Safeguarding Adults Review

Learning from the Experience of Large-Scale Modern Slavery in Lincolnshire

Overview Report

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1. Introduction

1.1. This Safeguarding Adults Review relates to modern slavery that was operating through an organised crime group within Lincolnshire.

1.2. A Police investigation of modern slavery named Operation Pottery commenced in 2014. The investigation focused on members of one family who approached vulnerable men with the promise of work, pay, food and accommodation. These men were subsequently emotionally, financially, physically abused and subjected to forced labour. This family were members of the travelling community and exploited the mobile element of that lifestyle to hold people in circumstances that the Court determined amounted to Modern Slavery.

1.3. It was estimated that there were sixty victims.[1] Twenty-two of these victims were able to present evidence that led to the prosecution and prison sentence of their abusers. This was a courageous feat by people who had survived years of abuse and fear but still retained the strength to testify in order to bring about justice and prevent others going through a similar trauma.

1.4. This review seeks to draw together learning from the victims and agencies involved. The learning will be used to help improve local and national responses to victims of modern slavery and the work to eradicate this heinous crime.

2. Context of Safeguarding Adults Reviews

2.1 The Care Act 2014 (section 44) requires Safeguarding Adult Boards to carry out reviews where an adult has died or experienced significant harm as a result of abuse and there are concerns about how agencies worked together. Safeguarding Adult Boards may also arrange for a SAR in any other situations where it is thought there is valuable learning for the partnership [S.44 (4)]. It is on this basis that Lincolnshire Safeguarding Adult Board (LSAB) commissioned this review.

2.2 Safeguarding Adult Reviews (SAR) are an opportunity to learn and improve how agencies work together to respond to adults at risk of harm to reduce the likelihood of similar harm re-occurring. The purpose of a SAR is not to hold any individual or organisation to account. Other processes exist for that purpose.

2.3 A Safeguarding Adults Review enables all of the information known to agencies to be seen in one place. This is beneficial to learning but the SAR must also recognise that this benefit of hindsight was not available to individual practitioners at the time.

3. Terms of Reference and Methodology

The LSAB commissioned an Independent Author, to provide the SAR report. The author is an experienced chair and author of reviews and holds a professional background in mental health services and safeguarding adults. The author is independent of LSAB and its partner agencies.

[1] The term 'victim' is used throughout this report in keeping with terminology used in legislation and guidance but does not diminish the strengths of those that experienced the modern slavery.

3.1. Terms of Reference

This review has focused on the scope period of January 2013 to September 2016 but will reference relevant information outside this timeframe. The start date relates to agencies becoming aware of significant concerns. The end date is two years after the Police action to remove victims from the traveller's site. This aims to understand the longer-term impact of modern slavery and outcomes for victims.

The specific areas this SAR considered are as follows:

Terms of Reference
1. To explore the context in which the modern slavery occurred.
2. To seek to understand the experiences of those who were subject to modern slavery: I. The barriers they faced in seeking help II. Their perspectives on the help they received, including how they were able to maintain control over decisions affecting their lives, including where people were resistant to help (with due regard to Mental Capacity Act and Making Safeguarding Personal) III. Whether the intervention and follow on support has improved their well-being IV. Their views and recommendations for change and development
3. To understand whether individual and collective agencies took opportunities to identify modern slavery.
4. To review how agencies worked together to respond to people subjected to modern slavery including their restorative care. I. How effective the multi-agency working and support plan was, both during the process of reporting through the National Referral Mechanism process and beyond, leadership in coordinating this and resources applied. II. Was support, including specialist trauma support and counselling available to victims – both during and after the operation? III. Was the support plan adequate to prevent a return to slavery?
5. To recognise good practice.
6. To highlight systemic factors that aided or presented barriers to agencies and practitioners in making effective responses.
7. To identify gaps which victims fell through and/or which agencies overlooked and the implications for multi-agency working.
8. To identify learning that can be applied to develop future responses to modern slavery.

9. To highlight what changes have already been made and make recommendation for further developments (short and long term) that would improve future responses to modern slavery.
10. To inform the combined strategy of Lincolnshire Safeguarding Adults Board and Safer Lincolnshire Partnership in relation to Modern Slavery.

3.2. Involvement of People who Were Victims of Modern Slavery

3.2.1 The review has gathered information regarding the twenty-two victims who gave interviews to the Police and supported a prosecution. It considered in detail, the experience of four of these victims. This was designed to enable a fuller understanding of individual's circumstances and a cross section of the issues involved whilst retaining proportionate parameters for the review.

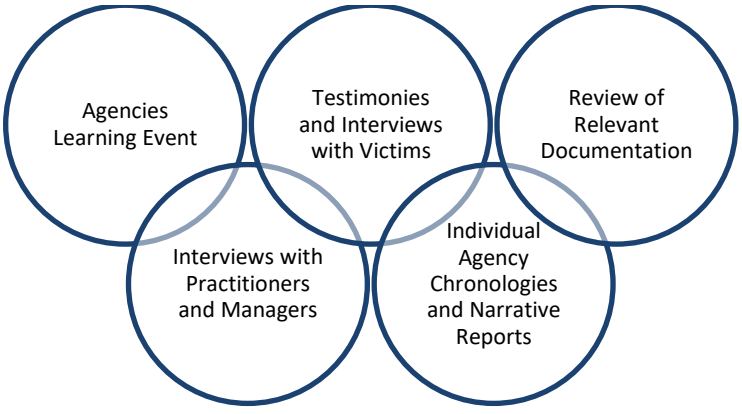
3.2.2 The review greatly benefitted from direct interviews with three of these individuals. They were willing to share their personal experience in order to try and help others. The author is grateful to them for their contribution and for the help from Intermediaries and the Police in facilitating the interviews.

3.2.3. In order to preserve confidentiality, dates have been generalised and pseudonyms used. The four victims whose experience is covered in more detail chose the pseudonyms that they wished to be known by. The travellers who were found guilty of crimes of modern slavery were all part of the same extended family. This group are referred to in this report as Family A.

3.3. Methodology

3.3.1. The SAR was mindful of the need to avoid any potential conflict with the judicial prosecution processes and took this into account in the timing for this review.

3.3.2. Agencies had already carried out some reflective learning about their roles so that this learning could be applied at the earliest opportunity. The Independent Author of this SAR benefitted from these insights and drew information from the following sources:



3.3.3. In all, there were twenty agencies that contributed to this review through interviews, narrative reports and the learning event. The role of those agencies and involvement in relation to the

victims of modern slavery is summarised in appendix 1 but in brief the agencies were:

- Department for Work & Pensions (DWP)
- X District Council (redacted)
- Y Council (redacted)
- Z Council (redacted)
- East Midlands Ambulance Service NHS Trust (EMAS)
- Framework Housing Association
- Humberside, Lincolnshire, North Yorkshire Community Rehabilitation Company (HLNY CRC)
- Lincolnshire Community Health Services NHS Trust (LCHS)
- Lincolnshire County Council: Adult Care and Community Wellbeing (LCC ACCW)
- Lincolnshire County Council Children's Services (LCC CS) and Barnardo's
- Lincolnshire County Council: Property Services (LCCPS) including Traveller Liaison
- Lincolnshire Fire & Rescue (LFR)
- Lincolnshire Partnership NHS Foundation Trust (LPFT)
- Lincolnshire Police
- National Probation Service (NPS)
- Office of the Police and Crime Commissioner (OPCC)
- P3
- Local Authority X, ASC (redacted)
- Safer Community Services for Safer Lincolnshire Partnership (SLP) (including Trading Standards)
- South West Lincolnshire CCG
- Federated Safeguarding Team, (FST)
- United Lincolnshire NHS Hospital Trust (ULHT)

3.3.4. The Independent Author was supported in the review by a panel. The panel members were from the LSAB partner agencies and brought a further level of expertise and scrutiny to the review.

4. Context of Modern Slavery

4.1. This section provides background information about modern slavery and the systems that were in place to support suspected victims during the scope period.

4.2. Modern slavery includes slavery, servitude and forced or compulsory labour, and human trafficking. It involves recruitment, movement, harbouring or receiving of children, women or men through the use of force, coercion, abuse of vulnerability, deception or other means for the purpose of exploitation. Individuals may be trafficked into, out of or within the UK, and they may be trafficked for a number of reasons including sexual exploitation, forced labour, domestic servitude and organ harvesting.[2]

[2] Health Education England https://www.e-lfh.org.uk/programmes/modern-slavery/ Accessed June 2019

4.3. A Government report estimates that there were between 10,000 and 13,000 potential victims of modern slavery in the UK in 2013.[3]

4.4. The UK Government published a Modern Slavery Strategy in 2014

- **Pursue:** Prosecuting and disrupting individuals and groups responsible for modern slavery.
- **Prevent**: Preventing people from engaging in modern slavery.
- **Protect**: Strengthening safeguards against modern slavery by protecting vulnerable people from exploitation and increasing awareness of and resilience against this crime.
- **Prepare:** Reducing the harm caused by modern slavery through improved victim identification and enhanced support

4.5. In 2008 the Government established The National Referral Mechanism (NRM). This is a framework for identifying and referring potential victims of modern slavery and ensuring they receive the appropriate support.

4.6. During the scope period and at time of writing the review, NRM process included three stages:

Stage 1 **Identification and referral:**	• A potential victim is referred to a designated First Responder organisation.[4] • The adult must consent to referral being made. • First Responder organisations can then refer potential victims into the NRM.
Stage 2 **Reasonable grounds:**	• Competent Authority[5] makes a 'Reasonable Grounds' decision, i.e. '*suspect but cannot prove*' that someone is a victim. • The expectation is to make a Reasonable Grounds decision within 5 days of the referral. • Where a positive Reasonable Grounds decision is made, the adult[6] can access support, which includes at least 45 days 'reflection and recovery' support to allow the individual to begin to recover.[7] • Support includes provision of accommodation and subsistence and links to other services dependent on need.
Stage 3 **Conclusive grounds**:	• Competent Authority gathers evidence and information to make a 'Conclusive Grounds' decision based on an evidential threshold of '*it is more likely than not'* that someone is a victim of modern slavery. • There is no target number of days to make a Conclusive Grounds decision although the expectation is that the Conclusive Grounds

3 HM Government 2018 UK Annual Report on Modern Slavery https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/749346/2018_UK_Annual_Report_on_Modern_Slavery.pdf

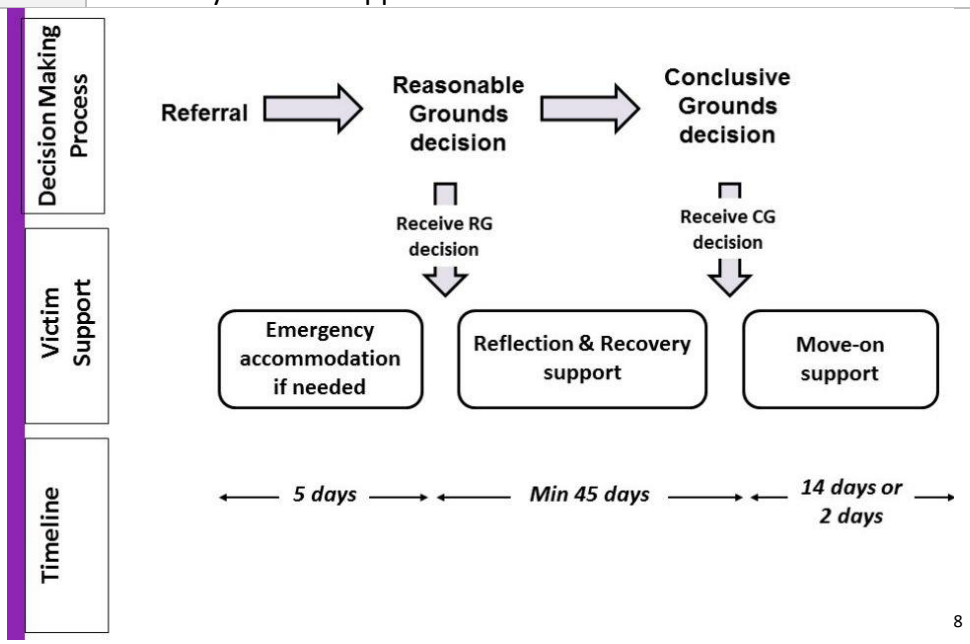
4 First Responders in England are Police forces; UK Visas and Immigration; UK Border Force; Immigration Enforcement; National Crime Agency; Local Authorities; Gangmasters and Labour Abuse Authority (GLAA) and specified third sector organisations such as Salvation Army

5 There are three competent authorities: the Modern Slavery Human Trafficking Unit (MSHTU) in the National Crime Agency (NCA); the NRM Hub in UK Visas and Immigration (UKVI); and Immigration Enforcement

6 Potential child victims are supported by children's services in the relevant local authorities.

7 The Salvation Army is contracted by the Government to facilitate the delivery of this support through a network of providers in England and Wales.

	decision will be made as soon as possible following day 45 of the period of recovery and reflection • Where a positive Conclusive Ground decision is given, an individual has 14 days to exit support • Where a negative Conclusive Decision is given, an individual has 2 days to exit support



[8]

4.7. A review of the NRM, conducted in 2014,[9] found a number of limitations of the NRM framework. These included:

- Low awareness of the process;
- Concerns about the quality and timeliness of decision making; and
- Lack of effective information sharing.

4.8. These findings are reflected in the learning from this review. Section 8 provides information on subsequent national and local developments to examine whether these changes would have made any difference to the areas of learning that this report identifies.

5. Background Summary: Modern Slavery in Lincolnshire and Operation Pottery

5.1. In 2014, Lincolnshire Police commenced a major investigation into suspected labour exploitation by an organised crime group. The investigation was named Operation Pottery and concentrated on sixteen members of one family who were part of the traveller community. This group is referred to in this review as Family A.

8 https://www.gov.uk/government/publications/national-referral-mechanism-reform/national-referral-mechanism-reform

9 Home Office (2017) An evaluation of the National Referral Mechanism pilot Research Report 94 Nicola Ellis, Christine Cooper and Stephen Roe https://www.antislaverycommissioner.co.uk/media/1177/an-evaluation-of-the-national-referral-mechanism-pilot.pdf

5.2. Family A were members of the travelling community and exploited the mobile element of that lifestyle to recruit victims who they then manipulated or intimidated into carrying out fraudulent criminal behaviour.

5.3. Family A were renowned within the area. Members of the review panel reported that in local estates, their name would be used as a threat to intimidate, creating legends of their assaults.

5.4 Police had been gathering information relating to Family A's criminal activities, including fraud, theft, assaults and money laundering. Their investigation also brought to light allegations of forced and compulsory labour involving sixty potential victims.

5.5. Many of these crimes were linked to people living on two traveller's sites in Lincolnshire. One of the travellers' sites was a private establishment, (Site A) the other a Borough Council owned premises (Site B). In both these environments, Family A exerted powerful control over the running of the sites and the residents.

5.6. By the end of 2013, the intelligence picture had become more detailed and concern for the potential victims increased. In 2014, the Police began Operation Pottery. This involved a small team of Police Officers working with multi-agency partners, focusing on slavery and servitude.

5.7. Through Operation Pottery, it transpired that the victims had been maltreated by Family A, some held by Family A for many years.

5.8. In Autumn 2014, the police began the first phase of enforcement action. On the first of four enforcement action days, Police arrested seven members of Family A on charges of conspiring to commit servitude and forced and compulsory labour.

5.9. Six victims were simultaneously assisted to move to a Reception Centre where they were supported by professionals from the multi-agency partnership. The Reception Centre had been set up to meet the victims' immediate needs of health and accommodation. It also provided a place of safety for the victims to make decisions about whether to be referred through the NRM and whether they were willing to provide evidence to support prosecution of Family A.

5.10. All six victims consented to a referral through the NRM.

5.11. Over the course of the following eight months, Police worked to identify two further victims. This led to further arrests of Family A on charges of conspiracy to defraud, money laundering and subjecting the victims to forced and compulsory labour offences.

5.12. In all, Operation Pottery lasted for two years. Of the sixty potential victims, twenty-two victims gave interviews to the Police and supported a prosecution. Of these, eighteen people were referred via the NRM and all received a Conclusive Grounds decision of trafficking. The other four victims had been victims of financial exploitation. It is this group of twenty-two that are the focus of this review.

5.13. The majority of the victims had some degree of vulnerabilities that made them more susceptible to exploitation. All the victims were supported and some gave evidence at trial with the assistance of

Registered Intermediaries.

5.14. In total sixteen members of the Family A were charged with varying offences. In 2017, fifteen were convicted of conspiring to require a person into forced/compulsory labour, conspiracy to defraud, fraud by false representation, theft and assaults. Nine of the defendants received prison sentences ranging between one year and fifteen years, totalling 79 years. In 2018, a further member of Family A was convicted of assault and conspiracy to require persons to perform forced or compulsory labour for which he was sentenced to 11 years.

> "*You preyed on men who for a variety of reasons had fallen on hard times. Men who had become homeless, alcoholic, men with mental health problems. Men who for a variety of reasons, and to varying degrees, were vulnerable and easy to manipulate……*
>
> *It may be that society and government have been slow to wake up to this pernicious wrongdoing, but society and government have woken up…."*
>
> Judge's Sentencing Comments

5.13. Operation Pottery was a major investigation of organised crime, resulting in successful prosecution and the protection of those victims involved. However, the focus of this review is not about the prosecution or subsequent management of the perpetrators. This review focuses on the experience of those victims and considers how agencies worked individually and collectively to identify and respond to modern slavery.

6. The Experience of Four Victims

The following extracts offer some insights into four of the victims' circumstances. Insights into the lives of the other eighteen victims are referenced throughout the report.

6.1. Fred

6.1.1. Fred was a man in his sixties who had a mild learning disability.

6.1.2. In the past Fred had lived in a housing association flat. He had a social worker and worked on a building site as a labourer. However, when Fred met Family A he no longer had a Social Worker, was out of work and attending a drop-in centre for his food. It was at this drop-in centre that he was recruited by Family A who offered him work and accommodation.

6.1.3. Fred thought he would be moving to a caravan site for about 2 months and would be paid for his work. What followed was 15 years of working under the regime dictated to him by Family A.

6.1.4. Fred described the conditions of his caravan at Site A as terrible. The windows were boarded up and it had no internal doors. He kept warm in a sleeping bag. There was no water or toilet. He used an outside tap and went to the toilet in the wood behind the site because there was no door on the toilet in Site A.

6.1.5. Fred was described as a 'go-for' for Family A. Fred recalled being paid £20 a day on two occasions but after that he was paid in tobacco or bought fish and chips. He said that other workers would be paid with bottles of cider and food.

6.1.6. Fred wanted to leave but was always watched and followed. He was in receipt of Income Support and Disability Living Allowance. Family A would ensure his sick notes were claimed and be with him when he collected his benefits to hand over money to them. Family A had his bank card and knew his PIN number.

6.1.7. Fred described being beaten many times usually to his head and body by a member of Family A '*I got belted no end of times – they used to use fists or a hammer*.' This normally happened when no one else was around in his caravan. He never felt able to fight back '*because he would get his two lads [members of Family A] and it would be even worse*.'

6.1.8. Fred was implicated in numerous incidents of suspected fraud with Family A.

- Trading standards investigated money being laundered by Family A through bank accounts in Fred's name although Fred had no knowledge of the transactions.
- Fred was held liable for driving offences of vehicles registered in his name – Fred did not hold a driving license and Family A used the cars
- Housing Benefit was paid for a property where Fred claimed he was the resident – in reality he lived in dire conditions in a caravan on Site A and Site B.

6.1.9. Fred worked for Family A in Lincolnshire and other areas, ferried about in the back of their windowless van. He came to the attention of Police on a number of occasions involving theft and rogue trader activities. This typically involved carrying out unsolicited work for older people who lived alone. Police reports from these incidents described Fred as appearing unkempt, dirty and thin.

6.1.10 In 2013, Police obtained a drugs search warrant for Site A. Fred described there being a big shed on the site that Family A were growing cannabis in. They set this alight to get rid of evidence before Police came. Fred was arrested when seedlings were found growing in his caravan and he claimed they were his. Fred did not feel able to tell the Police what was happening to him as members of Family A had also been arrested and were at the station with him.

6.1.11. After some time, Fred was moved to Site B where the facilities were better. He periodically came into contact with health services, due to his coeliac condition and work injuries. On one occasion, when he was out collecting scrap, a large piece of metal went through Fred's leg. He attended A&E. Staff there thought he was alone but he was accompanied by members of Family A and didn't feel able to talk to health staff about what was happening to him.

6.1.12. On the first of the Operation Pottery enforcement days, Fred was found at Site B. During the two days that Fred was at the Reception Centre, he received care, assessment and treatment for his wellbeing. Fred was given information about the NRM process and the help that was available to him.

6.1.13. Fred agreed to make a statement and provided a video interview, the first of three interviews over the next year. As is common to many people with a learning disability, Fred had difficulty

expressing himself. Following the interviews, he had psychological assessment and needed the support of a Registered Intermediary in order to give evidence in Court.

6.1.14. When he talked about the future, Fred made the following comments:

> *"All I want now is to get out of, well to get out of [Lincolnshire] altogether, to get clean clothes, get set up me self and start looking after me self instead of letting other people to look, look after me and take advantage of me…..All I want is a little ground floor flat and every day I can just potter about in the garden, keeping little rooms tidy, do me own cooking, do me own shopping, pay me own electric and get me housing benefit, where I can get all clean clothes….and make a fresh start…..that's all I ever want."*

6.1.15. Fred made choices about where he would like to be relocated. Police Officers who had been assigned to him, accompanied him and remained in regular contact.

6.1.16. Fred described how much his life has improved. He has his own home in supported accommodation, has money and does his own shopping. He's gone to college to do gardening courses and loves to go and watch rugby and cricket. He has support from Social Care who oversee his package of care.

6.1.17. Four years on from being rescued from Site B, Fred remains deeply affected by his experience. He was offered the chance of a holiday to Scotland but had turned it down because he was frightened travellers would be there. Fred still phones his link Police Officer most days. Fred reflects:

> *"'I'm glad [the police] turned up in the mini bus when they did ……I still am always looking behind me'*

6.1.18. When Fred was asked what agencies could do to make a difference, he said he would like to see all agencies coming together and going to other places to get others away from them [Family A] as he knows it is happening to others.

6.2. Charlie M and Janet

6.2.1. Charlie M and Janet were a married couple, living in their own property in another county. Janet had a mental illness and as a result received regular support from a Community Mental Health Team Social Worker in another county. The couple needed help in managing day-to-day tasks.

6.2.2. Family A visited the couple. They convinced Charlie M that they had known him when he was a teenager and that he was the cousin of one member of Family A – this was not the case. They offered to arrange work on his house which Charlie M described as a wreck. Charlie M recalled Family A saying *'we can sort it out, you know…. If you move out, we'll sell it on and get you into a nice tight community"*.

6.2.3. Charlie M and Janet signed their house over to Family A. They thought the money from the sale of their house would leave them debt free. Charlie M had no idea how much Family A ended up selling the house for. He never received any money from Family A who just told him the house

was in a state and cost more to do up than it was worth and that they had sold it for a loss.

6.2.4. Police later confirmed the house had been sold for over £60,000. The mortgage and debts relating to this property amounted to around £32,000. The remaining funds were paid into a member of Family A's bank account.

6.2.5. Charlie M and Janet moved to Site A and then Site B in 2010, leaving a message for their Social Worker in their home area.

6.2.6. Charlie M recalls his Social Worker from their home area visiting and warning him that Family A '*had got a reputation'*. The Social Worker was concerned about their living conditions and tried to arrange respite care for Janet back in their originating town however funding could not be secured.

6.2.7. The Social Worker arranged a hand-over to a Community Psychiatric Nurse (CPN) in LPFT and raised their concerns about possible financial abuse. The CPN regularly visited on the site, trying to see Janet and Charlie M on their own. However, this was often difficult to achieve – the CPN felt their visits at times were "controlled and manipulated" by others living on the site.

6.2.8. The CPN suspected the couple had been financially exploited when selling their house to Family A and in 2011 reported the matter to the Police and to the Local Authority Safeguarding Adults team. These referrals were not progressed.[10] (The reasons are considered further in section 7.1).

6.2.9. During 2011 Adult Care Community Wellbeing (ACCW) provided the couple with an Occupational Therapy assessment and a Carer's assessment following concerns being raised by the CPN and Council Property Services officer about their circumstances. The Council Property Service officer and Housing Officer persuaded the couple to move to more suitable accommodation away from the site – both were concerned the couple had been exploited.

6.2.10. It was not until a multi-agency planning meeting in 2014, that the Operation Pottery investigation team became aware of Charlie M and Janet's connections with Family A. The Council Property Services officer informed the Police that Charlie M and Janet had been on Site B, having given up their house. Police were aware that other victims had 'sold' their houses to Family A. Charlie M was interviewed as part of the Operation Pottery enforcement action.

6.2.11. Adult Social Care also carried out a mental capacity assessment on Charlie M in relation to financial issues. Charlie M was judged to have the capacity to make decisions about his finances but it was noted "*[Charlie M] is a trusting suggestible individual who remains vulnerable to exploitation or manipulation. He is likely to lack the confidence or ability to address the way others have a degree of control over him".*

6.2.12. Charlie M was prepared to give evidence in court however the perpetrator from Family A pleaded guilty. Charlie M and Janet were also provided with a dedicated Police Officer from the investigation team to support them throughout, and following the trial.

[10] Neither ACCW or the Police have records of these referrals.

6.2.13. In the interview for this review, Charlie M described living with Family A.

6.2.14. *'They treated me nice right up until we were at [Site B]. I got on OK. They were not threatening but would give me a warning….I didn't know about modern slavery at that time. It was like a community.'*

6.2.15. Janet and Charlie M are now settled into their new flat. The couple continue to need support from services to maintain their home, sustain their tenancy and to support Charlie M in his care of Janet.

6.2.16. When asked what agencies could do to help others in situations like his, Charlie M said '*Be aware of what's going on behind the scenes*'.

6.3. Charlie K

6.3.1. Charlie K was a man in his sixties who had learning difficulties. Following the death of his wife, Charlie K became very depressed and spent his money on gambling and alcohol. He lived as a lodger with his landlady up until 2013. Both used alcohol heavily and Police were regularly called out for drink related incidents though support offered was not taken up.

6.3.2. Charlie K also had various medical problems including respiratory and cardiology conditions. He experienced anxiety and had a history of self-harm and overdose. He seldom attended his GP but was a regular attender at A&E due to his physical health needs.

6.3.3. Charlie K recalled that in 2013, he was going to sign on in town. A white van pulled up and the driver (a member of Family A) said he knew him. Charlie K was offered a caravan, a job, clothes and *'this and that*'.

6.3.4. Police became aware of Charlie K's connection with Family A around this time. Initially Charlie K was still living in his lodgings but when this broke down, he moved onto Site B.

6.3.5. Charlie K became involved in incidents of rogue trading on properties within Lincolnshire and other areas. Police video footage of unsolicited work on a property owned by an elderly couple shows Charlie K appearing cold, dishevelled, tired and very gaunt.

6.3.6. Charlie was struggling financially at this time. He referred himself to the Lincolnshire Community Assistance Scheme[11] for basics such as food and toiletries, gas and electric.

6.3.7. Charlie K later described the conditions of living on the Site. The caravan he was given was in a poor state, with no gas or electricity, toilet facilities or running water. The wash facilities were a shed on the site.

[11] This is a historical scheme that was introduced in April 2013 to replace Government-provided Crisis Loans and Community Care Grants. LCAS has been designed to meet a range of urgent needs experienced by Lincolnshire residents in a time of crisis. The scheme was discontinued as of October 2016.

6.3.8. Charlie K was provided with food but all of his benefit money was taken from him other than £10. Family A had his bank card and Charlie K had given them his PIN number out of fear of being hit. Charlie K recalled that on one occasion he was due a large benefits refund:

> *'[Family A member] took me to the post office in his car. I drew out £600 – he didn't even let the money touch my hand. He even took the card off me….. Knowing [Family A member] he'd have hit me. I was frightened, yes.' (Charlie K demonstrated being punched in the face.)*

6.3.9. Charlie K worked a seven- day week. He never knew where they were going as he would be in the back of a windowless van. His pay would be a bottle of cider, tobacco or fish and chips.

6.3.10. Charlie K did not like the work he was involved in where elderly people were threatened to pay for the work that had been done.

> *'They used to take me out to other people's house. They'd pretend they were from the council and ask ''do you want any work doing?'' We used to take all the stuff up (drives etc.) Then they would ask for money for materials but they would not buy materials – they wouldn't go back'*

6.3.11. Charlie K was never assaulted whilst on Site B and did not witness any assaults but members of Family A would speak to him in a threatening and aggressive way and he was in fear of doing anything wrong.

6.3.12. Toward the end of 2013, Charlie K was assisted by Police to attend a church for welfare and accommodation as he had no place to go. The following day he was brought to A&E via a 999 call following an assault. Charlie K told staff he had been homeless for about 2 weeks.

6.3.13. It was not known at that time but Charlie K had just managed to leave Site B. He returned to his lodgings but Family A found him there and threatened him. Charlie K contacted the Police, reporting he had been held against his will at Site B. He told Police he had left but Family A had come to take him back. However, when Police interviewed Charlie K he became agitated and confirmed no assault had taken place. He also changed his account saying there had not been any threats. He stated he would not make a formal complaint but asked the officer to give 'words of advice' to the individuals involved from Family A. This was done and Charlie K was updated. He reported there had not been any further problems.

6.3.14. Soon after Charlie K made his own arrangements to move into Sheltered Housing Association accommodation in another county. At the time of the move, Charlie K had no belongings, just an old settee and table. There was a Housing Support Officer from the housing scheme whose role it was to sort out the benefits.

6.3.15. It was here that the Operation Pottery investigation team found him late in 2014, after the enforcement action had begun. Charlie K was interviewed and gave a clear picture of the control and exploitation he suffered whilst living on the site.

6.3.16. Charlie K was assigned an Officer from the PARU to support him. In 2017, the Officer identified

that Charlie K was under threat of eviction. Fortunately, the Officer intervened and secured DLA and income support for him, plus a backdated sum of £3000. Although in the past, Charlie K had struggled with alcohol and budgeting, he used this money to buy everything he needed for his flat.

6.3.17. Charlie K has now stopped drinking and lives in comfort in his own flat. He still maintains some contact with his PARU Officer.

> *'I've got my own place here, I pay my rent, pay my TV licence, I can go to the shops when I want, get a bus from here to do whatever I want, got me own key, got me own panic button if I ever fell, or stroke or heart attack or chest pains. I can't ask for more can I?'*

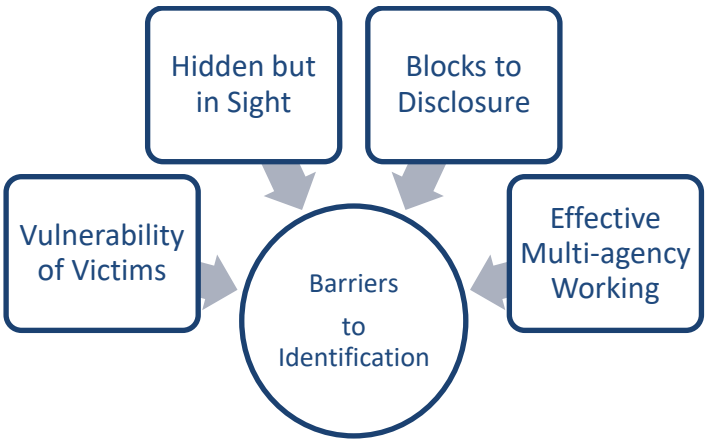
7. Analysis and Learning

The learning from this review is structured around three key stages:

1. Identification
2. Responses to the victims
3. Ongoing support and restorative care

7.1. Key Stage 1: Identification

7.1.1. Research[12] has identified barriers to victims. These barriers are reflected within this review and are considered under the following inter-related headings:



- Vulnerabilities of Victims

7.1.2. Common to all victims was that their life circumstances left them vulnerable to exploitation. This was taken full advantage of by Family A.

7.1.3. The majority (68%) of the victims had problematic drug and/or alcohol use. This was exploited

[12] Guidance **Modern slavery training: resource page** October 2018 https://www.gov.uk/government/publications/modern-slavery-training-resource-page/modern-slavery-training-resource-page

both in recruiting victims and in maintaining control over them through using alcohol as payment. Drug and alcohol dependency was often associated with other vulnerabilities such as homelessness.

7.1.4. This targeting of homeless people reflects national research.[13] As one homelessness worker commented, the exploitation of homeless people is low risk and high yield for the perpetrator. Family A were brazen in seeking their victims out from places such as homeless shelters, church welfare centres and places where people sleep rough. Family A would also use homeless people to recruit other homeless people through.

7.1.5. Some victims were helped to leave Family A, but then subsequently returned. This can be difficult to fathom without understanding the life experience of those victims who may be trapped by their circumstances: isolated, powerless, believing there are no alternatives or that they deserve no better. Fredik was one such victim:

> *Fredik was picked up by Family A in 2010. It was winter and he was walking the streets, drunk and homeless. He was offered a good wage, work and free accommodation. Initially Fredik was paid but as time went on his pay was stopped. Fredik left but then returned to Site A as he had been street homeless.*
>
> *Fredik later said he had felt unable to leave as he had no passport and his belief was that Family A would just keep bringing him back anyway.*
>
> *Fredik became known to the Street Outreach Team Homeless service. The workers there were aware that Family A were frequenting the local church welfare drop. The Street Outreach team supported Fredik to be able to return to his home country, arranging tickets, accommodation and a replacement passport. However, within a month, Fredik had returned to the UK, once again homeless. He was taken to A&E due to tonic-clonic seizures. He was under the influence of alcohol, very unkempt, with multiple bruises to his body of different ages.*
>
> *Fredik was found by the Operation Pottery investigation team in 2014, shortly after their first enforcement day. He accepted a referral through the NRM and a positive Conclusion Grounds decision was made that he had been trafficked.*

7.1.6. For another victim, Seb, intimidation had been used alongside his alcohol dependency to coerce him into giving up his home. He had signed his house over to Family A as a gift – although he knew it was not right. He *'just wasn't bothered at the time as my head wasn't right.'* When Seb latterly tried to get his home back, Family A issued three ultimatums to him 1) they sell his house 2) they rent his house 3) they give him a 'Gypsy Kiss' which Seb took to mean they would kill him.

7.1.7. Twelve of the victims had a learning disability and/or mental health needs. The majority (62%) were not receiving any support from services when they were found by Family A, a further

[13] Support Needs of Male Victims of Human Trafficking: Research Findings, Salvation Army 2013 Available at: www.nrpfnetwork.org.uk/SiteCollectionDocuments/Support%20needs%20of%20male%20trafficking%20victims%20-%20FINAL.pdf

vulnerability factor to exploitation.

7.1.8. The stories of Fred, Charlie M and Janet exemplify 'Mate Crime' – manipulation by Family A, posing as friends but with the intent to exploit for labour, involve in crime and to extort money.

> *'As Fred talked through what life was like for him on site, it became clear he found it difficult to understand his status in Family A and the use of his identity within their criminal activity. Fred spoke of his relationship with some members of Family A as just like a friendship but then reflected that they didn't treat him like a family member.'*
>
> Police Interview of Fred

7.1.9. Paul was another of the victims who had learning disabilities. His experience demonstrates the exploitation of his learning disability without the need for bullying and intimidation.

> *Paul had been with Family A for nearly twenty years since they picked him up in his home town. He was unemployed at the time living off benefits. The offer of £15 per day doing groundwork sounded good to him so he left, leaving all his belongings and family behind. His family believed he had gone missing and died.*
>
> *Paul was ferried around in the back of a windowless van with the dogs to different parts of the country. He came to the attention of the police on many occasions, involved in various suspected offences of theft and rogue trading. He appeared dirty and unkempt. When officers spoke to him, he struggled to remember his details or to grasp the situation. However, he said he was at Site A through his own choice and appeared in good spirits.*
>
> *On the first day of Operation Pottery enforcement action, Paul was located on Site A. He was described as dirty and unkempt and living in filthy conditions. When interviewed, Paul stated he got paid and fed but worked long hours. He had not been assaulted and was free to come and go off the site as he chose.*
>
> *The UKHTC made positive Conclusive Grounds decision that he had been trafficked. Paul has been reunited with his family and lives in supported accommodation.*

7.1.10. Some victims had been manipulated because of their wish to belong and be part of a wider community. As one victim commented:

> *'….the strange thing about it, they have such an art, they brainwash you, they make you feel comfortable in a strange sort of way, sounds silly but it is not really.'*

7.1.11. Danny was one of the victims who wanted to be part of the Traveller Community:

> *Danny was a young adult with a troubled history. He has been involved in acquisitive crime from the age of 12 resulting in custodial sentences. Danny had also been estranged from his family and had been a Looked After Child.*
>
> *Danny had additional vulnerabilities arising from diabetes, cannabis use and additional*

challenges around literacy. He was challenging for services to sustain contact with. He had a chaotic lifestyle and frequently breached his bail condition.

Initially his involvement with Family A gave him some degree of stability. However, this involvement also led him into highly risky and abusive situations.

Workers from Children's Services and LPFT Child and Adolescent Mental Health Services (CAMHS) tried hard to support Danny to remain in supported lodgings and avoid contact with Family A. However, Family A would wait outside of supported lodgings for young people. They arrived looking for him and Danny apparently 'chose' to go with them. Latterly Danny was also threatened and assaulted by Family A.

Danny had multiple hospital admissions for unstable diabetes due to not taking his insulin or managing his diet. When asked his views about being in hospital, he said it was like going home. There was company there and people to look after him. It was somewhere he felt safe.

7.1.12. Some victims, even once they had left Family A, did not recognise that they had been exploited. This may have been due to low expectations of what life had to offer them or that despite their abusive circumstances, there was some sense of belonging.

Gerek originated from another country and had been with Family A for seven years in very poor conditions, working long hours for minimal pay and involved in crimes associated with Family A.
A Victim Liaison Officer concluded Gerek only had limited insight into the offences committed against him as he continued to speak in their defence. A Doctor examining Gerek, questioned whether Gerek may be experiencing 'Stockholm Syndrome'[14] as he appeared to have sympathy with Family A.

7.1.13. The risk factors that were common to the victims of this review, are also known risk factors of other victims of modern slavery:[15]

- People who are marginalised, isolated and socially excluded
- People who have low self-esteem and troubled histories
- People with impaired cognitive functioning
- People who are dependent due to homelessness and /or addictions
- People who are in poverty or have no control over their finances
- People who are immigrants and are dependent due to language, cultural literacy, control over passport

[14] *Stockholm syndrome is a psychological phenomenon in which hostages express empathy, sympathy and positive feelings towards their captors sometimes to the point of defending and identifying with their captors.* International Journal of Advanced Research (2015), Volume 3, Issue 11, 385 - 388 Stockholm syndrome -A self delusive survival strategy Minu .S. Nair http://www.journalijar.com/uploads/309_IJAR-7677.pdf

[15] LGA and Independent Anti-Slavery Commissioner: Modern slavery A Council Guide (2017) Accessed June 2019 https://www.antislaverycommissioner.co.uk/media/1201/modern-slavery-a-council-guide.pdf

7.1.14. These were people who were vulnerable but, by and large, were just under the threshold of needing the active involvement of agencies and the added protection this would afford them. This was exploited by Family A and helped their activity stay below the radar of agencies.

7.1.15.

LEARNING POINT: There are known risk factors associated with modern slavery. Recognising these risk factors alongside possible signs of modern slavery should direct professionals to be vigilant and use purposeful questioning to give opportunities for disclosure

7.1.16. The degree to which this occurred is considered further in the following sections.

- ## Hidden but in Sight

7.1.16. The victims although controlled by Family A, were not always hidden from sight. They had interactions with Council Property workers; Police; Homelessness Services; Housing; Health services; Social Care; DWP and with the public. The question was whether there were opportunities that agencies could reasonably have taken to see the signs, to ask questions and to give opportunities to victims to speak out.

7.1.17. At the beginning of the scope period, modern slavery was emerging as a relatively new concept. This was just prior to the Care Act 2014 implementation which incorporated modern slavery into statutory guidance.[16] Practitioners were developing skills but were largely operating in environments without any specific training in modern slavery or the benefits of systems that brought multi-agency intelligence together.

7.1.18. Agencies reasoned that the low levels of awareness of modern slavery affected the levels of vigilance by practitioners and the confidence they had in responses where concerns were raised. Whilst this is acknowledged, victims were experiencing financial exploitation; physical abuse and psychological abuse - these were all used as mechanisms of control within modern slavery. Safeguarding Adult Board partner agencies were expected to have a good understanding of these aspects of abuse.

7.1.19. Members of the Property Management Facilities team (the contracted service) on Site B may have been in a prime position to see concerns, ask questions and to report any suspicions about abuse and exploitation. However, this was a part time services and the Facilities team reported the victims had often left before they arrived on site. The Facilities team also had difficulty knowing who was on the site as non-renters were staying with travellers but not being declared as living there. Site B was a very challenging culture to work in. Given the reputation Family A had for coercion, intimidation and violence, asking challenging questions and reporting concerns was likely to be a difficult task for any members of the Facilities team. However, the sites did need to be much more open to scrutiny, with the Facilities team seen as having authority and members of the team supported to challenge anti-social behaviours.

[16] HM Government Statutory guidance Care Act 2014: supporting implementation; Last Updated 2018 https://www.gov.uk/government/publications/care-act-statutory-guidance

7.1.20. The Facilities team had also not had any safeguarding training. They could take concerns to the Council Property Services but at this time the staff from that service had also not had any safeguarding training. There were examples given where staff from Council Property Services clearly had a sense that something was wrong, but had limited sources for supervision or other support systems in place to tackle it.

Council Property Service recalled being approached by Cyrek who asked them to help him to get to his parent's home in another area as he no longer wanted to be at the site and had no transport. Cyrek said Family A wouldn't be happy if he left so the staff member arranged to meet him off site and drove him to his parents' area.

7.1.21 This response was beyond Council Property Service's role and an act of kindness. It was clear from other interactions, that staff had concerns about Family A and the wellbeing of residents. Staff had warned victims about Family A and told workers involved '*they are not a family to upset'* and to avoid visiting the site. Despite these concerns, there is no indication that any member of staff tried to find out more information about the reasons for Cyrek's covert behaviour.

7.1.22. Property Services staff did encourage Charlie M and Janet to move to more suitable accommodation. They and the Housing staff had concerns about exploitation by Family A. The record from the Housing Advice interview was *'residing in an unfit caravan ….were exploited and financially abused by [Family A.]*' There was proactive work to support the couple to move and this achieved a good outcome for them. However, there is no record that their concerns of financial abuse led to a referral through Safeguarding Adult procedures or that reporting to the Police was considered.

7.1.23. LCC Property Services noted the route to escalate 'soft intelligence' concerns to other partners was not always clear and this is discussed later in this section 'Effective Multi-Agency Working'. However, as noted in 7.1.18, even pre-Care Act 2014, routes for referring concerns of abuse and exploitation under Safeguarding Adult procedures should have been known and used.

7.1.24. LEARNING POINT:
There were missed opportunities to refer concerns about financial exploitation.
Public Services beyond those who are members of the Safeguarding Adults Board, can play a vital role in safeguarding adults and require the necessary training and supervision to support their staff.

[Recommendation Arising]

7.1.25 LPFT reported making two referrals through Safeguarding Adults procedures. This was by Charlie M and Janet's Community Psychiatric Nurse (CPN) who demonstrated good practice and tenacity in following up concerns about financial abuse, despite the site being an intimidating place to visit. LPFT recorded the decision by Adult Care and Community Wellbeing (ACCW) to take no further action as there had not been any allegation of abuse Charlie K '*may be vague for his own reasons and may be deliberately concealing information for his own reasons'.*

7.1.26. Given that financial abuse by its nature, can be hidden and the victim often unaware, this would appear to be a flawed decision and a missed opportunity to make further enquiry and potentially uncover more information about the abuse of the couple and the other victims.

It is noted that ACCW have no record of either of the referrals and were therefore unable to provide any evaluation of the reported response.

7.1.27. The ACCW author identified an incident relating to another victim that was potentially a missed opportunity to uncover information about what was happening on the traveller sites.

> *Arthur was a man in his 70's who had 'gifted' his house to Family A and then moved to Site A. He was admitted to hospital following seizures related to alcohol abuse and falls. Arthur had impaired cognitive functioning. The hospital Social Care team were not aware that Arthur had 'gifted' his house. However, they were concerned that Family A had his possessions and bank book. Advice was sought from the LCC Safeguarding Team and steps were taken to suspend Arthur's bank cards.*
>
> *Arthur was moving into nursing care and there was a duty on the Local Authority to protect his property.[17] This would require going onto Site A to retrieve his belongings. A member of staff from Council Property Service advised that access to the site would be difficult and require Police assistance. The protection of property was never carried out.*

7.1.28. ACCW recognised there was good practice in identifying possible financial abuse, protecting Arthur and securing much improved care for him. They noted that had the protection of property been carried out, this may have provided greater insight into his past life and potentially uncovered further information about the conditions on the site, giving opportunities for early intervention for others.

7.1.29. The experience of the Health Visitor and School Nurse who regularly attended the sites suggests the conditions of modern slavery may have been hidden. They were shocked when Operation Pottery revealed that victims had been living in the caravans that they had presumed were abandoned due to disrepair or padlocked because the travellers had left the site.

7.1.30. The health staff described a positive and open relationship with the travellers. They had not witnessed anything of concern and had felt able to challenge and report other concerns they had – for example, incidents of domestic violence. They were free to move around the site but had not had any reason or right, to go into apparently empty caravans.

7.1.31. The victims were also seen periodically by other health professionals. The review of Primary Care records found that most of the victims were very infrequent attenders to their GP. There was one occasion when a GP record stated:

> *'he says he was abducted by gypsies … he comes up with a very strange story of being abducted by travellers and being made to work'*

7.1.32. This statement does not appear to have led to any further questioning or action. Fortunately, the victim involved had already been referred through the NRM and was attending the GP in their relocated area. Nonetheless, the GP was not aware of this and the author of the GP report

[17] At the time this was under duties within the National Assistance Act 1948.

identified a need for training. Other than this instance, the author of the GP report could find no specific missed opportunity to identify and report suspicions of modern slavery. The author did however identify a general lack of professional curiosity to ask further questions about home conditions, the appearance of self-neglect and alcohol use.

7.1.33. Victims also attended LCHS minor injuries clinics, ULHT A&E and inpatient care. A key aspect of learning for LCHS was that interpreters were not accessed when they should have been, which limited communication and the opportunity for purposeful questioning which may have led to disclosure.

7.1.34. There were occasions when victims attended A&E with various work-related injuries and were often accompanied by members of Family A. What is now known is that these injuries were likely to have been sustained as a consequence of very poor working conditions – men such as Fred, who was overworked and did not have training or the necessary equipment.

7.1.35. However, care must be taken to avoid hindsight bias. Attendances at A&E with work injuries are not unusual where viable explanations are given for injuries – nor is the fact that labourers appear unkempt or that they are accompanied by someone else. Similarly, regular attendances to A&E by adults with homelessness, alcohol and drug related conditions or injuries are unfortunately very common, as is a pattern of non-engagement with follow on care. Attendances were in general sporadic. The ULHT electronic record system does not link addresses and so patterns of attendances from Site A or Site B would not have been flagged – a manual check carried out for the review did not reveal a pattern linking the victims to Site A, Site B or Family A.

7.1.36. ULHT did however identify occasions where there were clear indicators of concern but staff did not demonstrate the professional curiosity that was expected of them.

7.1.37. During 2013, Charlie K had eleven attendances to A&E with chest pains and on two occasions, with injuries related to falls. Bruising of different ages and repeat attendances within three days, should have triggered further enquiry about his circumstances. Other potential signs could be where labourers involved in industrial accident do not have any form of protective clothing or employment card. The ULHT author highlighted that the Trust's record keeping system prevented staff collating histories from patients that may flag concerns. However, in this instance, the ULHT author's view is that even had records flagged repeat admissions, staff may still not have made the necessary further enquiry.

7.1.38. The other incident where ULHT identified learning related to Gerek:

> *Gerek came into A&E with diarrhoea and sickness having not eaten for four days. He was accompanied by a 'friend' who helped to complete forms. This friend is now known to be a member of Family A and was also referred to in UHLT notes as the work boss and then later as Gerek's cousin. Gerek had limited English.*
>
> *The member of Family A acted as interpreter and gave a history that Gerek had stopped drinking and was being cared for by Family A. He asked for Gerek to receive a shower before being discharged. Gerek had four days of inpatient care for alcohol withdrawal – he was 'discharged back to GP' though was not registered with any GP and had no plan in place to*

manage aftercare.

7.1.39. Although Family A gave a plausible explanation for Gerek's presentation, in retrospect, there were also some factors that should have triggered further questioning. ULHT also identified learning around the need to use an interpreter and have an effective discharge plan.

7.1.40. The Probation Service also identified interactions with Gerek that should have led to further questioning. Gerek was due to appear in Court for charges of possession of a shotgun with no license – found under his caravan bed by Police executing a search warrant of Site A. The Probation Officer compiling the pre-sentence report suspected he was accepting guilt on behalf of another and was concerned when Gerek told them he was working for Family A for £10 a day. However, they made no further enquiry as Gerek said he was cared for and received food. The following section discusses the positive work by the NPS that subsequently helped Gerek to be rescued. However, at this stage, NPS identified a lack of critical thinking to uncover his abuse.

7.1.41. There were some examples given by agencies, that suggested a culture of resignation about Family A's behaviours and a general sense that their behaviours were to be managed rather than tackled. Their manipulation and control of 'workers' on the sites was part of this picture. Agencies noted comments made such as '*that's the [Family A] way – there's not a lot we can do'* that may have had a distorting effect on seeing the abuse for what is was.

7.1.42. Police also identified learning relevant to 'Hidden but in Sight.' Prior to Operation Pottery, officers were aware of Family A's activities as an organised crime group and were investigating them as part of a national operation. They responded efficiently to reports of rogue trading type offences, disrupting suspected perpetrators and protecting the victims.

7.1.43. It was during an investigation of rogue trading that Police took video footage of Charlie K and Benedik. Though Police commented that they appeared dishevelled, thin and tired, at the time they did not consider that the workers may also be victims – they viewed them through a lens linked to the task in hand. It was not until this information was brought together under Operation Pottery that the video footage was viewed from a different perspective and Charlie K and Bendik were recognised as victims as well as suspected offenders.

7.1.44. These incidents of rogue trading also highlighted the lack of awareness of modern slavery that the public had at that time. Once Operation Pottery was underway, the Operation Pottery investigation team traced members of the public who had had building work carried out by Family A. There were examples of people sharing concerns they had had about the apparent state of neglect of the labourers completing work. Despite this, they had not reported their concerns to the Police or through Safeguarding Adults procedures. This pre-dated the Home Office marketing campaign to increase public awareness of modern slavery[18] and at that time, there were no dedicated communication routes for agencies and public to pass on soft intelligence – this is considered further in this section.

[18] Home Office Modern Slavery marketing campaign evaluation report 2015 https://www.gov.uk/government/publications/modern-slavery-marketing-campaign-evaluation-report

7.1.45. Engaging the eyes and ears of local communities is a vital element of identifying hidden victims. The examples above demonstrate some occasions when professionals could reasonably have been expected to make further enquiry. However, the reality was that there were also many circumstances when even had professionals applied training, they were unlikely to have been able to identify victims of modern slavery.

7.1.46. LEARNING POINT:
Increasing the likelihood of identifying victims who may be hidden but in sight, does require professionals to be competent in identifying and acting on all forms of exploitation and abuse as well as understanding the specific circumstances that modern slavery presents. However, this alone is unlikely to make a substantial difference unless it is part of a much bigger community-based awareness campaign.

[Recommendation Arising]

7.1.47. The following section considers some examples where professionals did demonstrate vigilance and ask questions and considers this alongside blocks to disclosure.

- ## Blocks to Disclosure

7.1.48. In many ways, barriers to disclosure of modern slavery mirror what has been learned about disclosure of domestic violence.[19] Many agencies commented that '*nobody disclosed abuse to them.*' However, reliance on the victim stepping forward to disclose fails to recognise the significant barriers that victims need to overcome:

7.1.49. This section has outlined the vulnerability of victims and that the individuals may not have recognised themselves as victims. There were some good examples where professionals did identify concerns, tried to help victims recognise their exploitation and provide an opportunity to disclose:

Kevin lived on Site B and worked for Family A. The Street Outreach Team had found him

[19] Womens Aid: Why Won't Women Leave? Accessed July 2019
https://www.womensaid.org.uk/information-support/what-is-domestic-abuse/women-leave/

sleeping rough even though he had accommodation in Lincolnshire. Kevin told them he was too scared to return to his accommodation due to intimidation by a traveller family who he was working for. He spoke of being bullied to work for Family A. The team reported this to the police

7.1.50. Framework described the challenges for Street Outreach Teams, needing to be proactive and use opportunities to engage with individuals who may be reluctant to disclose any information about themselves. In this example they were successful in enabling Kevin to disclose, but when Police followed up and found him on Site A, Kevin retracted, saying he was happy to be there and wasn't being forced to do anything he didn't want to. Street Outreach Team helped Kevin to get set up in a new tenancy.

7.1.51. Kevin did return to Site A. This indicates the complex lives and difficult choices that people who are victims of Modern Slavery have and it can take several attempts to leave before breaking free.[20] Two years later Kevin was one of the victims found on Site A during the Operation Pottery enforcement action.

7.1.52. A further example of good practice related to Frank:

Frank had been working for Family A for a year when he attended a minor injuries walk-in centre complaining of rib and back pain from lifting a wheelbarrow onto a lorry a week ago. He had been seen at the time at the Emergency Department and discharged to see his GP. Frank advised he had had an appointment at the GP but that his employer would not let him attend. He told the practitioner he lived in a caravan at Site A with electricity and gas from a bottle and 2 meals a day but no wages. He was unkempt, tired and generally unwell. The practitioner from the walk-in centre was concerned about his presentation and talked to him about this. Frank did not want the Police to be contacted but agreed for a Safeguarding Adult referral to be made. The referral was made, stating concerns that he may be the victim of trafficking and servitude.

A multi-agency planning meeting followed. At the meeting Police informed attendees of the proposed action being planned under Operation Pottery. This was at the site Frank was at but would be some time off. The meeting planned the best way of engaging with Frank safely to offer support. The plan was to work through the GP as someone he had some contact with and could be seen without raising suspicions. The initial plan was for Police and Adult Social Care to attend the GP practice to meet with Frank. However, the GP was concerned about inviting Frank in under these pretences so saw him alone.

Frank retracted much of the information he had given at the walk-in centre, saying he was paid and provided with sufficient food. He declined offers to involve the Safeguarding Team or Police. The case was then closed.

Six months later, Frank was found at Site A on the first of the Operation Pottery enforcement

[20] Refuge: https://www.refuge.org.uk/our-work/forms-of-violence-and-abuse/domestic-violence/barriers-to-leaving/

days. He agreed to go to the reception centre and consented to a referral through the NRM that led to a positive Conclusive Grounds decision.

7.1.53. This extract demonstrates good vigilance by the Minor Injuries Clinic, collaboration and creative working to try and reach out to Frank. Unfortunately, the ACCW safeguarding practitioner had not had the opportunity to plan in detail with the GP and it was unclear how well the GP understood and conveyed the NRM process to Frank. As the author of the ACCW report noted:

'Services need to be clear in all situations where support is being offered what that support could look like and what options are available in order for the adult to make an informed choice. It is unclear if [Frank] was in a position to make a clear, informed decision regarding this choice at the time it was offered.'

7.1.54 The ACCW author also noted the need for greater analysis of why there were discrepancies between two descriptions given by Frank. This recognises the need to maintain an enquiring mind where allegations are apparently retracted, understanding the barriers victims may have to disclosure.

7.1.55. The Slavery and Trafficking Survivor Care Standards [21] reinforces the need to find creative ways to reach out to victims and build relationships so that the victim retains a sense of control and has confidence that disclosure will provide a safe alternative.

7.1.56. This was evidenced in the contacts with Police. Police Officers had multiple contacts with the victims when they were clearly concerned about them, asked questions about their wellbeing and circumstances and offered support. Over 50% of victims were given opportunities to disclose on at least one occasion prior to the Operation Pottery enforcement days.

7.1.57. However, the nature of the support being offered was not always tangible, particularly prior to Operation Pottery being established. As has been learned from victims of domestic violence, taking the momentous step to disclose, requires confidence that there is a viable and safe alternative and that disclosure will not make their circumstances worse.

7.1.58. The interview with Fred gave insights into this. The following extract is taken from the author's interview with Fred, discussing his arrest following cannabis seedlings found growing in his caravan:

Q. Would you have been able to tell the Police what was happening to you at the time?
A. No – [Family A] were in the same building
Q. What if the police said '[Fred] we are worried about you. We can take you to a safe place – would you go?
A. yes

7.1.59. There were also many occasions when victims would begin to disclose, but would retract soon

[21] Human Trafficking Foundation: The Slavery and Trafficking Survivor Care Standards 2018 Accessed June 2019 https://www.antislaverycommissioner.co.uk/media/1235/slavery-and-trafficking-survivor-care-standards.pdf

after and refuse to provide any statement. The author's interview with Charlie K gives some insights into the well-founded fear of Family A and the reasons victims may retract allegations:

'It was at midnight – I opened the caravan door and saw that no-one was watching'
Q. 'What made you decide to leave at that point?'
A. 'I'd had enough – how they were threatening me and not giving me what I wanted. I hadn't washed and had a beard. The next day three of [Family A] came in a van to [Cs] flat. The door-bell went – I didn't look out the window first and opened the door. Three of them just walked into the flat. [Family A] threatened to throw me through the window if I didn't come with him. He said "[Charlie K] come to the car I want to have a word with you" My heart was beating. Luckily my friend's daughter [R] was there. She came out and saw me crying in the back of the car and said "[Charlie K] come out of that car." We went to the neighbour's house and the neighbour phoned the police. The three [Family A] ran off. I told the police what had happened – that they had taken my car and they were making me do jobs. I asked them to help me get my bank card back but they said I would need to go back to the Site B with them to do this – I didn't want to do that. They would twist everything and get off.'

7.1.60 Despite Police efforts on the day, Charlie K refused to make any statement and retracted the original allegation. He did however report that incident to the investigation team during the interviews which followed the initial enforcement.

7.1.61.

LEARNING POINT:
There is a need to recognise the barriers to disclosure that victims face and for this to inform responses to modern slavery. Practitioners need to recognise the reasons why victims may partially disclose, retract or provide different accounts of their situation.
Practitioners need to understand the reasons why victims may stay or return to an apparently abusive situation and that victims are unlikely to disclose unless they feel safe to do so and have information about viable alternatives and be able to make informed choices to manage their safety.

[Recommendation Arising]

7.1.62. P3, Lincolnshire's street outreach provider also recognised the tenuous circumstances where a person may disclose, but if help is not immediately available, the opportunity is lost. They recalled an incident (unconnected to Operation Pottery) where their outreach service found a man sleeping under a bridge. He was from outside the European Union and had no recourse to funds. He disclosed having been trafficked from abroad and enslaved in Lincolnshire. He had fled and had been sleeping rough. In the time between referring him through the NRM and a Reasonable Grounds decision being reached (five-day period), there was no funded support available. He had nowhere to go so returned to sleeping under the bridge, risking him being found again by exploiters or moving on.

7.1.63.

LEARNING POINT:
There is a gap in the support available to victims at the crucial point of disclosure and their consent to a referral through the NRM but prior to a Reasonable Grounds decision being

reached.

This may risk losing the person's confidence and miss a window of opportunity to intervene.
[Recommendation Arising]

7.1.64. ULHT and LCHS identified learning in the use of interpreters to aide communication – as noted in the section above. This also exemplified that using accompanying 'friends' or family to translate presented a significant barrier to victims being able to disclose abuse. Policies were in place directing the use of interpreters rather than friends or family members – they hadn't been used.

7.1.65. LEARNING POINT:
Agencies need to be assured that practitioners recognise the risks associated with using friends and family members as interpreters and are applying agency policies.

7.1.66. The fact that many of the victims were implicated in the criminal activity of Family A served as a further barrier to them being able to seek help from Police. One victim described the appalling conditions in which he carried out fraudulent activity:

"At one job I had to sit in the loft of this old man's house yeah I did, literally by threat I had to sit in his loft with a hammer doing that all day every day, for days.
POLICE: What for?
Because he told, [Family A] told me to, he said just bang, bang, bang, bang nails into all the wood and that.
POLICE: To make them think you were doing the roof?
That's pretty much it yeah."

7.1.67. Gerek's experience demonstrates well the good practice of Police, Probation and Adult Care and Community Wellbeing that enabled his disclosure and eventual consent to referral through the NRM:

Gerek had been arrested for possession of a shot gun. The Custody Officer believed he was being exploited so refused bail for his own protection prior to appearing at Court the next day.

Following sentencing, Gerek had an induction meeting with his Probation Officer – he was accompanied by a member of Family A member who wanted to remain with him. This was refused. The Probation Officer used an interpreter to explain to Gerek she was concerned for him due to Family A's apparent surveillance and due to Gerek appearing to be very thin, filthy and inadequately dressed for winter.

The Probation Officer escalated their concerns through Safeguarding Adults Procedures and the Police and multi-agency planning meetings were held. When Gerek breached his probation order for Unpaid Work, a decision was taken to seek a supervision order. This would enable closer contact with him.

Six weeks later, Gerek attended a pre-arranged Probation appointment. A member of Family A was waiting for him in the probation office reception area. Police attended that appointment and spoke to Gerek about leaving the site to live in alternative accommodation. He agreed and was referred to UKHTC.

7.1.68. As noted in section 7.1.12, Gerek did not identify himself as a victim. However, this multi-agency work demonstrates successful efforts to overcome barriers to disclosure

- ✓ Good recognition of signs of modern slavery.
- ✓ Being creative and seeking opportunities to engage Gerek and encourage his awareness of the abusive situation.
- ✓ Seeing Gerek, on his own in a safe place.
- ✓ Use of an interpreter to enable effective communication.
- ✓ Appropriate use of authority to help build confidence.
- ✓ Providing information to enable choice.
- ✓ Presenting viable and tangible alternatives.

- Effective Multi-agency Working

7.1.69. Given the hidden nature of modern slavery and the barriers that victims face to disclosure, multi-agency working is crucial to bring together intelligence held by different partners and agree collective responses to reduce risks.

7.1.70. Many of the agencies contributing to this review commented that at the time, the systems for sharing intelligence were not sufficiently developed. One agency summed this up:

"At the time of Trust contact with the involved individuals, there was no effective method or system in place which made it easy to communicate with colleagues in the police and social care. This made it difficult to gain a combined multi-agency understanding of the concerns and co-ordinate an effective joined up response… Referrals may have been attempted to LCC adult safeguarding however the staff would potentially not have had sufficient information to meet threshold for adult social care involvement."

LCHS Narrative Report

7.1.71. Lincolnshire Property Services felt that there were no mechanisms to share information about emerging concerns on Site B and that a stronger multi-agency response was needed regarding tackling the challenging culture on the site at that time. The Health Visitor and School Nurse, reported it was often difficult to locate the Site Facilities Team or to find their contact numbers.

7.1.72. Homelessness workers had informal mechanisms to share intelligence within their sector but no formalised systems or forums to discuss emerging concerns with key partner agencies.

7.1.73. Use of multi-agency forums focused on community safety and management may have enabled improved sharing of emerging concerns and collective solution focused protective action, for example under The Anti-Social Behaviour, Crime and Policing Act 2014.[22]

7.1.74. The response to one victim demonstrates the important role that the public and faith groups can contribute to the multi-agency response:

Adek had been living on Site A, working for Family A. In 2014, a member of the public called the Police having found Adek in their garden. Adek had told them he worked for gypsies but had not been given any money, only a sandwich and asked for spare food or money. When Police located him, Adek told the officers he had gone to Site A willingly but had to beg as Family A were no longer paying him. He told the officers that he was ok and had arranged with friends to leave the site the following morning.

Three days later, a member of staff from a local church reported to Lincolnshire Police that Adek and another male were being kept against their will at Site A and forced to work for no or little pay and are being beaten up if they try to escape. Adek had approached this church worker on four occasions for food and money. The church had helped him leave the site by putting him on a train to a destination out of Lincolnshire.

7.1.75. While the Church provided a supportive response to Adek, they didn't report this information to the Police until two days after Adek had left. The Operation Pottery investigation team did manage to locate Adek two weeks later. He was interviewed by the team and agreed to a referral through the NRM which led to a positive Conclusive Grounds decision being reached.

7.1.76. This learning would apply equally across other community organisations that are in a position to identify and respond to victims. Statutory agencies such as Housing, Fire and Rescue and DWP; third sector organisations and businesses - all can make a vital contribution where there is an understanding of signs of modern slavery and a ready mechanism to share those concerns.

7.1.77. Safeguarding Adults procedures do provide this function and Multi-Agency Safeguarding Hubs[23] are used effectively in some areas to improve how agencies draw intelligence together and make decisions about response to safeguarding concerns. However, this would not meet the need for a referral point for low level 'soft intelligence' that fell outside of criteria for Safeguarding Adults procedures.

7.1.78. LEARNING POINT:
The lack of clear communication points for agencies and members of the public to share low level or emerging concerns (that would not meet Safeguarding Adult referral criteria) limited the ability to gather emerging intelligence about modern slavery.

Multi-agency forums can provide a mechanism to share risks and develop joint solutions to community safety. Such forums were not available or not used by key agencies who were

[22] The Anti-social Behaviour, Crime and Policing Act 2014 gave more effective powers to tackle anti-social behaviour that provide better protection for victims and communities https://www.gov.uk/government/collections/anti-social-behaviour-crime-and-police-bill
[23] https://www.gov.uk/government/news/working-together-to-safeguard-children-multi-agency-safeguarding-hubs

working with people living in risky communities.

[Recommendation Arising]

7.1.79. Danny was another victim that involved a multi-agency response before the Operation Pottery enforcement days.

Danny's background as a troubled young person was described in 7.1.11. Danny's LPFT CAMHS and Leaving Care practitioners worked hard to sustain engagement with him and used opportunities when he was more amenable, to try and build his life away from Family A.

In 2012, the manager of Leaving Care Team became concerned about Family A's manipulation and exploitation of young Care Leavers – Danny was one of those young people. There were two multi-agency meetings between his Leaving Care worker, the supported accommodation provider and Police to share information as part of a protection plan.

When Danny subsequently moved onto Site A, the Council Property Service staff member advised the Leaving Care worker not to visit alone. This appears to have been interpreted as advising against visiting at all as Danny was then only seen off site.

Late in 2013, Danny presented himself at the Leaving Care Office with a swollen and cut eye and reported that he was running away from Site A. He said that Family A had taken his bank card and money and that he was watched constantly and had been a virtual prisoner. They had not let him shower for a month and he only had the clothes he was wearing. He fled following a beating and was very worried that Family A would seek him out.

There was no referral made through Lincolnshire's Safeguarding Adult procedures and Danny did not want the matter reported to the Police due to fear of repercussions. An intelligence report was made to the Police following the earlier agreement to share information. Danny was supported to move to another county – Local Authority X. Lincolnshire Police tasked the intelligence unit in the area of Local Authority X but unfortunately there are no records of what follow up was made by Police in either area.

A year later in 2014, a paramedic from the Ambulance Service was attending Danny due to further problems with the management of his diabetes. The paramedic noticed some bruising and cigarette burns of different ages to Danny's body. Danny told them someone had tried to set him on fire two months ago but he would not name the person and was defensive about his injuries. The paramedic made a referral to the Local Authority X Safeguarding Adults team. The Local Authority X Safeguarding Adults team sent Danny a letter giving him details about how to contact Adult Social Care if he wished. This letter was not responded to and the referral was closed.

Seven months later in 2015, Danny was interviewed by the Operation Pottery investigation team and consented to a referral through the NRM and the UKHTC made a positive Conclusive Grounds decision that he had been trafficked. Danny continues to live a troubled and chaotic lifestyle.

7.1.80. This extract demonstrates some of the challenges in multi-agency working. The authors of the agency reports recognised the good practice between Police, Leaving Care and LPFT CAMHS workers, trying to work creatively to sustain engagement and provide some consistency in Danny's life in very challenging conditions. However, learning points were also identified:

I. The cautionary message from the Council Property Service staff member not to visit Site A alone, should have raised further questions about the conditions on the site for Danny and others rather than simply stopping visiting him there.

II. Safeguarding Adult procedures do not seem to have been considered when Danny was assaulted in 2013 – seeking his consent and considering grounds to refer without consent. Safeguarding Adults procedures may have added structure and coordination to the protection plan, for example notifying key agencies such as Adult Social Care and GP in the area Danny was moving to in case he presented with further concerns there.

III. Local Authority X Safeguarding Adult Team, when responding to the safeguarding referral in 2014, did not seek out further information to inform their response. Had key agencies such as the GP had safeguarding concerns flagged on their records, (as a consequence of ii above) this may have identified level of risk and vulnerabilities. This may have indicated a more proactive response was required, recognising Danny's judgement may be affected by the coercion and control he had experienced.

7.1.81.

LEARNING POINT:
Responses to working with capacitous adults who were resistant to accepting support were not well developed. The impact of coercion and control was not always considered and weighed when making decisions about risks, consent and proportionate responses.
[Recommendation Arising]

7.1.82. This case also highlights the potential benefit of flagging in records where safeguarding risks and vulnerabilities are known. This was demonstrated well by Police in their work with Jack.

Jack was known to the Police in connection to rogue trading offences while working for Family A. He was also known to homelessness services and the Council who supported him to secure a tenancy though unfortunately he was unable to maintain his new tenancy.

Prior to the first of the Operation Pottery enforcement days, the Operation Pottery officers were concerned about Jack and offered him referral through the NRM. Jack declined saying he was fine and had not been threatened. The Police Officer created an incident to flag to other officers in case he came to their attention and if Jack changed his mind about referral through the NRM.

On the first of the enforcement days, Jack was located at a homeless hostel and agreed to go to the Reception Centre and to be referred through the NRM.

7.1.83. LEARNING POINT:
The system of flagging vulnerabilities and known risks to modern slavery within agency records can improve communication within and between agencies, enabling more effective preventative and protective responses.

7.1.84. Once Operation Pottery was established, early in 2014, the Operation Pottery investigation team began the immense task of bringing together information involving sixty potential victims; multiple locations, covering a period of many years and interactions with many agencies. The size of this work and dedication by the small team of officers tracking and collating information cannot be under estimated and an independent review by the National Police Chief's Council commended this work.[24]

7.1.85. This work came together in the enforcement stages of Operation Pottery. This phase is the focus of next section.

7.2. Key Stage 2: Safeguarding the Victims – The Reception Centre

7.2.1. As the Operation Pottery team investigations uncovered the extent of exploitation and the barriers to victims disclosing, they recognised they had to try a different tack to protect them.

7.2.2. Their plan was for a series of large-scale enforcement days using the body of evidence accrued to serve warrants on Family A. This was to occur simultaneously with offers to take the victims to a place of safety where they could be protected, cared for and be able to make informed choices about accepting a referral through the NRM.

7.2.3. A Reception Centre was set up to act as the place of safety. The Senior Investigating Officer (SIO) described this as new territory for them all. Even though they enlisted the help of the National Crime Agency (NCA), they described learning as they went along.

7.2.4. The planning that was required for this first enforcement day meant it took some months to set up. This raises a question of whether there was an opportunity to act earlier than Autumn 2014, given that in the months leading up to this point, concerns for the remaining victims were increasing as allegations and some further disclosures were made.

7.2.5. The Police report author described the extensive pre-planning and resourcing that went into such a large operation to maximise the likelihood of successful outcomes for the victims.

There were seven locations to target simultaneously, in two police force areas, collating vast amounts of intelligence and identifying persons at risk, gathering evidence, pre-planning for the reception centre, co-ordinating a number of agencies and assets to name but a few examples.

[24] Review carried out by National Police Chief's Council Modern Slavery Transformation Programme What Works team.

[The decision on the timing of the enforcement day] was not a decision taken lightly by the SIO and rationale for the timing is recorded and supported by Chief Officer Group/Gold Command.

7.2.6. The planning of this phase was managed under a Gold Command structure.[25] This is a structure used for major operations by emergency services and partner agencies to coordinate a multi-agency response; Gold Command leading the overarching strategic response and Silver providing the tactical response.

7.2.7. There were two Gold Command meetings prior to the first enforcement day. Key agencies attended the Gold Command with the Police taking the lead role. These included District Council; Adult Safeguarding; NHS England; Fire and Rescue; Ambulance; Chair of the Safeguarding Children's Board; Safer Communities (Lincolnshire County Council); Health and Safety Executive; UKHTC. Tactical Silver meetings were also set up to take forward the strategy.

7.2.8. It is notable that the NCA stated that the Reception Centre was the best that they had seen. As the examples below demonstrate, the care provided would stand up well against the latest care standards for victims[26] even though there were no such standards in place at that time.

7.2.9. Each victim had been allocated a named Victim Contact Officer from the Operation Pottery investigation team who was responsible for locating a named victim on the sites (or other locations) and giving them information to make choices about going to the Reception Centre. This officer stayed with the victim throughout.

7.2.10. On arrival at the Reception Centre, victims were provided with information about what was available. Time and attention were given to providing a caring and nurturing response. This was in line with the Trauma-Informed Code of Conduct[27] and included basic essentials such as choices of food, new clothes, a shower, cigarettes as well as items such as a phone loaded with credit.

7.2.11. Within the Reception Centre, there was a Forensic Medical Practitioner; Health Care Professionals from LCHS and LPFT including Advanced Practitioners, Doctors, a Mental Health Nurse and specialist in Drug and Alcohol Abuse, a Principle Practitioner from ACCW Safeguarding and a Borough Council Housing Officer. Off site, other health professionals such as Dentists, Podiatrists, Psychiatrist and Acute Care Doctor were on call. In addition, there were interpreters and representatives from Salvation Army and Red Cross who could talk about options for support and what would be available for those under the NRM with a Reasonable Grounds decision.

7.2.12. Agencies agreed this was meticulously planned and a very good example of multi-agency working with practitioners supporting each other in their roles to address the needs of the individuals brought to the centre. The strongest evaluation however is through the experience of victims:

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[25] https://www.app.college.police.uk/app-content/operations/command-and-control/command-structures/

[26] Human Trafficking Foundation: The Slavery and Trafficking Survivor Care Standards 2018 Accessed June 2019 https://www.antislaverycommissioner.co.uk/media/1235/slavery-and-trafficking-survivor-care-standards.pdf

[27] Ibid

Fred still clearly recalls 'the day the police came with the bus.' He remembers that the Police had spent time talking to him, explaining what they were doing there and asking if he wanted to go with them to the Reception Centre. Fred remembers there were lots of people at the Reception Centre. He was offered a shower and food – 'we all wanted to go and have a shower' and given spare clothes. Fred smiles when he says he still has these and still wears them.

Fred described how 'at first I did worry I would have to go back to the site' and that it took a while to build trust. He felt he was involved in decisions and listened to and supported throughout by his Police Victim Contact Officer. He was supported by Salvation Army to think about where he wanted to be relocated. 'I'm glad the Police came that day in the bus.'

7.2.13. There are inevitably also areas of learning for how such an operation could be improved in the future. Some were identified in a de-brief session and others have come to light through this review. The Gold Command was led by the Police but each member agency had a responsibility to contribute the knowledge and expertise from their sector.

- **Membership of Gold and Silver Command**

7.2.14. The plan for the enforcement action was necessarily highly restricted. Each agency had to identify their most appropriate senior representative to attend the Gold Command and cascade information through tactical Silver level. Designated individuals are usually identified within their organisations as part of emergency planning arrangements. It would have been important for these representatives to have had sufficient knowledge of modern slavery and safeguarding adults to be able to contribute expertise from their agency perspective as well as the authority to allocate necessary resources.

7.2.15. Similarly, at tactical Silver level, those implementing the plan, would need the relevant expertise to work out the detail of what needed to happen and ensure that practitioners in attendance were clear of their role and remit. There do appear to have been numerous tactical Silver meetings but the detail cannot be confirmed as it appears these meetings were not minuted.

7.2.16. The level of concealment required for this covert operation, meant that within organisations only a very few were aware of the planned enforcement day. Although LPFT provided a mental health nurse practitioner to aide assessments at the Reception Centre, the LPFT safeguarding team were unaware of the operation and were not therefore able to add their expertise or call on resources that they were able to access within their safeguarding role. The ULHT safeguarding team were also not made aware.

7.2.17. ACCW identified that they should have had more senior representation at the Gold Command meeting. The practitioner who was present on the day remained unclear about what they were being asked to do.

- **Care, Support and Resources**

7.2.18. It is clear that within Gold Command, safeguarding the victims was the priority. Understandably at

this stage, the focus of the planning was on managing the victims' immediate care needs when they arrived at the Reception Centre. The records indicate there was good collaboration between agencies and allocation of resources to this end. However, the strategy also needed to consider the 'what next'? How would the agencies work together to meet the medium and long-term needs of the victims and where would this be addressed once Gold Command had been disbanded?

7.2.19. Had this been established, this may have given the practitioners at the Reception Centre a clearer understanding of their roles and responsibilities on the day and what their agencies' commitment was for the medium and longer term.

7.2.20. The ACCW Principle Practitioner was asked to carry out capacity assessments relating to victims' ability to consent to interview and capacity for finances. They reported this was very challenging given the crisis circumstances of the victims although recognised the necessity due to the Police plans to interview victims that day.

7.2.21. It appears there were some mis-understandings between agencies about what could be achieved at this time i.e. whether the focus was for immediate support or eligibility assessments for ongoing care, treatment and support. Police requested the Mental Health Nurse and ACCW Principle Practitioner to carry out assessments. The Police were attempting to establish that the victims were i) fit for interview and ii) had capacity to make relevant decisions. Having reviewed the records, their presumption had been that the victims would be eligible for support from services. However, ACCW carried out assessment for care and support needs and found eligibility criteria were not met.

7.2.22. Given the turmoil of the Reception Centre and the crisis circumstances that the victims had come through, there was a question of whether it was reasonable to reach any conclusion on eligibility on this day.

7.2.23. The ACCW report author noted that ACCW practitioners will often highlight if a review of an assessment is needed. However, these were unusual circumstances and many of the victims were being relocated to secret locations making arrangements for a reassessment difficult. The Salvation Army is contracted to provide support during the NRM period, to refer victims into services where necessary. However, this is only for a 45-day period and for many, their needs may not be immediately apparent. It appears that for many of the victims the Police took a significant role in advocating for victims, referring for specialist assessments in order to access the necessary aftercare.

7.2.24. The Survivor Care Standards[28] sets out the need for an initial risk assessment and management plan; a more in-depth needs assessment when it is safe and appropriate to do so and then a Survivor Support Plan that serves as a blueprint for how survivors will be supported. The need for this phased care planning is reflected in the learning from this review.

7.2.25. The Gold Command structure is also about mobilising the necessary resources, recognising the extra ordinary circumstances may require agencies to step beyond their remit and standard operating procedures. Section 7.3. comments on the follow-on care of victims. Potentially, some

[28] Ibid

of the difficulties raised could have been averted had there been clearer sign up by agencies to aftercare arrangements in these earlier planning phases.

7.2.26. The Police report author noted that the Gold group structure was discontinued following the first phase of enforcement. Their view was that given the complex and lengthy nature of Operation Pottery, it would have benefitted from a longer period of the Gold Command structure.

- **Communications and Information Sharing**

7.2.27. All agencies were clear about the security requirements of the operation. Records that were taken were hand written and kept by Police; blood samples that were sent into the hospital were anonymised. All victims were given written follow up letters to be handed to their new GPs identifying the follow up care they would require. The plan was for their Victim Contact Officer to pass this on to the new health care providers.

7.2.28. However, the review found that in many cases, information arising from assessments was not transferred into the agency's record system or where it was, the information remained in secure retention so that it was not accessible to wider practitioners. These steps were necessary during this initial restricted phase, however, there was no agreed plan for when the covert requirements could end.

7.2.29. Consequently, some of the partner agencies reported that very little information was known by their agencies about the victims until this review began years later. The implications of this are considered further in section 7.3.

7.2.30. The ACCW Principle Practitioner also commented that in their opinion, ACCW were not familiar with their role as 1st responder under the NRM process. The practitioner was not familiar with the documentation and the areas that the Competent Authority would be assessing under the Reasonable Grounds decision. Had they been more familiar with the assessment areas, this would have made handover process to the Competent Authority smoother and minimised repetition for the victims.

7.2.31. The covert nature of the operation, also meant that staff were very limited in who they could talk to for their own emotional support. There was a debrief/lessons learned meeting for all involved but again, records were held securely. One practitioner commented on the emotional impact the work had had on them. They reported that the Police were very good at checking how everyone was. The practitioner had tried to provide emotional support to a member of staff within their organisation but had not received any such support for themselves.

- **Practicalities**

7.2.32. The de-brief/lessons learned meeting did identify some practical measures to be addressed in the planning stages for such a large operation. In summary these included:

- Agree funding for health treatments such as emergency/immediate dentistry and provision for them to attend the reception centre.
- Agree anonymity for victims attending hospital appointments.

- Identify a local pharmacist to supply medications.
- Caution required in offering food where malnutrition may be a factor i.e. 'refeeding' plan.
- Reception Centre requires spaces for confidential discussions and medical assessments.
- Practitioners require mobile phones.
- Practitioners need access to IT systems within organisations.
- Some medications to be available on site.
- Need to minimise numbers of practitioners in view at point of arrival of the victims.

7.2.33. The learning from the Reception Centre phase highlights the complex circumstances that agencies were in, with very little guidance.

7.2.34. LCHS had used an operational procedure for Operation Pottery that they had adapted from another Health Trust who had been involved in a Modern Slavery recovery. They reported this had been enormously helpful in what was a very challenging situation.

7.2.35. A multi-agency guide and checklist has been valuable in other large scale safeguarding related operations where detailed planning is needed at strategic level as well as micro level for the care of an individual.[29] A similar format would be beneficial to guide large scale modern slavery multi-agency responses.

7.2.36 The Police report also identified that there were a number of children on the traveller's site. Although there had not been specific safeguarding concerns identified relating to the children, they may have been exposed to the mistreatment of the adult victims. There were no records from the planning process to suggest that the welfare of children during the investigation and criminal proceedings were explicitly considered.

7.2.37.

LEARNING POINTS:
Gold and Silver Command provided the structure to manage a very complex multi-agency response. Each agency needed to assure their representatives had the necessary authority to commit resources; competence relating to safeguarding and modern slavery and the ability to communicate effectively within their own agency.

The use of the Reception Centre was of immense value in enabling victims to break free. The meticulous planning provided an exceptional response to victims. Such a large-scale operation would have benefitted from multi-agency guidance and checklists to guide each agency in delivering the best care to victims.

Strategic planning, following on from Gold Command, was needed to co-ordinate responses and commit resources for the short/medium- and longer-term care of victims. This is likely to have provided more robust multi-agency responses to the victims' aftercare.

A communications strategy would have clarified when information had to be held in tight

[29] LGiU/ADASS/LGA/DH, (2015) Managing Care Home Closures a Good Practice Guide for Local Authorities, Clinical Commissioning Groups, NHS England, CQC, Providers and Partners https://www.nhs.uk/NHSEngland/keogh-review/Documents/quick-guides/1577_QuickGuide-CareHomes_9.pdf

security and when these covert arrangements could end so that information held about the victims, could be shared with those delivering care.

Each agency needs to be aware of the emotional impact on staff who are involved in large scale, covert operations of a traumatic nature - de-briefing and follow on support is part of the expected duty of care toward staff.

As in every circumstance, safeguarding children needed to be explicitly considered.

[Recommendation Arising]

7.3. Key Stage 3: Safeguarding the Victims - Restorative Care

7.3.1. This section of the report considers
1. Restoration through the Courts
2. Restoration through aftercare services

- Restoration Through the Courts

7.3.2. The prospect of giving evidence in Court must have been incredibly intimidating for victims. For some, their substance dependence, poor mental health or learning disability added challenges to giving evidence. What was common to all was the fear that Family A that had instilled in them. It required enormous courage to give evidence and great confidence in those that were supporting them.

7.3.3. Police, alongside their risk assessments for each victim, had arranged further psychological assessments for some of the victims to assess the impact of any cognitive impairment and support needed to give evidence. Fred was a good example of this:

Fred was assessed by a Psychologist and then a Registered Intermediary. A Registered Intermediary and Special Measures were used to enable Fred to give best evidence at Court. Fred recalls having the option of giving evidence by video link or from behind a screen – he chose screen. Fred met the prosecutors beforehand which helped –he felt it would also have been helpful him if he had been able to meet the Judge in advance of giving evidence.

7.3.4. All the victims were also supported by their dedicated named officer from the small Operation Pottery team and, for the first trial process, had additional support from a Persons At Risk Unit (PARU) Police Officer.

7.3.5. These officers had forged strong relationships with the victims, and supported them before, during and well beyond the Court hearings. A Registered Intermediary who was present during the author's interview with Charlie K commented that the level of support from the Police was the best they had ever seen.

7.3.6. The Intermediary described Charlie K as a very frightened man at that time. As with all the victims, in the lead up to the trial, his PARU Officer stayed with him in his hotel, recognising the well-founded fear of Family A and the risk they still presented.

7.3.7. The review also identified that professionals were also fearful about giving evidence. Family A were renowned within the County and had a reputation for violence. Police reported they were skilled at eliciting information from practitioners during apparently innocent chat – drawing out information about where they lived or where their children went to school. In the build up to the trial, Police Officers from the Operation Pottery investigation team had been targeted and threatened by Family A.

7.3.8. Some practitioners felt unable to give evidence in Court. Police endeavoured to provide some protection, for example, the opportunity to give evidence behind a screen. However, for some practitioners, particularly those working in relatively isolated areas or in easily identifiable roles, they refused to give evidence in Court. This was particularly difficult for the Police who had been reliant on some of these testimonies.

7.3.9. One ACCW Principle Practitioner had agreed to give evidence but was alarmed when Police advised her to warn her family – she hadn't anticipated putting family at risk. The practitioner did go on to give evidence but felt that multi-agency planning processes needed to consider risk to staff and the support they required.

7.3.10. The level of support empowered the victims to give evidence and achieve some restoration through the sentences passed down to Family A. Victims were also provided with information about compensation and some received significant payments arising from the Proceeds of Crime Act 2002.[30] As one victim commented:

> *'I'm very happy that they were finally caught and that they will be punished, just as they punished me. I think that even if I would've gotten away and they were free, they would do this all over again, they would find someone else and make him/her go through the same thing as I did.'*

7.3.11.

LEARNING POINTS:

Giving evidence after years of enslavement is likely to take immense courage. Supporting individuals to give evidence requires detailed and sensitive care planning that meets the emotional, intellectual and practical measures required to achieve best evidence and support the victims' well-being. The arrangements, led by Police were an excellent example of this.

Agencies need to also consider the care and support needs of staff who are involved in complex and potentially traumatic cases and be mindful of their duty of care through provision of supervision and managerial support.

[Recommendation Arising]

[30] The Proceeds of Crime Act 2002 sets out the legislative scheme for the recovery of criminal assets with criminal confiscation being the most commonly used power https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/317904/Fact_Sheet_-_Overview_of_POCA__2_.pdf Accessed June 2019

- Restoration Through Aftercare Services

7.3.12. Anti-Slavery International reports[31] that '*protection and support for victims of trafficking in the UK is patchy, especially in the current climate of government cuts and cost-efficiency savings. There is no system to provide long-term support for all victims and many have to move out of a safe house before they have fully recovered from abuse and put their lives back on track…… Up to 34% of victims of slavery are estimated to be re-trafficked*'.

7.3.13. As outlined in section 4, where a victim has a Reasonable Grounds decision, the Salvation Army are contracted to provide services such as accommodation; legal advice; health care; counselling; support in obtaining education and employment and referral onto services. At the time of Operation Pottery, this period of entitled support was for forty-five days.

7.3.14. The review of the NRM has identified problems in each stage of the process[32]:

- Gaps in funded support prior to a Reasonable Grounds decision.
- Quality and speed of the Reasonable Grounds and Conclusive Grounds decision.
- The length of time the victim is supported.
- The quality and extent of support during the forty-five day period of reflection.
- The robustness of transitions beyond the forty-five day period of reflection toward restoring the person's wellbeing.

7.3.15. These problems were very evident for the victims of Family A. Their experiences highlight gaps in the timescales of what care was available and lack of coordinated care during and following the forty-five day period of entitled support. The author of the Police report commented:

> *'The victims removed from [Site A] were placed outside of Lincolnshire and it was left entirely to the police to link in and refer to the relevant agencies in the other areas to ensure the continued support that was necessary. This was a particular challenge to the investigating officers … however had this contact not been maintained and assistance provided, then the team considered it was highly likely that the victims would return to living a chaotic lifestyle and not be in a position to give evidence at any forthcoming trial.'*

7.3.16. For many of the victims referred through the NRM, the forty-five day period was a wholly inadequate response for people who had multiple needs and years of victimisation to start rebuilding their lives.

7.3.17. The following three examples of victims' experiences give some insights into the disjointed aftercare system that was in place and the heavy reliance on Police to coordinate care.

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[31] Anti-Slavery International https://www.antislavery.org/slavery-today/slavery-uk/ Accessed June 2019

[32] HM Government Guidance on the National referral mechanism reform (2018) https://www.gov.uk/government/publications/national-referral-mechanism-reform/national-referral-mechanism-reform

Charlie K was located by Police at the end of 2014 – he had already managed to leave Family A and got himself to another County, living in a Housing Association flat that had a link support worker. He accepted a referral through the NRM.

A referral was made at this point to Adult Social Care in the Local Authority where Charlie K had moved to. At that time, Charlie K did not require any help.

In 2017, Charlie K's PARU Officer visited him. Charlie K was living in very sparse conditions and told his Officer he was at point of eviction. The PARU Officer established that Charlie K had not been signing on for his unemployment benefit and so had accrued large rent arrears. Signing on was a very frightening experience for Charlie K. The DWP offices were in the centre of town and he would become very anxious if he saw any white vans. This triggered memories for him of the times with Family A and fears they were out looking for him.

Although there was a support worker linked to the Housing Association, it is not clear what role if any they had taken in supporting Charlie K to sort out his arrears. It does not appear that the support worker, or Charlie K's GP was aware of his history as a victim and the additional vulnerabilities arising from this.

The Operation Pottery investigation team Officer advocated on Charlie K's behalf with the Housing Association and DWP, escalating the matter to a DWP national contact. The PARU Officer also took Charlie K to his GP to get a letter supporting his inability to work.

This intervention successfully avoided Charlie's eviction, secured DLA and income support for him and achieved a backdated sum of £3000. Although in the past, Charlie K had struggled with alcohol and budgeting, he used this money to buy everything he needed for his flat.

In 2017, following the conviction of Family A, a Victim Liaison Officer from Probation was assigned to provide victim support services to him. The VLO tried to make contact with Charlie K through the Housing Association support worker but to date, has not been successful and no contact has been made.

Kevin was found on Site A during a later enforcement day in 2015. He was seen at the Reception Centre by LCHS staff who referred him for physical health treatments. They also referred to LPFT for a mental health assessment, and to substance misuse services. LPFT have no record of these referrals and so no follow-on support was provided.

Kevin was relocated and his PARU Officer referred him to support services in the area of relocation. The Officer worked with Kevin to engage him with substance misuse services and to register with a GP.

Two years later when Kevin decided he wanted to return to Lincolnshire, the PARU Officer assisted him and helped him transfer his GP and referred him to a LPFT Psychologist following giving evidence in Court. The PARU Officer also referred Kevin to ACCW and wrote to Housing, giving some of Kevin's history and advocating for priority in providing him with a tenancy. Kevin was given a tenancy and a package of support from ACCW

Sadly, Kevin died the following year. His PARU Officer helped with the funeral arrangements,

seeking assistance from the RAF as Kevin was ex-service personnel.

Colin had mild learning disabilities and alcohol dependency. He had lived on Site A under the control of Family A for many years. In 2013, a charity helped him find alternative accommodation in a Housing Association property within Lincolnshire.

Colin was located by the Operation Pottery investigation team at the end of 2014 and consented to a referral through the NRM. Shortly afterward, the Housing Association Officer was contacted by Police, concerned that Colin had received threatening phone calls from Family A. Colin was relocated until it was safe to return. The Housing Association Officer had not been aware of the risk factors surrounding Colin.

Five months later in 2015, the ACCW Safeguarding Team received a referral from the Salvation Army, concerned that Colin may be the victim of further financial abuse (no connection to Family A); this referral was considered and closed to the safeguarding team without further action.

The referral was passed through to the Safeguarding Lincolnshire Together multi-agency group.[33] They did not progress the referral as it appeared Colin had agreed to loan the money. It was also understood that Colin would be receiving support from LPFT who would be able to identify risks and re-refer if necessary. There is no record that Colin had any involvement with LPFT.

The ACCW report author reflected that the response 'fails to fully consider the vulnerability of a victim of modern slavery of further exploitation especially considering how de-skilled the victim may have become due to the period of time in isolation and without control of finances.'

A further safeguarding referral was made by Police seven months later due to further concerns over financial abuse. This referral did result in a Safeguarding Adults Enquiry being completed and Colin was supported to develop a safety plan. Police also referred Colin to LPFT Learning Disability team for a cognitive assessment. There was no record that the earlier safeguarding concerns were known about or considered as part of the cognitive assessment.

Two years later, following the sentencing of Family A in 2017, a Victim Liaison Officer was assigned and helped Colin with information about the offenders and their licence conditions. Colin was also advised about Criminal Injuries Compensation claims.

7.3.18. These examples demonstrate:

1. The significant care and support role provided by the Operation Pottery investigation team and PARU Officers.
2. The lack of any multi-agency coordinated care before, during and after the NRM period.

[33] Safeguarding Lincolnshire Together (SLT) consisted of representatives from LCC SG, mental health and Police. The SLT was a team where referrals to Adult Safeguarding that had been screened out, were assessed and, where appropriate, information researched and shared. This service is no longer in place.

3. The fact that key agencies were not aware of the history of modern slavery and did not take this into account when assessing vulnerabilities.

7.3.19. The Operation Pottery investigation team and PARU Officers are to be applauded for their contribution and the compassion shown in continuing to support victims well beyond the Court process, trying to plug gaps in the support being offered. The bigger question was why this role needed to be provided by Police Officers.

7.3.20. The ACCW report author commented that ACCW had a very limited role in the care of victims subsequent to the Reception Centre, based on the view that the victims had been appropriately safeguarded by the NRM process and were to be supported by the Salvation Army. The victim who was assessed did not meet eligibility criteria under section 18 of the Care Act and ACCW did not use powers under section 19 of the Care Act [34] to provide care – potentially as support from the Salvation Army would be provided through the NRM. Other agencies such as LPFT had similarly assessed that they did not have a mental illness. Had the Trust's safeguarding and mental capacity team been involved in the Reception Centre a wider perspective including trauma would have been considered and this may have been more useful to the process.

7.3.21. One of the victims had been relocated out of area and was in a Salvation Army Safe House. He was a foreign national who did not have leave to remain and so had no recourse to funds. At the end of the 45-day period, he had to leave the safe house. The Police had not been informed in advance that he was having to leave his accommodation and would be homeless. The PARU Officer eventually found him sleeping rough in a graveyard and contacted ACCW to ask for help. The Principle Practitioner recalled their frustrations in what resources were available from agencies to assist:

> *'I haven't felt so helpless in all my life. I felt quite guilty…. I'd been part of that process of taking him away to offer him a better life. Now one of those people was sleeping on a gravestone but having no recourse to do anything. I escalated to our county manager but this didn't make a difference……[at the Reception Centre] we assumed Reasonable Grounds decisions would be given but we didn't think enough about what next. I don't think this would be any different now. We need a resource list to use if this happens in Lincs but also if Lincs are called upon to assist people from other areas placed here.'*

7.3.22. As one of the review panel members commented *'Agencies were applying their ordinary response to extra ordinary circumstances*.'

7.3.23. The victims had lived in circumstances of complete dependency. Many were likely to have difficulty adjusting to independent living and had entrenched alcohol and drug dependence. Many would have recurring physical health problems as a result of their living conditions. Many were likely to have trauma from their experiences and need psychological care in stages[35] Many were at

[34] Section 19 of the Care Act provides a power to meet needs for care and support in relation to which no duty arises (within the limits stated in Sections 21-23; as well as Schedule 3 of the Nationality, Immigration and Asylum Act).

[35] The Helen Bamber Foundation (HBF) has adapted a 3-Stage Model of Therapy for survivors of trafficking and slavery 1. Stabilisation – Symptom Management 2. Trauma-focused Treatment 3. (Re) Integration. http://www.helenbamber.org/ Accessed June 2019

risk of further exploitation; particularly given the large compensation payments some had received.

7.3.24. Some agencies such as the National Probation Service, did step beyond their criteria to give additional support. Not all the victims were entitled to support through the Victim Contact Scheme. However, Probation decided to make a discretionary decision to offer this service to all victims. This was a laudable response and there were some good examples of the VCO working with the services in the area the victim had been relocated to. However, this support for victims is only available following sentencing – this was two and a half years after the victims had disclosed and accepted referral through the NRM. As can be seen from the examples above, there were many gaps in support.

7.3.25. One Borough Housing commented to the review that had they known about the circumstances of the victims, their Housing Officers could have provided many elements of the support that had fallen to Police Officers.

7.3.26. There was a need for all agencies to come together from the outset and agree additional measures in these exceptional circumstances so that the victims would have coordinated care during the NRM period and with a seamless transition through to longer term recovery.

7.3.27. The review asked whether agencies had any record on their systems to flag the fact that the victims had been subjected to modern slavery. There appeared to be learning about how information about the victims' experience of modern slavery was:

I. Communicated, and
II. Retained and used by agencies.

7.3.28. Although Police had records that they had notified relevant services, many agencies reported that they had no information on their systems or the information that was held, would not have enabled them to recognise the additional help victims may need.

7.3.29. One example was with GPs. During the Operation Pottery investigation, Police had requested access to GP patient records and provided information about the modern slavery concerns as justification. However, the CCG report author who reviewed the GP records found that in many cases, there was no reference on the GP system to the victim's history or that GPs had learned incidentally of their patient's history. Similarly, ULHT reported that until this review, they had been unaware of the victims' histories.

7.3.30. There was no confidence therefore that Health services would be alerted to the additional physical and mental health needs of victims and the need for vigilance given their heightened risks of re-trafficking.

7.3.31. Had there been commitment from the outset to a multi-agency shared care approach, this could have enabled:

- A named coordinator to develop a joined-up system of support across agencies and areas where the victim was relocated
- Phased care planning that was tailored around the victim's changing needs, from crisis responses at point of disclosure stepping down to 'light touch' support in the longer term

- Information to be shared with other agencies, with the victim's consent:
  I. Determining which agencies should be notified about the victims' circumstances and at what point.
  II. Agreeing what level of information agencies should be provided with in line with data protection requirements

7.3.32. At times of considerable resource pressures, all agencies are struggling to meet their core duties and may feel unable to step out beyond this. The experiences of victims exemplify the need for a national response that provides the policy direction and resources to enable the necessary aftercare for victims. Section 8 outlines some of the national changes since Operation Pottery and plans to improve aftercare.

7.3.33. Agencies contributing to this review recognised the gaps in the system of aftercare for victims of modern slavery and the need for change. Lincolnshire are in the process of developing a 'Team Around the Adult.'[36] This proposal is to strengthen the current housing pathways for vulnerable Adults by developing a Team Around the Adult operating model linked to Vulnerable Adult Panels It is designed to support adults who may not meet criteria for ACCW care and support but nonetheless, need agencies to come together and coordinate support. This initiative offers a real opportunity to provide a formal mechanism of support to other victims of modern slavery and in advance of national systems being out in place.

7.3.34. This section has highlighted disjointed care provision but there is also learning from the good practice evidenced in this period of aftercare. Some examples, over and above those already commented upon are summarised below:

- Police put markers on all victims records so if they were stopped by Police anywhere, Lincolnshire Police could be notified. This reduced the risk of their repeat victimisation
- There were examples of good practice where practitioners demonstrated great sensitivity in understanding the likely impact of modern slavery on the victims. This was evidenced by the ASC practitioner who was involved with Charlie M and Janet, taking time to build a relationship, recognising that trust may be a significant issue for them.
- For one victim, the GP shared information about his history in modern slavery when making a referral to ULHT, recognising the potential impact this may have had on his health.
- There were examples of good multi-agency working between Frank's Victim Liaison Officer and the ASC in his area of relocation. Their joint work considered his vulnerability and further risk of exploitation, applying for Deputyship for his financial affairs.
- Probation advocated for use of MAPPA level 3 for management of Family A to ensure robust risk management and continued protection of victims.
- Successful prosecution and protection for the victims through Part 2 of the Modern Slavery Act 2015[37]

[36] Adapted from 'Team Around the Child' – a whole system of multi-agency intervention http://www.tacinterconnections.com/index.php/tacmodel

[37] Home Office (2017) Guidance on Slavery and Trafficking Prevention Orders and Slavery and Trafficking Risk Orders under Part 2 of the Modern Slavery Act 2015 https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/610015/110417_-_statutory_guidance_part_2_-_GLAA_updates-_Final.pdf

7.3.35. LEARNING POINTS:
The shortcomings identified in the national review of the NRM were evident in this review. Victims remain highly vulnerable well beyond the forty-five day period of reflection.

There is a need to provide coordinated, restorative care in the journey from disclosure through to recovery. Agencies needed to work collectively to share resources and enable smooth transitions, with lead responsibilities flexing through changing needs. Victims experienced disjointed care that in some cases, put them at further risk of harm.

There are opportunities to use approaches such Team Around the Adult as a framework to provide coordinated multi-agency care with the victim at the centre of their care, maintaining control. However, there is also a pressing need to introduce national policy, matched by resources to enable effective coordinated care.

[Recommendation Arising]

7.3.36. Sadly, for some victims, they continued to struggle with issues of addiction and homelessness. Some became involved in offending, for others contact has been lost or they have died. Despite these tragic circumstances, there are also victims whose lives have been transformed through the efforts of all the agencies involved

'What's life like now? After what I have been through, everything is fantastic. I can't thank [practitioners involved] enough. Nobody could have been better supported.'

Charlie K: Interview for the review

8. What's Changed?

In the years that have followed Operation Pottery, there has been a transformation in the responses to Modern Slavery. Changes and improvements are occurring at pace and there is a wealth of information about resources that are available. Many of these national and local initiatives have addressed the areas of learning that this review has identified. Some of these developments are summarised below.[38]

8.1. National Developments

8.1.1. In October 2015, the Modern Slavery Act came into force. This consolidated and clarified existing criminal offences of slavery and human trafficking whilst increasing the penalties for such offences and introducing duties on statutory bodies.

8.1.2. Following a review of the NRM,[39] in 2017 the Government announced a series of reforms to the NRM process. These include:

- Achieving quicker and more certain decision-making under the NRM process

[38] This is not intended to be an exhaustive list of legislative and policy changes or service initiatives.
[39] HM Government Guidance on the National referral mechanism reform (2018) https://www.gov.uk/government/publications/national-referral-mechanism-reform/national-referral-mechanism-reform

- Improving support for adult victims before, during and after the NRM in England and Wales. This includes:
  I. Creating 'places of safety' to ensure that adults leaving immediate situations of exploitation have a safe place to go for up to three days where they can access assistance and advice while they decide on whether to the enter the NRM.
  II. Extending the 'move-on' period of support for victims leaving the NRM from fourteen to forty-five days.[40]
  III. Weekly 'drop-in support service' for all confirmed victims with leave to remain in the UK for up to six months after leaving Government funded support.
  IV. Work with local authorities to develop and disseminate best practice for victims to transition into a community and access local services.
  V. Minimum standards of care in all future contracts providing support to adult victims of modern slavery and an associated inspection regime based on the Human Trafficking Foundation's Trafficking Survivor Care Standards.
  VI. Align the subsistence rates for potential victims of modern slavery with those received by asylum seekers.
- Improve identification of victims of modern slavery including strengthening the first responder role and training requirements.
- Improve support to child victims of modern slavery who are within the NRM.

8.1.3. These, once implemented, should make a significant difference to the areas of learning highlighted in this review. The Home Office implementation programme is divided into three phases which the Home Office report progress against – not all initiatives have a specified date for implementation.[41] It is therefore important that the Lincolnshire partnership considers interim plans in advance of the Home Office initiatives coming into play.

8.1.4. The Home Office flag good practice examples such as Wales who are using MARACs as a mechanism to coordinate multi-agency victim care.[42] There are also neighbouring Local Authorities that are part of the pilot project for improved aftercare that would be able to provide learning for Lincolnshire to build their work from.[43]

[Recommendation Arising]

8.1.5. There has been a raft of guidance and training materials available for practitioners and managers working in various organisations[44] that will be invaluable for agencies to access and ensure their

[40] To note during this review, the outcome of a High Court ruling is awaited relating to the lawful use of any pre-determined period of support https://rightsinfo.org/home-office-victims-trafficking-slavery/
[41] Home Office Correspondence to Public Audit Committee (July 2018) https://www.parliament.uk/documents/commons-committees/public-accounts/Correspondence/2017-19/Home_Office_to_Committee_follow_up_from_27_June.pdf
[42] HM Government 2018 UK Annual Report on Modern Slavery https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/749346/2018_UK_Annual_Report_on_Modern_Slavery.pdf
[43] Home Office NRM Reform Newsletter Vol 3 Spring 2019 http://www.antislaverycommissioner.co.uk/news-insights/home-office-national-referral-mechanism-nrm-reform-newsletter/
[44] Guidance Modern slavery training: resource page https://www.gov.uk/government/publications/modern-slavery-training-resource-page/modern-slavery-training-resource-page

organisations meet the required levels of competence matched to their working environments for the roles they carry out.

[Recommendation Arising]

8.1.6. The Home Office is also using insights from its modern slavery typology research to pilot communications activity targeted at particular types of modern slavery, both in the UK and overseas in countries from where victims are trafficked to the UK. The learning from this review can be usefully shared with the Home Office[45] to contribute to the ongoing development of policy and interventions aimed at eradicating modern slavery and the Independent Review of the Modern Slavery Act.

[Recommendation Arising]

8.1.7. There have also been great strides in the national and regional work by organisations such as Police, Local Government Associations/ADASS, NHS and Housing – Homelessness sector that improve the sharing of information; understanding of duties and competence of staff responses. Some of these are evidenced within local practice.

8.2 Local Developments

- Raising Awareness

8.2.1. The agencies contributing to the review all reported vast improvements in the level of awareness of modern slavery within their organisations and gave some good practice examples where staff have identified and referred concerns. Awareness has improved through a combination of training; policies, procedures and documentation that prompts practitioners to consider modern slavery. For some services such as Police, ACCW, Homeless Services and Health services, they have developed more specialist training sessions for practitioners who are likely to be working with groups of people particularly at risk of modern slavery.

8.2.2. For many agencies, training on modern slavery has been integrated within their Safeguarding Adults training programmes. This reinforces modern slavery as part of safeguarding responsibilities and reiterates the importance of recognising all forms of exploitation. However, agencies should also ensure staff recognise the specific context and manifestation of modern slavery and are knowledgeable (relevant to role) about modern slavery policy and related legal frameworks. There will also need to be assurance that staff competence equates with the responsibilities they hold – for example staff who take a strategic lead within their organisation; 1st responders or staff who may work primarily with people in circumstances known to be high risk of modern slavery.

[Recommendation Arising]

8.2.3. The Police and Crime Commissioner (PCC) has taken a leading role regionally as well as raising community awareness through initiatives such as an Invisible People exhibit (2018) – an event challenging people to recognise the signs of modern slavery. The PCC also engaged with local businesses and the Gangmasters & Labour Abuse Authority through events raising awareness of modern slavery. More work is planned further to successful outcomes from funding applications.

[45] NRMReform@homeoffice.gov.uk. And info@modernslaveryactreview.independent.gov.uk

8.2.4. The Council Property Services put a new contract in place for property management and a new contractor. Following learning from the review, the contract was amended to specify safeguarding responsibilities. Property Services has sought to improve communications and collation of concerns on the Traveller Sites through an issues log and requiring names of all individuals on the site – not just the tenancy holder.

8.2.5. UHLT and LCHS have done further work on use of interpreters, revising their policies and ensuring the service is accessible. LCHS has introduced a 'mystery shopper' approach to their quality assurance checks for use of interpreters.

8.2.6. Following learning from another review,[46] District councils in Lincolnshire committed to carrying out additional checks in circumstances where Housing Benefit is being paid into a third parties' bank account.

- Sharing Intelligence and System Changes

8.2.7. In 2016 Lincolnshire Police launched the Foreign National Offending and Modern Slavery/Human Trafficking Team. This provided some dedicated resource for modern slavery and led to some successful enforcement operations. However, the team's capacity was largely taken up by their Foreign National Offending duties.

8.2.8. This team developed a modern slavery email address aimed at providing an easy point of access to share information. Alongside this, members of the Safer Lincolnshire Partnership (SLP) developed a 'Human Trafficking and Modern Slavery Information Form'. This is designed to readily share soft intelligence for example, about individuals, places, local knowledge about substances etc

8.2.9. These are likely to have been valuable initiatives but the SLP should evaluate the benefits as part of their ongoing improvement work related to intelligence gathering.[47] The initial uptake of the form was reported to be slow (only two or three received in the first eighteen months). This may have improved further through wider advertising through the Safeguarding Board website but nonetheless, scrutiny of the quality and source of the information would help direct future awareness campaigns.

[Recommendation Arising]

8.2.10. Some agencies also reported there was a plethora of different email addresses to report different concerns to the Police and that this could be confusing for staff. At time of the review, the Police were in the process of developing a system to make the recording and submission of intelligence by partner agencies, to the Police, easier and more accessible, routing intelligence through a central location.

8.2.11. Lincolnshire Police restructured their services to develop a Police Safeguarding Hub that aims to provide a holistic safeguarding approach to all concerns of vulnerability. In addition, Police intend

[46] Safer Lincolnshire Partnership Domestic Homicide Review overview report 'Peter' section 8.5. https://www.lincolnshire.gov.uk/safer-lincolnshire-partnership/domestic-abuse/domestic-homicide-reviews/132347.article

[47] Lincolnshire Community Safety Partnership Community Safety Agreement Modern Day Slavery - Delivery Plan 2018.

to establish an Intelligence Development Unit. This new team of officers would have a clear role in developing intelligence in modern slavery and human trafficking. The proposal is also to set up a central Major Incident Support Team that would provide capacity for complex and or resource intensive investigations such as was needed in Operation Pottery.

8.2.12. The Safer Lincolnshire Partnership (SLP) formed a Serious and Organised Crime – Modern Slavery Group. This is a multi-agency group which convenes bi-monthly. The group has developed a strategic plan for modern slavery[48]and a charter. The group has been able to move forward on some elements of the plan; however, implementation has been limited due to lack of capacity to coordinate the work. Consequently, it has not been possible to evaluate the difference it has made to potential victims.

[Recommendation Arising]

8.2.13. The SLP has benefitted from the involvement of key community groups and faiths. One example is the Work by Churches, the Clewer Initiative which is targeted on modern slavery with a particular focus on agricultural environments.

8.2.14. In relation to specific forums in place to share intelligence relating to exploitation and modern slavery, the Multi Agency Child Exploitation (MACE) offers this for children. Some District Councils have established Vulnerable Adult Panels as an initiative to manage vulnerable people and community risks but there is no consistency of provision.

8.2.15. Another Safeguarding Adult Review[49] made recommendations regarding mapping out partnership forums; their role, functions and connectivity to safeguarding adult procedures. This recommendation remains relevant to this review. There would be value in tracking and quality assuring the pathway and relationships between the submission of a 'Human Trafficking and Modern Slavery Information Form', multi-agency information sharing forums; early intervention strategy discussions and Safeguarding Adult Section 42 Care Act enquiries.

[Recommendation Arising]

8.2.16. In relation to applying learning from Operation Pottery, Lincolnshire Police used their experience to contribute to national police guidance in relation to modern slavery. LCHS also updated their operational procedure that guided them in Operation Pottery. This "Handbook for Emergency Medical response involving LCHS staff'" is in the process of being ratified at the time of the review and expected to be completed by the end of 2019. As highlighted in section 7.2, there is a need to develop multi-agency guidance to respond to large-scale operations of modern slavery. There would be value in using the learning from Lincolnshire to create a national guidance document.

[Recommendation Arising]

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[48] Ibid

[49] LSAB Overview Report - SAR Thematic Review Financial Exploitation (2017) file:///C:/Users/User/Downloads/LSAB-Overview-Report---SAR-Thematic-Review-Financial-Exploitation%20(1).pdf

9. Conclusions

9.1. The events covered by this review occurred at a time when agencies, communities and the public had limited knowledge of modern slavery.

9.2. This review has given some insights into the experiences of victims – people in very vulnerable circumstances who had experienced years of degradation and abuse. The review considered the many barriers that faced those victims in seeking help and breaking free from those that controlled and intimidated them.

9.3. The victims of abuse were hidden but in sight. The review found many examples where agencies missed opportunities to look beyond and make further enquiry. The review also found examples of good practice where agencies worked with tenacity to overcome the barriers to disclosure.
The review also charts some exceptional multi-agency work, led by Lincolnshire Police, to bring the perpetrators to justice and the compassionate support provided to the victims during and following the Court process.

9.4. The review highlighted the significant weaknesses in systems that resulted in limited, poorly coordinated restorative care for many of the victims. For some of the victims, the actions taken and the support provided has transformed their lives. Others have not been so fortunate.

9.5. Much has changed in recent years and many of the systems failures have been addressed, or are due to be addressed at national or local level. However, much more needs to be done if agencies are to be able to prevent modern slavery and provide the support victims need to make a difference to their ultimate restoration.

9.6. The recommendations from this review aim to address this.

10 Recommendations

10.1 The recommendations take into account the significant developments in responses to modern slavery at local and national level. The following recommendations also take account of recommendations agencies made for their own organisation. These are detailed in appendix 2.

Recommendations
Learning Theme 1: Awareness of Modern Slavery and Competence
Recommendation 1 – A Competent Workforce The LSAB should seek assurance from partner agencies that their workforce holds the necessary level of competence in modern slavery. This should consider the different competence requirements of particular roles, recognising the higher levels of competence required in more specialist roles or where staff are working with groups or communities known to present a higher risk of modern slavery. The Safer Lincolnshire Together Multi Agency Modern Slavery Charter & Implementation Plan (draft) will be useful tool for

assurance.

The LSAB should review and revise their Safeguarding Adults training needs analysis and competence frameworks to ensure they adequately address Modern Slavery and the learning from this review.

Recommendation 2 – A Vigilant Community

Businesses, community organisations, faith groups and the public provide a vital role in preventing and uncovering modern slavery.

2.1 The Safer Lincolnshire Partnership should report to the LSAB on the implementation of the Modern Day Slavery Delivery Plan, specifically the elements of the plan that relate to raising community awareness and the efficacy of community facing intelligence sharing processes. This report should include timeframes set out in the delivery plan and any barriers to achieving the outcomes.

2.2. Known risk factors and vulnerabilities should inform targeted communications that raise awareness of modern slavery and the support available to victims as highlighted within the report i.e. the locations presenting high risk and the vulnerability profile of individuals which may increase their risk

Learning Theme 2: Responses to Modern Slavery and Restorative Care

Recommendation 3 – Effective Information Sharing

The Safer Lincolnshire Partnership should:

I. Evaluate the efficacy of the reporting form for Modern Slavery Human Trafficking and Modern Slavery Information Form and use of the Modern Slavery email address and use this evaluation to inform further development.

II. Evaluate the availability of community safety intelligence sharing forums to establish if there is adequate provision across Lincolnshire.

III. Consider what recording systems and processes are required to share information regarding an individual's risk of Modern Slavery or their history as a victim, so to inform their ongoing care needs. Using learning from existing secure information sharing systems such as those used in Multi Agency Risk Assessment Conference (MARAC) will assist

Recommendation 4 – A Pathway for Responses to Modern Slavery

The LSAB in partnership with the Safer Lincolnshire Partnership should map out the multi-agency pathway for reporting and responding to modern slavery concerns and quality assure the multi-agency contribution at each stage. This will include the use of the Modern Slavery reporting form, information sharing forums; early intervention strategy discussions through to

criminal investigations and Safeguarding Adult Section 42 Care Act enquiries.

Recommendation 5 – Safety and Support at Point of Disclosure

The PPB and SLP Strategy Board should ratify their arrangements for provision of a Place of Safety where adults leaving immediate situations of exploitation can be supported for 3 days while they decide on whether to the enter the NRM and while awaiting a Reasonable Grounds decision.

The OPCC should finalise contractual arrangements for a service to provide case work care and support to those adults during this period.

This provision is an interim measure while awaiting the national implementation of this provision as part of the NRM reforms**.**

Recommendation 6 – Coordinated Multi-Agency Restorative Care

The Safer Lincolnshire Partnership in collaboration with the LSAB should develop a mechanism and coordinate resources so that victims of modern slavery are offered coordinated multi-agency care from point of disclosure, through the NRM period of support and beyond the transitions to their longer-term recovery. The LSAB may wish to consider approaches such Team Around the Adult to achieve this.

This provision may be an interim measure while awaiting the implementation of the national NRM reforms. The LSAB and SLP should use learning from the Local Authority pilot sites,[50] as well as learning from this review in developing this work.

Learning Theme 3: Strategic Responses and Emergency Planning

Recommendation 7 – Multi-agency Guidance for Large Scale Modern Slavery Operations

The LSAB, in collaboration with Safer Lincolnshire Partnership, should use the good practice and learning from this review to develop multi-agency operational guidance and checklists for large scale modern slavery responses that could be incorporated into the countywide incident plan. The guidance should include:

I. Strategic management of the operation including:
   - Roles and responsibilities of respective agency representatives
   - Commitment of resources required to coordinate victim care across the victims' restoration pathway (linked to recommendation 6)
   - Communication strategy within and between agencies
   - Management of restricted information including review of when restrictions can end so that information about victims can be shared to enable their care and support

[50] These pilot sites are part of the NRM programme of reforms - Derbyshire is one of the pilot sites.

- Explicit consideration of safeguarding children and adults and involvement of safeguarding leads in Gold Command or other strategic planning structures

II. Guidance and checklists that will aide coordinated, multi-agency support - in line with Making Safeguarding Personal and available to victims across their restoration pathway (linked to recommendation 6)

III. Arrangements for the emotional and practical support to staff involved in the operation who may be called upon to give evidence.

Recommendation 8 – Capacity to Deliver Partnership Strategy

The SLP should review the capacity within the partnership to implement their Modern Day Slavery Delivery plan and the additional recommendations raised within this review. The SLP may identify additional resources are required, such as a dedicated project coordinator to add the necessary capacity to deliver on the plan and make a difference to potential victims.

Learning Theme 4: Using Learning

Recommendation 9 – Influence Organisational Change

The learning from this review should be disseminated across LSAB and SLP agencies and other relevant agencies and bodies such as Housing providers; MAPPA and third sector bodies for use in policy, service review and workforce development.

Recommendation 10 – Influence National Policy

The learning from this review should be shared with Home Office Modern Slavery NRM Reform Team and the office of the Anti-Slavery Commissioner so that the learning can contribute to:

- Policy development and recognition of the resources required by localities to provide effective responses and coordinated restorative care.

- Use insights from the experience of victims to inform the Home Office modern slavery typology research and their communications activity.

- Highlight the need for national development of multi-agency operational guidance and checklist for large scale modern slavery operations – incorporating the Human Trafficking Foundation: The Slavery and Trafficking Survivor Care Standards 2018.

Date: November 2019

Appendix 1: Agencies contributing to the review

Agency	Role
Department for Work & Pensions (DWP)	DWP is responsible for welfare, pensions and child maintenance policy.
X District Council	A Local Authority in Lincolnshire that works in partnership with a Housing group to deliver Statutory Housing and Homelessness requirements. This District Council was involved with one of the victims.
Y Council	A council within Lincolnshire. Nine of the victims made Housing Benefit claims and resided within this council's housing stock.
East Midlands Ambulance Service NHS Trust (EMAS)	EMAS provides emergency 999 and urgent care services. During the scope period, they had minimal involvement with 3 victims and 2 members of Family A
Framework Housing Association	Framework is a charity delivering housing, health, support, employment. During the scope period, Framework provided Street Outreach Support to rough sleepers and were known to 3 of the victims.
Humberside, Lincolnshire, North Yorkshire Community Rehabilitation Company (HLNY CRC)	HLNY CRC is responsible for management of low to medium risk offenders. HLNY CRC was involved in working with one of the victims and five members of Family A. Some of this involvement took place while part of Lincolnshire Probation Trust, prior to the 2014 national reforms
Lincolnshire Community Health Services NHS Trust (LCHS) (including walk-in centre)	LCHS provides health care services in Lincolnshire. LCHS provided health care to 9 of the victims and 3 members of Family A. LCHS staff were also part of the multi-agency team supporting victims at the reception centre on the first day of their recovery.
Lincolnshire County Council: Adult Social Care (LCC ASC)	LCC Adult Care provides help and support to adults. This includes older people, people with learning disabilities, people with physical disabilities, people with mental health problems (aged over 65) and carers. Adult Care had some contact with 9 of the 22 victims within the review period and further 3 outside of the review period.
Lincolnshire County Council Children's	LCC CS deliver services to children in need and their families, from early help, child in need, child protection, children looked after by the authority through to leaving care services. Leaving Care Services are commissioned

Services (LCC CS) and Barnardo's	through Barnardo's. Barnardo's had significant involvement with one of the victims.
Lincolnshire County Council: Property Services (LCCPS) including Traveller Liaison	Site B was owned by LCC and the property and facilities are managed by a contractor on behalf of LCC. The site manager is employed by the facilities contractor to oversee the site and signpost travellers to relevant services. The County Council's Traveller Liaison Officer (TLO) oversees the service delivery of the site and responds to problems occupiers may raise.
Lincolnshire Fire & Rescue (LFR)	LFR provides emergency response across Lincolnshire and advice and support in relation to the safety of communities. One of the victims was known to LFR.
Lincolnshire Partnership NHS Foundation Trust (LPFT)	The Trust provides emotional wellbeing and mental health care for all ages and did provide substance misuse services for adults until 2015. The Trust also provides social care services for people aged 18-65 years. Five victims and four members of Family A had contact with LPFT.
Lincolnshire Police	Lincolnshire Police led on a major investigation into modern slavery operating within two traveller sites. This investigation was named Operation Pottery. Lincolnshire Police had significant contact with all the victims and Family A.
National Probation Service	The National Probation Service is responsible for court work and assessment and management of high-risk offenders and victim liaison work with victims of the most serious offences. Prior to national reforms in 2014, all probation services were provided by Lincolnshire Probation Trust. LPT had some involvement with thirteen victims and NPS had involvement with all members of Family A subsequent to their conviction.
Office of Police and Crime Commissioner (OPCC)	The role of the PCC is to be the voice of the people and hold the police to account. They are responsible for the totality of policing.
P3	P3 is a charity delivering services in communities for socially excluded and vulnerable people. This includes Housing Support and Street Outreach teams.
Local Authority X, ASC	Local Authority X Adult Social Care provides help and support to adults and had involvement with one of the victims, responding to safeguarding adult referrals.
Safer Lincolnshire Partnership (SLP) (including Trading Standards)	The SLP is the single multi-agency forum for addressing community safety issues across Lincolnshire. Trading Standards was working with Lincolnshire Police in relation to rogue trading involving Family A and the victims.
South West	The FST works on behalf of all four of Lincolnshire's Clinical Commissioning

Lincolnshire CCG Federated Safeguarding Team, (FST)	Groups to safeguard children, young people and adults at risk of abuse and neglect. The FST reviewed the records and involvement of GPs with the victims and Family A, as relevant to the review.
United Lincolnshire NHS Hospital Trust (ULHT)	ULHT provides services from 3 acute hospitals in Lincolnshire. ULHT had contact with 15 victims and minimal contact with Family A relevant to the review.

Appendix 2: Recommendations made by agencies contributing to the review

HNLY Community Rehabilitation Company	
1.	Where allegations of modern slavery are known in future, full details of these offences must be sought by the relevant senior / case manager and used to complete a full risk of serious harm assessment review. This should inform a discussion with the line manager and a recorded decision as to whether risk escalation to the NPS is appropriate.
2.	Face to face training to be provided to practitioners that is specific to working with modern slavery victims and perpetrators.
3.	The risk escalation process and relevant Probation Instruction (PI 57/2014) should be revisited by the CRC / NPS Directors as part of an interface meeting to highlight that a conviction / sentence is not required in order for risk escalation to take place.
Lincolnshire County Council – Adult Social Care	
1.	In some instances, ASC failed to retain copies of documentation provided to the police as part of the investigation and/or failed to accurately record this information on their own records. Where case records identified 'risk' or 'safety concerns' these were not fully explored, quantified or recorded. Recording of perpetrators of abuse was inconsistent with limited or generalised details recorded. ASC to review current recording guidance to ensure it addresses the above concerns, this should then be reinforced to all staff and embedded within practice. Existing quality practice standard audits should be completed with greater focus on the robust recording to monitor practice change.
2.	LCC ASC Safeguarding focused upon the consent of the service user in considering whether to continue involvement at the detriment to the other information available or potential risk to others. The LCC Adult Care Safeguarding Policy and Procedure should be updated to include specific guidance for practitioners on actions to take if a service user declines safeguarding intervention and roles and responsibility in multi-agency working.
3.	LCC ASC Safeguarding team input in relation to the reception centre lack clarity. LCC AC &CW will, with the assistance of LSAB partners, develop a framework for a multi-agency response to complex concerns or investigations.
Lincolnshire County Council – Property Services	
1.	Training for staff to understand the subject and be alert to signs and how to report concerns and a clear referral mechanism.
2.	Introduce quarterly tenants' meetings and expand attendance of agencies.

Lincolnshire County Council – Children's Services	
1.	Ensure Leaving Care Staff undertake S42 LSAB Safeguarding Adults training by 31st December 2019.
Lincolnshire Federated Safeguarding Team on behalf of GPs	
1.	The Federated Safeguarding Team and appropriate GPs should be informed by the lead agency (for example, police) at the earliest opportunity of suspected instances of modern slavery as a heightened awareness may result in improved detection and outcomes for victims.
2.	Victim's GPs should be formally advised by the police of the outcome of investigative and judicial processes. It is more likely that aftercare will be arranged for confirmed victims than alleged victims.
3.	GPs and primary care staff should always document who attends an appointment with a patient, as well as their relationship with the patient.
Lincolnshire Fire and Rescue	
1.	Review of the policy to be carried out. This will provide assurance that the content and guidance offered is current and reflects recognised practices.
2.	It is recommended that an evaluation of the appropriateness of the current safeguarding training against specific aims and objectives of the SLP and LSAB/LSCB should be carried out, (with the support of individuals within partner agencies). Consideration should be given to whether or not further development of the Policy is needed and whether specific subjects should be covered in more detail.
3.	LFR should look at and evaluate the different ways we currently engage with communities and explore opportunities of how best to communicate, and how to include wider safety concerns and initiatives.
4	A review of the different levels of safeguarding training given should be carried out. Currently CFS Advocates are given a greater level of training which allows support and advice to be given to operational staff if concerns are raised. Consideration should be given to delivering the higher level of training to all personnel within the Service.
National Probation Service	
1.	Deliver Professional Curiosity workshop to all staff including Court and VLU staff.
Local Authority X; ASC	
1.	New policy, procedures and guidelines on MDS to be recommended.
2.	Additional training for staff in MDS to be recommended, particularly in relation to training for front door services in the ability to both recognise possible indicators of MDS and to be aware of the likelihood of those experiencing MDS to be reluctant to disclose details.

3.	An increased focus on multi-agency working.
4.	Increased attempts to find a means of making contact with the vulnerable person, whilst still having an awareness of risks from those causing the alleged exploitation. Decreased use of written correspondence, requesting contact, which the vulnerable person may be unlikely to or unable to respond to.
Agencies that made no recommendations for their own agency	
	• Council Y. • East Midlands Ambulance Service NHS Trust • Framework Housing Association • Lincolnshire Community Health Services NHS Trust • Lincolnshire Police • Lincolnshire Partnership Foundation Trust • Safer Communities Service – Lincolnshire Trading Standards • United Lincolnshire Hospital NHS Trust

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Glossary:

ADASS Association of Directors of Adult Social Services
CAMHS Child and Adolescent Mental Health Service
CPN Community Psychiatric Nurse
DWP Department for Work & Pensions
EMAS East Midlands Ambulance Service NHS Trust
HLNY CRC Humberside, Lincolnshire, North Yorkshire Community Rehabilitation Company
LAC Looked After Child
LCHS Lincolnshire Community Health Services NHS Trust
LCC ACCW Lincolnshire County Council: Adult Care and Community Wellbeing
LCC CS Lincolnshire County Council Children's Services
LCCPS Lincolnshire County Council: Property Services
LFR Lincolnshire Fire & Rescue
LPFT Lincolnshire Partnership NHS Foundation Trust
LSAB Lincolnshire Safeguarding Adult Board
MAPPA Multi-agency Public Protection Arrangements
NCA National Crime Agency
NPS National Probation Service
NRM National Referral Mechanism
OPCC Office of the Police and Crime Commissioner
PARU Police Persons at Risk Unit
SAR Safeguarding Adults Review carried out under the Care Act 2014
SIO Senior Investigating Officer
SLP Safer Lincolnshire Partnership
CCG Clinical Commissioning Group
FST Federated Safeguarding Team,
ULHT United Lincolnshire NHS Hospital Trust
UKHTC UK Human Trafficking Centre
VCO Victim Contact Scheme
VLU Victim Liaison Unit

About the reviewer

The review was conducted by Sylvia Manson, of Sylman Consulting. Sylvia is a mental health social worker by background and has many years' experience in Health and Social Care senior management and commissioning. Sylvia worked for the Department of Health, developing safeguarding adults policy and guidance including the Safeguarding Adult Principles, now incorporated into the Care Act statutory guidance. Sylvia was also a Department of Health regional lead for implementation of the Mental Capacity Act 2005 and Mental Health Act 2007. Sylvia now works for the Mental Health Tribunal along with independent consultancy focused on partnership development, service improvement and statutory learning reviews.

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