

INFORMATION TO BE DISCUSSED WITHIN THE M.A.S.E. MEETING.

STRICTLY PRIVATE AND CONFIDENTIAL

Name of Agency: Contact Name: Contacts Address: Tel: Email:
Name, D.O.B Addresses of all individuals concerned.(To include either child/ young person/ alleged perpetrator.)
Brief outline of the current, accurate information regarding issues of Child Sexual Exploitation (C.S.E).
Highlight any relevant information that relates to any of the risk indicators on the checklist.
Are there any 'Hotspots/ Addresses /Information which needs to be shared regarding the child/ young person/ alleged perpetrator.)
Brief description of what Actions have been undertaken by your Agency to date.

Identify any other concerns your agency may have about the plans /lack of plans in place for the child / Young Person.(e.g. information missing, more than one individual/alias names, conflicting information, more/less children than on agenda).

Brought to the M.A.S.E meeting for discussion by:-

Name:-

Agency:-

Date:-

ACTIONS AND OUTCOME RECORDED WITHIN THE M.A.S.E meeting