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| **This form allows you to explore some of the vulnerabilities and indicators present in a child or young person that you know might be at risk of or experiencing sexual exploitation. It is intended to help you think about what the risk might be to the young person and about what to do with the information you have.**  **You should always bear in mind other services may have other information to add to what you know so if any of the indicators in Section 2 appear to be an issue, particularly if more than one or if compounded by vulnerabilities in Section 1, you should speak to other agencies or family during the assessment and/or use this assessment to support discussion with your Designated Officer or to supplement a CAF or referral to another service including Specialist CSE Team / Children’s Social Care.** | | | |
| **If you suspect anyone is in immediate danger, call the Police on 999. If a child/young person is currently at risk of significant harm, including from CSE, refer immediately to your local Children’s Social Care.** | | | |
| **General details** | | | |
| Name and role of worker completing assessment |  | Agency and contact details |  |
| Child/Young person’s Name/Alias/Known as |  | Local Authority currently living in |  |
| Language(s) spoken |  | Date of Risk Assessment |  |
| Age/DOB |  | Legal status |  |
| Ethnicity |  | Gender |  |
| **Section 1. Vulnerabilities –** These are things which may make a young person more at risk of being targeted for CSE. They give context to the specific indicators of CSE in section 2. However, the absence of these vulnerabilities does not preclude children being targeted; evidence shows victims can come from any background and without any prior vulnerability. You may not need to complete this section if you are also doing a CAF or other standard risk assessment / referral form as long as, in making your summary of risk, you bear these factors in mind. | | | |
| Migrant/refugee/Asylum Seeker/Trafficked status through NRM |  | Sexuality (If known) |  |
| Known to Children’s Social Care/CP Plan/LAC, now or previously? |  | Physical/Learning Disabilities / communication disorders |  |
| Involvement with the Youth Justice system?  (if yes provide brief details including type of criminality) |  | Is the child receiving support or services from any other Agency, such as drug & alcohol or mental health services |  |
| Has sexual exploitation previously been identified as a specific issue for this child? Please provide details |  |  |  |
| Neglect by Parent/Carer/Family member |  | History of / current family domestic abuse (including risk of forced marriage/risk of honour based violence/familial child sexual abuse) |  |
| Physical / emotional/ sexual abuse by Parent/ Carer/ Family member |  | History of / current substance misuse in family |  |
| Poverty or Deprivation |  | Family history of exploitation or Prostitution |  |
| Unsuitable or inappropriate accommodation (Inc. street homeless, staying with inappropriate adults/hostel/B&B) |  | Family history of mental health difficulties impacting parenting |  |
| Breakdown of Family relationships |  | Family bereavement |  |
| Low self-esteem or history of being bullied or of bullying |  | Lack of positive relationship with a protective/ nurturing adult |  |
| Recent bereavement or loss |  | Young carer |  |
| Disconnecting from support networks i.e. family/friends |  | Living in a chaotic or dysfunctional household |  |
| Unsure about their sexual orientation or unable to disclose sexual orientation to their families/friends |  | Living in a gang neighbourhood (postcode gangs) |  |
| Gang association either through relatives, peers or intimate relationships |  | Ethnicity (bullying or gang ethnicity) |  |
| **Section 2. Risk Indicators:** Children are groomed and exploited in different ways. It may be difficult for parents, carers and practitioners to differentiate between ordinary teenage behaviour and the risk of or involvement in sexual exploitation but below are some signs that may signify if the child is being groomed for sexual exploitation or actually being sexually exploited. | | | |
| **Within family / home / relationships** | | | |
| Change in behaviour - being more secretive / withdrawn / isolated from peers or not mixing with usual friends |  | Increasingly disruptive, hostile or physically aggressive at home or school Inc. use of sexualised language |  |
| Associating / relationship with significantly older men or women who encourage emotional dependence, loyalty and isolation from safe relationships (record details of adults i.e. occupation/ description) |  | Physical or emotional abuse by a boyfriend / girlfriend or controlling adult including use of manipulation, violence and/or threats |  |
| Associating with other sexually exploited children |  | Multiple callers (unknown adults/older young people) - (record description/names etc.) |  |
| Estranged from family |  |  |  |
| Regularly coming home late or going missing from home, care or education for any period of time (whether reported or not). |  | Returning home after long intervals appearing well cared for |  |
| **Health and Mental Health** | | | |
| Change in physical appearance (new clothes, more/less make-up, weight gain/loss) |  | Increased health / sexual health related problems |  |
| Marks or scars or physical injuries on the body or face which they try to conceal |  | Expressions of despair (Inc. depression, mental ill health, self-harm, suicide thoughts/ attempts, overdose, eating disorder) |  |
| Branding (i.e. of gang logos) |  | Repeat/unplanned pregnancy or pregnancies (including ending in termination/ miscarriage(s)) |  |
| Sexually Transmitted Infections (STI’s) and/or repeat tests particularly with negative results |  |  |  |
| **Behaviour and experiences** | | | |
| Concealed / concerning use of the internet including web-cam, online gaming (via X-box, PlayStation), chat rooms etc. |  | Exclusion from school or unexplained absences from, or not engaged in school/ college/ training/ work |  |
| Failing to respond to attempts to keep in touch by workers/carer or recent disengagement |  | Reports of being taken to hotels, nightclubs, takeaways or out of area by unknown adults |  |
| Sexualised risk-taking, including on internet or mobile phone, such as sexting (sending explicit messages or photos to adults or peers) |  | Young gay/bisexual exploring sexuality in unsupported way |  |
| Association with gangs |  | Increasing use of drugs or alcohol or misuse of drugs or alcohol |  |
| Fear of victimisation from other gangs due to gang affiliation or rivalry |  | Constrained by ‘rules’ of a gang |  |
| Inability to negotiate exit from a gang due to fear/dependency |  | Displaying signs of harassment/unwanted attention |  |
| Fear of gang leaders |  | Evidence of sexual bullying and/or vulnerability through the internet and/or social networking sites |  |
| Involved in criminal offending activity (i.e. ASB/criminal damage/theft) |  | Unusual association with groups of adults |  |
| **Appearance and possessions** | | | |
| Unexplained amounts of money, mobiles, credit, expensive clothing, jewellery or other items/gifts |  | Overt sexualised dress |  |
| Having multiple mobile phones, sim cards or use of a phone that causes concern – multiple callers or more texts/pings than usual |  | Possession of hotel keys/cards or keys to unknown premises |  |
| **Incidences**  ***If any of these are known to have happened and the Police or Social Care are not yet aware you must refer to the local CSE Team, if there is one, otherwise to Social Care- or direct to the Police in emergencies.*** | | | |
| Child under 13 engaging in penetrative sex with someone over 15 years |  | Entering/leaving vehicles cars with unknown adults |  |
| Child meeting different adults and exchanging or ‘selling’ sexual activity |  | Frequenting areas known for on/off street sex work |  |
| Receiving rewards of money or goods for introducing peers to CSE adults. |  | Disclosure of sexual/physical assault followed by withdrawal of allegation |  |
| Knowledge of towns or cities they have no previous connection with |  | Being taken to clubs or hotels and engaging in sexual activity |  |
| Abduction or forced imprisonment |  | Association with taxi firms/takeaway owners (night-time economy) |  |
| Being taken to brothels/ massage parlours |  | Seen in CSE hotspots (certain flats, recruiting areas, cars or houses) |  |
| **Please add any additional information that you feel is unusual/ relevant / concerning** |  | | |

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| **Action/s already taken or to be taken (with timescale):** | **Done (date) / To be done (timescales) and any appropriate details** |
| Discuss with line manager |  |
| Initiate CAF |  |
| Contact local CSE Coordinator |  |
| Refer to Children’s Social Care |  |
| Discuss with Police regarding investigation |  |
| Call strategy meeting/CIN meeting/CP case conference |  |
| Contact/referral to specialist voluntary sector service |  |
| Any other actions, treatment or monitoring arrangements |  |
| **Details of known suspects:** |  |
| **Are there any risks that cannot be disclosed due to confidentiality/data protection? (Consider 5x5x5).** |  |
| **Is there a risk present to others, i.e. other child/ vulnerable adult?** |  |
| **What immediate risks does the young person face?** |  |
| **For CSE Team Use: Initial Summary of Risk Level and response needed**  **(Inc. check of other systems)** | **Refer to Social Care**  **Immediate strategy meeting**  **Refer to local multi-agency meeting**  **Support agency to complete CAF / Signposting** |