

ELM BANK TRAUMA CENTRE

Elm Bank Trauma Centre accommodates up to 6 young people all of whom are female and have been the victims of child sexual exploitation (CSE). The typical length of placement is 12-18 months during which time each young person follows a highly personalised and structured treatment pathway which clearly identifies key milestones enabling progress to be recognised and celebrated.

Following the successful completion of the treatment programme young people will often step-down to one of our other settings or return to their home communities dependent upon their personal circumstances

Most young people are likely to be traumatised due to CSE, compounded in some cases by other traumatic experiences common among those in residential care, such as neglect, and physical and domestic violence. Traumatic experiences mean that these children are very vulnerable, with substance abuse, self-harm, depression, violent behaviour, low self-esteem, and sleep and eating disorders often being common.

The chaos that typically characterised these children's lives before moving to Elm Bank is also often reflected in: disengagement from education; lack of positive activities; lack of positive friendships and support networks; and health issues ranging from sexually transmitted diseases to very unhealthy lifestyles.

Placement Objectives

Our treatment pathway is designed to achieve two main objectives:

1. To reduce risks (e.g. deal with absconding and addiction, and prevent contact with CSE perpetrators).
2. To build the young person's resilience (e.g. build self-confidence and positive relationships, have positive interests and engage with education).

Our ultimate aim is that the young person recovers from CSE, the risk of CSE is eliminated or greatly reduced, such that they could have a more 'normal' life going forwards. To reach those aims, each young person will need to achieve a series of incremental steps and to understand that they were being exploited prior to joining the service. We regard the recognition of CSE as an enormous breakthrough, and achieving it relies on several factors, including:

- young people beginning to value themselves;
- comprehending 'consent';
- appreciating the components of healthy friendships and relationships;
- learning how to keep safe;
- no longer desiring contact with perpetrators.

Trauma informed practice underpins our work at the centre and all staff are trained in its use. This combined with person centred practice and our core values of respect, dignity and recognition are the foundations on which all future work is based.

There are four main phases of the treatment programme, reflecting what a young person is expected to achieve at each stage, including forming positive attachments:

| Phase One | Phase 2 | Phase 3 | Phase 4 |
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| <p>Containment and Stabilisation</p> <ul style="list-style-type: none"> ▪ Establishing a sense of safety ▪ Stabilisation and containment of emotion and behaviour ▪ Increasing capacity for self-regulation ▪ Development of security/a secure base ▪ Capacity to explore and engage in relationships. | <p>Containment and Stabilisation</p> <ul style="list-style-type: none"> ▪ Building self-confidence ▪ Foundations for self-agency ▪ Increased self-regulation ▪ Establishing attachment bonds ▪ Engaging in treatment-related activities. | <p>Connection and Partnership</p> <ul style="list-style-type: none"> ▪ Continued building of attachment bonds ▪ Building partnership with treatment staff ▪ Developing self-confidence ▪ Self-efficacy and self-agency ▪ Enhancing self-regulation. | <p>Security and Social Relatedness</p> <ul style="list-style-type: none"> ▪ Cement self-confidence, self-efficacy and self-agency ▪ Demonstrate emotional and behavioural stability ▪ Recognition and understanding of others ▪ Empathy and concern for others ▪ Social connection ▪ Pro-social socially appropriate behaviours. |

Each stage in the treatment pathway contains a number of core elements which are common to all young people, these mandatory units are then augmented by additional units of work to address the individual needs and risks experienced by the young person. The treatment pathway is a formalised programme and each young person’s progress is assessed weekly at the Multi-Disciplinary Team Meeting (MDTM). This meeting is attended by the Registered Manager, Head of Education, Clinical Psychologist, Mental Health Practitioner and Key Worker.

As the young person successfully completes each phase of the programme this is formally recognised via certification and celebrated with both the young person, other service users and the wider team. This culture of achievement both celebrates success and seeks to generate motivation for all concerned further enhancing the concept of self-worth.

At Elm Bank we don’t just provide a specialist trauma service but also high quality education through the delivery of a truly personalised curriculum. Our onsite Learning Centre enjoys excellent staffing ratios with 2 full time qualified teachers supported by 3 Teaching & Learning assistants. We recognise that education is key to enabling young people to make the right choices in order to keep themselves safe and allowing them to maximise their life chances. Education is not just an add on service at Elm Bank but is key to everything that we seek to achieve.

The curriculum at the Learning Centre embraces all that is learned through school, whether in lessons or as part of informal learning within and beyond the school day. It includes not only the requirements of the National Curriculum but also the wide range of individualised activities that the Learning Centre provides in order to enrich the experience and learning of the young people. All students have access to a bespoke teaching and learning programme with access to nationally accredited courses including GCSEs and vocational qualifications throughout their studies.

The Learning Centre has a clear focus on the personal development and wellbeing of each young person, as well as on their academic progress. Each student has access to a truly bespoke curriculum tailored to their developing needs as well as their aspirational goals. We utilise a wide range of teaching strategies and technology including LEGO education throughout the curriculum to engage students in creative thinking and bring to the fore transferable skills in education.

We support our students to grow into positive, responsible people who can work and co-operate with others while developing their knowledge and skills, so that they achieve their full potential. We encourage student's enthusiasm for learning through high quality teaching in an environment where their achievements and excellence are valued and celebrated.

We are committed to providing our pupils with a caring, positive and welcoming learning atmosphere where our pupils can feel safe, happy and motivated to succeed in all they do. The clarity and quality holistic approach enables each young person to experience our 'wrap around' services, where care, education and therapy work cohesively together to identify and meet the emotional needs of pupils and promoting outstanding progress in pupils' personal development.

Therapeutic Support

Trauma informed practice underpins all of our work and all staff are trained in this approach. This is a strengths-based framework grounded in an understanding of and responsiveness to the impact of trauma, that emphasises physical, psychological, and emotional safety for everyone, and that creates opportunities for survivors to rebuild a sense of control and empowerment.

The centre is also supported 2 days per week by a Clinical Psychologist and a full time Mental Health Practitioner. All young people have at least weekly sessions with a qualified therapist and this work is then supported by the wider team. Therapeutic services are fully integrated alongside care and education, our directly employed therapists attend team meetings and provide on-going support and guidance to staff in addition to direct targeted work with young people.

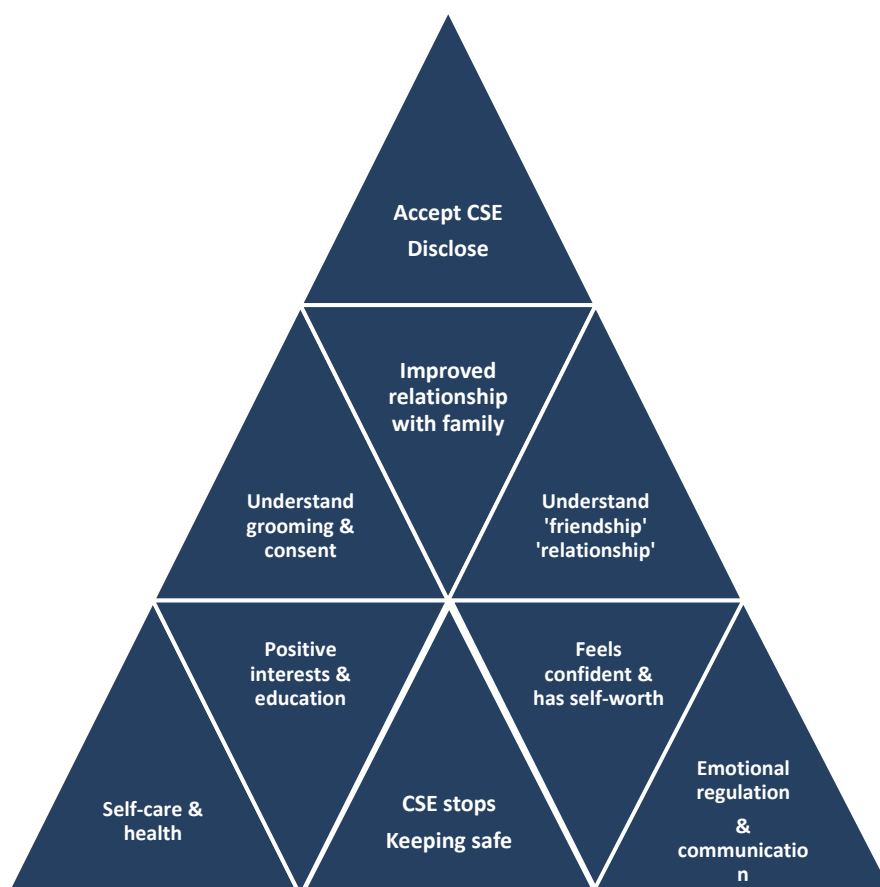
We utilise a range of assessment tools in order to assess risk and measure the impact of interventions, these include as a minimum

- ACES
- TSCC Trauma Symptom Checklist for Children
- ABAS-III

- Coopersmith self-esteem inventory
- Resiliency scales for children and adolescents
- Pierce Suicidal Intention Scale (Pierce)
- Baseline educational assessment in numeracy and literacy

The diagram below identifies the main outcome 'stages' or key building blocks necessary for the programme to be successful. Each of the discrete elements contributes to our primary aim of keeping the young person safe by eliminating risks and building resilience.

Each young person will have their own timeframe; 'stages' are often interdependent and overlap, and regression is common.



Matrix of desired outcomes which contribute to recovery from and prevention of further CSE

Keeping the young person safe

Our primary objective is to keep the young person safe, which includes:

- Stopping the young person from absconding, so they are safe from perpetrators and physically safe, and preventing further incidences of CSE while in the home.
- Improving young person's acceptance of their own vulnerability. Young people often have little appreciation of their own vulnerability to multiple dangers, such as

perpetrators (including traffickers) finding and taking a young person, or being attacked or taken advantage of in other ways besides CSE.

- Initially, a high degree of staff support and supervision will assist in delivering upon this objective with a gradual transfer of control as the young person is able to show a desire to, and has some understanding of, how to keep themselves safe. Fundamental to this is reducing absconding.

Improved health and self-care

Positive health outcomes are important factors in the success of the placement and while young person are in the home, a wide range of support may be required including:

- eliminating or reducing dependency on drugs and alcohol.
- sexual health outcomes, getting treatment for sexually transmitted infections (STIs), understanding how to prevent these in the future and being able to use contraception effectively.
- achieving a healthy lifestyle, eating healthily, sleeping well, '*thriving*', and being interested in their personal hygiene and general wellbeing.

Every young person will be supported to develop life skills such as budgeting, shopping, cooking, laundry and other forms of practical self-care. These are important achievements in themselves, as well as being instrumental in helping a young person move back to the family home, or to live independently.

Positive interests and Education

Many young people will arrive at the home with no interests or having dropped those they used to like. Having something they enjoy doing is beneficial in itself, as well as being instrumental in developing self-confidence and creating part of their future protection mechanisms.

Regardless of their academic ability or previous attainment, we expect every young person over time to achieve educationally. We feel that by applying themselves, achieving academically and getting helpful career guidance, we assist young people in developing hopes and plans for the future. It is likely that this is something which may not have appeared possible at the start of the placement. Succeeding educationally and having career aspirations are direct protective factors and also indirectly boosted self-confidence.

There is much research to indicate that positive engagement in education is crucial to the success of the overall CSE treatment plan.

The onsite Learning Centre is staffed by 2 qualified teachers and 3 experienced Teaching & Learning Assistants who have proven ability to providing highly personalised programmes of work for each young person.

Even those young people who had generally attended and done well in school will often have had a period of disruption and non-attendance prior to entering the care system. Thus, the return to full-time education and academic demands will need to be planned carefully and to reflect individual circumstances. In some cases, attendance at the Learning centre will be increased over time as the young person is considered ready to cope and benefit from a longer school day.

Demonstrating self-confidence and appreciating their own worth

As young people begin to benefit from the placement we would expect to see them demonstrating a positive sense of their own identity and self-worth; reducing or ceasing to self-harm; expressing aspirations for their future, and beginning to value themselves as an individual.

Self-confidence is a key protective factor to be supported throughout the placement. Progress in this area by each young person will be systematically monitored using a range of established psychological assessment tools.

Emotional self-regulation and communication

Behaviours such as self-harming or aggression are viewed as forms of communication and are often a learned behaviour in response to stresses. The development of an understanding of their own emotions and emotional reactions is a pivotal part of this programme.

We will know that young people are making progress in this area when they had learnt to 'self-regulate', such as to: not run away; withdraw; and/or be aggressive to oneself or others when upset. Other indicators will include included young person showing less agitation, fewer extreme mood swings, being better able to regulate their moods, using 'self-soothing' techniques and being more able to communicate their feelings assertively: *'I don't need that behaviour any more'*.

Higher expectations of friendships and relationships

Given the young person's characteristically low starting point, having higher expectations of friendships requires a significant change of mind-set, and hinges on other factors too, not least having increased self-confidence. Understanding what a 'true friend' is, is important in two ways. Firstly, this means that they will value and develop healthy friendships when they return home and have a yardstick by which to judge acquaintances in the future. Secondly, understanding the qualities of a good friendship will help to shake the young person's conviction that their exploiters had been their 'friends' or 'boyfriends', and will contribute directly to the overall achievement of recognising CSE. Understanding the limitations of 'friendships' created over social media platforms is also critical.

Improving family relationships

Improving family relationships is also a desired outcome. This will often hinge on achieving improved understanding and more open and easier communication between the parent and young person, combined with the parents' understanding of some of the factors which may have contributed to the CSE. Thus, feeling better able to parent the young person.

Understanding consent and grooming

Realising what consent is and is not, and changing existing perceptions about consent, is a significant outcome which often takes some time to achieve. We have found that when young people are able to discuss consent issues in various practical scenarios, it indicates that they are beginning to see how it applied to their own historic situations, and might challenge their previous misconceptions.

For example, changes in perceptions around how much their own behaviour has contributed to their abuse is common. Key elements include helping young people to understand that dressing a certain way, or accepting gifts, does not amount to consent. Understanding the legal rules around consent and age, and appreciating how much alcohol or drug consumption undermines the validity of any 'consent' is also important.

This helps the young person to understand that they had not consented to what had been done to them. A central part of that belief system is often their insistence that they had been in a loving relationship, and/or that what had happened had been '*their choice*' and had been under their control. Deconstructing these beliefs is a significant milestone, and includes the young person understanding the grooming process and recognising how they had been groomed. This is pivotal to the next outcome: accepting CSE.

Accepting CSE and disclosing CSE

Shifting a young person's loyalty and mindset is no easy matter and it should be appreciated that making a disclosure is '*a defining moment*'. Breakthroughs generally take a long time, are dependent on trust being established with staff and achieving many of the other outcomes outlined above. Young people often have numerous disclosures to make, for example, about different incidences of rape, numerous perpetrators, or networks of perpetrators, drug dealing and other young people being involved. It could take young person many months or years to tell the whole story, 'bit by bit'. As further progress hinges on this, staff need to be patient and to avoid pushing a young person to disclose until they are ready.

Disclosure is a major '*traumatic*' event for young person, as they have to accept that what they had believed, or wanted to believe, was not truth. Often the real work cannot begin until the young person is willing to acknowledge that they had been sexually exploited. Demolishing all the other misconceptions that go with disclosure (e.g. that this man loved them), is extremely distressing for young person.

Once a disclosure is made, the police have to be informed and involved. However, disclosing to the police and providing evidence in criminal prosecutions, are very demanding and potentially dangerous milestones, which many young people are not immediately ready, or are too scared, to make, even once disclosure has been made. It is not unusual for a young person to make a

disclosure to staff and then try to deny it, or refuse to disclose any more information for a long period.