just issuing somebody with child production, child abduction warning, yeah, it's enough to say to somebody, look, you're on our radar. We believe you've been doing somebody wrong, you need to keep away from this young person or young people, you know, and that sometimes is enough for the young people. Because it stops that contact' (Police Interview)

A number of those interviewed reflected on the fact that the engagement role within Topaz supports young people in trusting the police and authority more generally.

'In the CCE world the message from their peers and from the music they listen to is about not trusting the police, isn't it? And that works really well for the people that want to exploit them' (Police interview)

"...we could get a mentor or community mentor who maybe has had similar experiences, who would say, you need such trust in the police work alongside them. But I don't think it's as authentic as an actual somebody that works for the police saying that and having some awareness that this young person may be selling drugs, they may be running county lines, they might be doing various different things, but they're not there to arrest them, they're there to get to know them to understand what's going on to get them to the point where they feel confident enough to start sharing information that may lead to a prosecution. And I think that's the bit that Topaz can offer' (Stakeholder Interview)

One interviewee highlighted how important and empowering it was for a young person to feel they were 'believed' by the police.

'When her Dr told her that we were coming to visit her, she literally smiled in hospital and said, I can't believe it, they believe me. So that that was a really positive and powerful response, really, because it was just wanting to be believed that it was more important to her' (Police Interview)

There was also discussion around the work Topaz can do to improve relationships with specific parts of the community e.g. within Somali communities. This was with a view to support disclosures, engagement and trust.

'Particularly with that community work, it's been really helpful for Topaz to be involved, because there are a lot of preconceptions about the police, even more than social care, about what they do, and their ability to support communities rather than just prosecute them. So I think that that has been really important' (Stakeholder interview)

Engagement officers gave examples of young people reducing their alcohol use, reducing missing episodes, decreasing suicidal ideation and intent through work with engagement officers and making changes that help safeguard them e.g. getting them taxi's to school instead of the bus.

Stakeholders liked the ability to share information with TOPAZ, anonymously. This was especially important given the importance of relationship building with this cohort.

'One thing that came from all local authorities is that they were finding it very difficult to share information with the police without calling 101. And I'm not talking about referrals and things like that. It was like nicknames, parks, registration numbers. So we have put together the portal, which basically is five minutes to complete it. And it's been given to professionals and that includes taxi drivers hoteliers, night-time economy as well. In order to share information for with the police, that I always describe it to people if you have information that you don't know what to do with it, because it doesn't meet the thresholds and you're putting it in the file and wait for something else to come send it into the police' (Police Interview)

The role of the prevention officer can be seen to be a specifically valuable asset and in January-May 2023 she had reached over 10,000 individuals through prevention and awareness sessions. This includes hospitals and health professionals. Some of this work was also said to facilitate disclosures from young people.

Challenges associated with Topaz:

Whilst Topaz was valued by those who were interviewed, several challenges emerged centralising around a) the nature of the offence type and difficulty engaging young people which had ramifications for evidencing outcomes and b) difficulties identifying, capturing and measuring what health outcomes look like for this cohort. Of note, the benefits highlighted above congregate around reducing risk and harm for children and disrupting offenders with little known about the health implications of this.

Complexities of the crime type

It was recognised that CSE and CCE are both complex offences to investigate and can include young people who do not see themselves as vulnerable nor victims. However, CCE was agreed to be especially challenging by way of engaging with young people. The level of violence and threats made against young people affected by CCE was said to be extremely serious and had direct implications for young people's willingness, ability or desire to engage with a range of professionals, but especially the police. This affected the number of disclosures that were made by young people and was also exacerbated by the fact that young people may also be committing offences as well as being exploited.

'it's almost like a death cult that has been formed around some of these issues. And stop and search, I think, pushes young kids into relying on exploiters to protect them, rather than the forces that they should do, which are the police. So I think we just kind of go round a merry go round all the time, we do random stuff, where they're not understood. And they are seen as, I keep going back to this, that they're perpetrators, and then that kind of turns them off, kind of seeking help from the police' (Stakeholder Interview)

'After missing episodes, a lot of young people feel that they've been hunted, even though the best interest of the police is to look at, we want to make sure you're safe and that there's no risk but that adds to some of the issues... For these young people it's still the police looking for them. And then they put in their heads that that is a negative connotation. So that also adds to them the kind of the mistrust and the help that TOPAZ could offer them, and it's kind of been mitigated by the fact that they see the police as trying to lock them up' (Stakeholder Interview)

'So my understanding now recently, they are no longer allocating engagement officers for CCE, they will for CSE, but not CCE, due to the complexities of young people, and their complete distrust for the

place. Nine times out of 10 It's hard to engage young people with CCE risks at the best of time, let alone having a police officer turn up saying can I help you?' (Stakeholder Interview)

'I've had a lot of young people being like, 'I'm not being exploited, stop telling me, I'm being exploited' or talking to them about making an NRM referral, and them saying, 'No, don't do it, I'm not being exploited'. And also when you go down that NRM route of people being seen as then like grass or other the rest of it, and the dangers that come alongside that and the impact on the community, and the fact that lots of young people in this community now carry weapons, and that young people get stabbed on a regular basis, there's all of that fear around that stuff, which is intertwined with it. So being able to then regularly meet with a police officer who's gonna come around and talk to you about it seems less appealing' (Stakeholder Interview)

Stakeholders and police were very clear that young people affected by CSE, but especially CCE, were extremely frightened of the repercussions of engaging with police and/or wider authority figures that may make perpetrators think they had 'snitched' on them. In these examples, young people felt *more* at risk by engaging with 'help' or 'support' and this led them to often avoid scenarios where help would be available.

'The fear factor is the biggest contributor to not disclosing, I think they're petrified, and the risks to them and making such disclosures is great. It's not worth it for them' (Police Interview)

'Unless the victim of CSE or the victim of CCE sees himself as a victim or sees themselves as being in danger and wants to help and support that, there'll be no we will get no engagement from them whatsoever' (Police Interview)

'The fear from the children far exceeds us removing the risk for the child. Because the network involved in the exploitation of these children is massive' (Police Interview)

'The children involved are exposed to weapons, I'm talking about firearms that are loaded. They've always been put through rituals of humiliation where they've had to kiss perpetrators feet, or they've been stripped naked. And it's all this degrading behaviour towards them to basically coerce and control them into dealing drugs' (Police interview)

This also included a reluctance to engage with health providers such as mental health, GPs or hospitals and examples were given where young people had not attended accident and emergency centres despite having stab wounds. This clearly has repercussions for recording and monitoring health outcomes; both physical and mental health.

'I mean, the health outcomes are, it's all about seeing themselves as snitches. And so they won't engage with even, with serious stab wounds, they won't engage with a&e, because they feel that that will then be passed to the police as information that they will use. I think that's the issue. So what I'm basically trying to say is, is that they don't believe that they're being helped. They think that it is really more about collecting the data on them so that they can then find people. So the first point isn't about their welfare is about catching criminals' (Stakeholder Interview)

'There's a lack of wanting to engage in any services, whether that be medical even down to sexual health. You know, it's all seen as the same system. And even when you've got great police officers, there is always that feeling that they're just collecting information rather than worrying about them. I think the institution of the police is very much about collecting, collecting information that would help the police convict people. And the young people know that and no one wants to be a snitch, no one wants to, even in their deepest, darkest moments' (Stakeholder Interview)

'In terms of health involvement with those young people who are being exploited, or who were concerned about being exploited, it's really limited as well. So like the area around kind of mental health for those young people, which is, I think, one of the big drivers around the vulnerability to exploitation and continued exploitation. I think, from frontline NHS services, we aren't getting very much at all. I mean, CAMHS is incredibly difficult to get young people into anyway, same as our service, their thresholds are very high '(Stakeholder Interview)

'Particularly in East Central, a lot of the communities that we work with, because it's so diverse, views around mental health and well being are much more complicated.. It's not only about diversity, because I think maybe it's about probably around class and status and poverty but views of mental health vary. Certainly with a lot of the young people that we work with mental health is very much something to be wary of. So if you talk about actually, how are you feeling...how you're doing with your mental health when your friend was murdered last year, or you were stabbed six months ago, that must have been really scary, those young people are like, No, it's fine. I don't want to talk, I don't want to go and talk to a mental health worker about that, I don't want to talk about how I'm feeling about that. I think particularly when we've had really serious kind of either murders, deaths, or injuries or arrests, trying to get those young people to then talk about just how they're feeling.

They're just like no, I'm not going to do that' (Stakeholder Interview)

'We're not really good, but we're much better at keeping young people physically safe. But keeping them emotionally safe is a completely different thing. And then kind of draws into question, what's the point of keeping them physically safe, if their emotional mess, and they can't function in the world? And I think we have got a lot of work to do around that. But because we're not great' (Stakeholder Interview)

Difficulty defining success

All interviewees were asked what they considered 'success' to look like for Topaz and, more broadly, for young people affected by exploitation. 'Success' for the police may be an ABE or evidential account to secure identification and prosecution of offenders.

'We're really, ultimately we're supposed to be offender focused. And trying to identify the people who are who are exploiting the children rather than identifying the children who are being exploited'

(Police Interview)

Although it was noted that achieving this was difficult with several offenders operating in any one network or case and an associated difficulty securing specific convictions (which also relates to challenges around evidential thresholds).

'Our disruption officers won't always necessarily end up with a criminal charge set, certainly not for sexual offences against the child or for modern slavery offences' (Police interview)

Therefore 'success' for external agencies or Topaz engagement officers can be much 'less' than a prosecution such as having a child who is willing to answer the phone to them after, possibly, years of non-engagement.

'Good for the engagement officers, is building up a good rapport with that young person, and being able to help improve their situation in some way, whether it's short term or long term, and that can just be spending an hour listening to them, or having a cup of tea, whilst chatting with them and their parents or carers. But obviously the best police result is that they are able to give us an ABE or an evidential account that we can then use to prosecute a suspect' (Police interview)

'We might not be able to lock people into prison, because a lot of evidence to do that. But the fact that we are disrupting them and we're giving the children a chance. I think that is the main thing for me. Even if we give them a breathing space' (Police Interview)

'As an engagement officer, for me, success looks like an improvement in that child's life. You know, just a, an improvement in their safety, feeling that they're heard, feeling that they're supported'

(Police Interview)

'You can have a level of success where a child is not engaging with any professional needs and all that, but they will engage with you. And that I find quite a lot actually, when you first go to them. They're very standoffish because you're the police. And they think they've done something wrong. And it's teaching them that we're here for you. You've done nothing wrong, we're here for you. So I could have a little win like that I can have that text and thank you for what you've done. And that to me is a win. But you can also go to the other end of the scale where you get an ABE from someone, and you're taking them through the court process for that person who's going through that trial. So it can be very different spectrums for what is as soon as success really' (Police Interview)

Many stakeholders, even those working in health or social care, didn't know what success could or should look like by way of health outcomes. It certainly wasn't being captured nor recorded and there was difficulty in ascertaining what they'd *like* to capture. Many of the objectives of external agencies centre around getting young people to have a point of contact, for their safety and well-being with a focus around harm minimisation (reducing, not always removing, risk rather than improving health)

'it's difficult to sort of specify really, but I suppose the main thing is you see them talking more, which is really powerful for them to be able to have that voice and for their voice to be heard in that way. Because especially with the police, because they may have had other incidents where they are being seen as that naughty child all the time, they're being picked up by uniformed officers day in day out and getting put back into place. But whereas I, as I said, I've got that luxury to sit and really spend time with them and talk to them. So that is a massive, positive and that is a good outcome that I would see from that they almost have a point of contact in the police with who they can speak to' (Police Interview)

There was agreement that it was especially difficult to define success in a way that acknowledged both police and health outcomes and there were discussions about whether it was the police's duty to a) support young people's health outcomes and b) record them.

Difficulty recording success

Unsurprisingly because success was hard to define and there was heterogeneity across agencies, success was also difficult to record by way of outcomes, *especially* those relating to health. Outcomes such as number of CAWNS issued or ABE's completed were easier to 'count' than soft outcomes such as a child's well-being or adjustment. Further, the complexity of the cases noted earlier means that 'success' can take a long time because securing engagement is such a lengthy process.

'...the cohort that we work with, it takes us between six months to a year to even establish a relationship. These young people are so embroiled, you know, we have people turning up at their houses with guns threatening to shoot their Nan's. Yeah, you know, these aren't people that are just going to start spitting out names and saying, oh, yeah, Bob down the road. He's been exploiting me for 14 years. You know, we've got a young man now that we've been working with for two, two and a half years' (Stakeholder Interview)

CAMHS noted that it won't be until a young person has been out of an exploitative situation, for a number of months or years that any trauma work could be conducted so health outcomes here would be longitudinal. This was also nestled in an acknowledgement that getting young people into therapeutic placements is challenging and working on or addressing trauma is rare for this cohort.

'it's so deep seated with some of these young children, we're not going, we're not tackling the core of the issue. And that's what worries me is if we're looking for long term engagement, long term progress and long term improvement, we have to be going back to the core of the issue. And the core of the issue is trauma' (Police Interview)

One police officer noted that longitudinal follow up is not routine and there is a focus on the immediate risk and the next case.

'Once we close to a child, it's very much we're on to the next one. And I think that's a that's a historic thing with the police. There's no real looking backwards. We don't really look backwards to see what's happened with that person. We tend to always look forwards... Do we even need to know... we're very much focused on the next person or the next issue' (Police Interview)

Stakeholders were also keen to highlight additional challenges with follow up once young people turn 18 and/or if they go into prison

'...once they're 18, you know, that doesn't, there isn't a strategy when they're arrested. There's no social care. And actually, we don't tend to get told and then probation are not great in their multi agency communication, and actually we sometimes don't even get told a release date. Yeah. And trying to get a visit is really, really difficult. So we've got at least five young men incarcerated at the moment across the country. And nine times out of 10, we may get one visit a quarter, if we're lucky' (Stakeholder Interview)

As it stands, engagement officers can record contact with a child on NICHE as a management occurrence, but this does not reflect the work, complexity nor any health outcomes attached to the case. Overall, some officers (and stakeholders) felt frustrated that the level of work they were putting into cases and supporting young people did not translate into traditional views of 'success'.

'There is nothing within the police system that recognises what I do, is of any value because it doesn't result in anything tangible. You know, if I said, Well, you know, this person's life has improved. They'd say, Well, great. But from a police perspective, what have you achieved?' (Police Interview)

'So with CCE again, it's very, very different. So they go up and down. If you look at our outcomes, it doesn't look like we achieve much, because then our outcomes for Roots are based on the CSE model, in my opinion. It's not fit for purpose. It doesn't reflect the small wins. So the wins for base are going to look very, very different for the wins for roots. Those roots, those wins are minimal. They are engaging' (Stakeholder Interview)

'We've got like a stat sheet I think it was mentioned in that meeting we had a few months ago. And it just doesn't reflect anything that we do basically. At the moment, there's there are no statistics that you could put together to measure the work that is done by the CCE team, unless you want me to count my emails. And hours that I've spent reviewing jobs. There's nothing measurable. And it's really, it's disappointing. Because I've never worked in a role. I've been in the job for 19 years, I've never worked in a role, where I've done so much work and it not be measured anywhere' (Police Interview)

Overall, discussions around success raised questions as to whether success needs to be the same for all partners. Further, whether Topaz and the wider force can be satisfied with 'success' even IF it doesn't lead to an offender being prosecuted.

Sharing information

Across stakeholders there was a consensus that agencies can share *information* but not *data*. The monthly strategic Topaz meetings, which had been recently reinstated at the time of the research, were valuable but described as being improved by each agency sharing *data* on their caseloads and joint cases.

'We don't get an update from Base every week saying this is how many young people we're working with...this is how many new people we've had this is how many have dropped off and no longer need the service' (Police interview)

However, whilst it was agreed this would be useful and add value, there were also some anxieties noted from external agencies about sharing intelligence/information with police without a child's consent. This was a source of frustration for police.

'I've said it 1000 times, if you read any white paper, or any serious case, review results it says the same things, the lack of communication, it creates a situation where these things can happen. And, and I feel very strongly that communication is definitely the key; sharing is definitely the key to child protection. And I am constantly having the door slammed in my face. By generally social care. And the problem is, is because they're the lead agency, there's other organisations then like school and health, who then kind of fall in behind them' (Police Interview)

However, by way of rebuttal, external stakeholders explained circumstances where intelligence had not been dealt with sensitively with a resulting effect on the relationship with the young person that has taken years to build.

'To get the information to Topaz, we feed it through their portal. And even on their portal, we will put please do not approach the young person without us. Please call us. You know, we've had armed police turn up' (Stakeholder Interview)

This was also furthered by frustration amongst external stakeholders when intelligence has not been able to be used or actioned by the police because it doesn't constitute 'evidence'.

'The professional network gets a little bit frustrated, because you'll have most of our young people have got a social worker, they've got Youth Offending or probation worker, they've got us. And then we're kind of feeding in all the intelligence and then from a police perspective, and it's not just TOPAZ but, generally, they'll say, Well, we can't do anything because there's not enough evidence and then we're just stuck in that cycle' (Stakeholder Interview)

'We get lots of intelligence, and I think that's the problem. You know, the CPS will call it hearsay, because it's not in black and white on a piece of paper, and I get it, I really do. But then, when you are sat watching a 14 year old boy scramble out of a car to deal heroin to a 40 year old man it breaks your heart' (Stakeholder Interview)

The sharing of information also highlighted differences in how vulnerability is classified e.g. what the local authority team are using to assess vulnerability to exploitation vs the police. This was complicated by the fact there are 5 local authorities in the Avon and Somerset Force area each with varying processes, protocols and definitions for vulnerability to exploitation. Having consistency across the force area in the form of an agreed vulnerable children's list would be beneficial.

'I think if we could, we could really nail down a good vulnerable children's list. And if it did score, if we could score them, or they could move up and down the scale, I think that would be really, really useful' (Police Interview)

An added challenge was that Topaz did not have any analytical support at the time of the research which meant they felt they were going in 'blind' to engagement opportunities.

'We no longer have any intelligence helping us, which is really frustrating. We're an intelligence led team, with no intelligence helping us, right. So obviously, you can imagine that was like going into a fight with your hands tied behind your back and blindfolded' (Police Interview)

'We don't even have an intelligence officer that's helping us with our work. You know, when we're having to scratch around for information that should be given to us. We should be getting packages of right this child's really at risk or these group of children are. This offender is showing that they're hanging around a young kid, and we really need to get on top of it. There's no pieces of work being done. So we're missing opportunities left, right and centre. And often, when we find out about it is like shutting the gate after the horses bolted, we should have got involved much earlier. And we've missed so many opportunities come to the party so late (Police Interview)

Recording Outcomes

Notwithstanding the challenges above with defining, identifying, collating and sharing outcomes. There were a number of difficulties presented with the physical recording of outcomes. For example, the current spreadsheet within Topaz was not routinely completed. It was also reported, by police, that this did not reflect the level of work going into a case, nor the complexity of each one especially where there are multiple offences and perpetrators involved.

'How you would record it without making things too onerous on the team? I think it would be easier if it if it was a daily thing that happened, but you'd need it to be like a tick box, you'd need it to take a minute to do and we'd have to be really hard on making sure that people fill it out at the start of the shift or maybe even the start of their next shift' (Police Interview)

Therefore, in its current format the data collection tool was not fit for purpose.

'...we're supposed to do a monthly spreadsheet. So what we've been doing, recording what we've done for the month. Yeah. So that could be paperwork could be face to face contact with either perpetrators interviews, contacting the solicitors reviewing, maybe phone downloads, videos, images and stuff. So we're supposed to record it on a monthly basis. But if I'm honest, I can't tell you the last time I did one. No one is chasing me for it and it doesn't relate to what we do (Police Interview)

However, challenges in recording outcomes were not limited to police. In fact, no stakeholders interviewed, from a range of agencies were confident in recording health outcomes for young people in this cohort.

'I don't think we're very good at capturing it, to be honest' (Stakeholder Interview)

Discussion:

The current exercise indicated that Operation Topaz is valued by stakeholders and works with an important, seldom reached, cohort. However, in its current format, it would be difficult to evaluate the impact of Operation Topaz on the health and well-being of young people affected by exploitation. This is not unique to the police however. Other stakeholders that were interviewed for this piece of work including third sector agencies, local authorities and health colleagues, *also* found it hard to

identify, record and monitor health outcomes for young people. Often the language was about safeguarding and risk rather than health (e.g. think family database). Further, challenges were noted about the specific variables that *could* be measured. The difficulty in building trust with young people experiencing exploitation means that any tools (such as outcome stars, psychometric measurements) would be inappropriate or potentially disruptive to the working relationship. Partners agreed this would not be worthwhile for the data that would be collected. Conversations with ICB colleagues also indicated that the data that is currently held on existing databases may not be relevant for young people affected by exploitation. For example, they may be unlikely to attend GP appointments or other consultations, accessing sexual health clinics that are not on ICB databases and demonstrating a reluctance to attend hospital or any statutory healthcare provider for fear of professionals safeguarding them and potentially, in their eyes, making them more vulnerable to exploiters.

Returning to the original research questions, the scoping work revealed that the feasibility of linking existing police data to existing health outcomes is challenging and these are currently not collated. Therefore there is not symmetry across police and other agency data. Similarly agencies were not able to articulate nor imagine what health outcomes should be or how to measure them.

The current work was positive in that it revealed an appetite to better record health outcomes for young people. A first step would be to bring partner agencies together to agree what health outcomes they are seeing across the cohort, to decide who could or should be recording these and how they could be shared across agencies. This would promote a more cohesive approach to health outcomes and allow for joint-working protocols to be established amongst health and justice colleagues. The fact that the scoping work identified a relatively clean slate could be interpreted as bleak, but instead is an opportunity to create a process and approach from scratch. The professional relationships already exist, so too does the will and motivation to safeguard young people and disrupt CSE and CCE. However, the work has identified the challenges not only in reducing the current 'sterile corridor' between health and justice, but also the complexities that are added to improving health outcomes for young people affected by this specific offence.

Recommendations:

To conclude we summarise a number of recommendations for agencies working with young people affected by exploitation to consider. These recommendations should lay the foundation for data collection in the future and afford a greater ability to assess and evaluate the impact of Operation Topaz.

- A regular feedback loop should be built in to capture the child's voice and preferences. This
 would ensure quality assurance across the Topaz team and wider agencies within the network.
 This should be embedded in any future research and work so that those impacted by
 exploitation have an opportunity to contribute to decision making.
- Bring agencies together ((five local authorities, health, police and third sector organisations) to develop a mapping tool of all health and justice outcomes and record them against agencies and organizations. The aim is to consider what variables/outcomes are they seeing, consider how these are currently recorded and by who and how could they be shared. This could build on work already underway with ICB and North Somerset CSE subgroup, chaired by Julian Squires within Avon and Somerset Police.
- Work on the relationships between agencies, especially around CCE to ensure that relationships aren't damaged by acting on intelligence
- Provide Topaz with dedicated data analyst

• Check how many Topaz cases have an NHS number – this would act as a feasibility study to consider if it's possible to trial the proposed ICB data approach. This involves sharing NHS number of Topaz case load with Clinical Support Unit (CSU) who can create a 'forensic column' to the existing data set which would indicate if someone is a victim of CSE/CCE - this would flag them and CB could do a data extraction on their consulting behaviours.