

**Child Exploitation Screening Tool and Risk Assessment Guidance (to support the completion of the LSCB-CE-Risk-assessment Tool - parts A and B v3.2 July 2018 )**

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| 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 West Sussex MASH (Multi Agency Safeguarding Hub). |

**Part A Screening Tool**

**What is this tool?**

This is a **screening tool** that you can use to help you decide whether a child or young person may be at risk of child exploitation (CE) in a quick and consistent manner. It is a simple set of questions to use as a prompt when talking to a child or young person. Please use with the behaviours chart at the end of this document to help you establish the level of risk and check if there are indicators of exploitation within a young person’s life from the evidence you have.

**Who should you use this tool with?**

The screening tool can be applied to all children and young people (male or female) under the age of 18 years and is to be used by anyone who has a concern that a child/young person may be being exploited.

Practitioners should be aware that the child or young person may not initially relay accurate information about their circumstances, particularly if they do not identify themselves as a victim, or if they are under the power and control of a perpetrator or group/gang. Please also be aware that some children or young people may no longer be at risk of harm but will already be being significantly harmed. It is important to retain a sense of professional curiosity about the behaviours you are seeing and support the child in discussing this with you. If you are unsure as to the risk level or evidence of behaviours, add the detail in comments.

**Next steps**

The tool is to assist you in assessing the possibility of sexual or other forms of exploitation; it is not intended to be a referral form. If you have ticked any indicators refer to the behaviour chart to support your decision making about the level of risk this indicates. Then complete Part B, risk assessment section, agreeing the risk level with your manager or lead CP safeguarding lead. If you have not identified any exploitation concerns in the screening tool but remain worried about the child’s safety refer to MASH as below.

If exploitation signs or behaviours are identified then a referral must be made to West Sussex MASH using the request for support forms, attaching this screening and risk assessment. <http://www.westsussexscb.org.uk/wp-content/uploads/Request-for-Support-form.doc> to [MASH@westsussex.gcsx.gov.uk](mailto:MASH@westsussex.gcsx.gov.uk) or if the child has a social worker this information must be passed to the allocated social worker. If you are unsure please call MASH Telephone: 01403 229900 for advice.

Child Exploitation Risk rating assessment (Part B)

**What is this tool?**

This is the risk assessment section that can be used to add all of the available information regarding the risks presented and use professional judgement to establish a risk rating. This tool should also be used to review and update the risk assessment of CSE as per the CSE Procedures as well as identify any other forms of exploitation.

**Who should you use this tool with?**

The CE Risk assessment can be applied to all children and young people (male or female) under the age of 18 years either at point of the first indicators of CE risks or to review the current evidence of risk. Please add any additional information into this section regarding potential perpetrators (associations the child has) and the potential places that the child may be going to. Using the behaviour chart check the evidence of the behaviours that are a concern and agree the level of risk with your line manager or safeguarding lead for Child protection.

The risk rating will be a professional judgement based on all the evidence you have and may change after multi agency meetings have taken place. If unsure give your view of risk and what form of exploitation and add a note in the details section.

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| Definitions of Risk of CE: |
| High Risk: Screening and risk assessment indicates evidence that the child is actively being sexually abused or actively coerced to be exploited in other forms such as drugs, criminal behaviour. Should be level 4 on continuum of need and will require a Children’s Social care intervention. |
| Medium Risk: Screening and risk assessment indicates evidence that the child may be being sexually abused or at significant risk of exploitation. Level 3 or 4 on the continuum of need requiring a Social worker or named lead professional. |
| Low risk: Screening and risk assessment indicates evidence that the child may be vulnerable to exploitation and sexual abuse. Level 3 or 2 on the continuum of need and will need a named lead professional. |

For further information about the continuum of need refer to the West Sussex Safeguarding Children’s Board link here;

<http://www.westsussexscb.org.uk/professionals/helping-you-work/>

**Next Steps**

If CE signs are identified then a referral must be made to West Sussex MASH using the request for support forms, attaching this screening and risk assessment. <http://www.westsussexscb.org.uk/wp-content/uploads/Request-for-Support-form.doc> to [MASH@westsussex.gcsx.gov.uk](mailto:MASH@westsussex.gcsx.gov.uk) or if the child has a social worker this information must be passed to the allocated social worker. If you are unsure please call MASH Telephone: 01403 229900 for advice.

A copy of all completed CE Screening tools and Risk assessments must also be send to CSEHUB@westsussex.gcsx.gov.uk. This allows for the monitoring of children identified at risk and ensures oversight by the multiagency missing and exploitation group.

Please use your professional judgement to reflect upon the indicators you have ticked above and consider the health, welfare and safety of the child in question.

Please ensure that the West Sussex Multi Agency Child Sexual Exploitation Procedures and guidance for professionals working with children are followed and this document is uploaded to your recording system and a copy sent to [csehub@westsussex.gcsx.gov.uk](mailto:csehub@westsussex.gcsx.gov.uk)

Professionals information

**Worried about a child being Exploited?**

Professionals in all agencies should always be alert to the possibility that a child/young person they are working with may be being sexually exploited or exploited through being forced to supply drugs, commit offences by others in control of them. The professional may already have concerns about the child/young person as they are displaying key indicators (see appendix 1). When considering possible exploitation any professional should first discuss the concerns with their agency’s designated safeguarding lead and refer to CE indicators in the screening tool and risk assessment.

Child exploitation is a form of abuse. It involves children and young people being forced or manipulated into sexual or other activity in exchange for something; money, gifts, accommodation or less tangible goods such as affection or status. The sexual activity and exchange may be seen as consensual, but are based on an imbalance of power which severely limits victims’ options. Whilst this tool has been developed to enable the identification of children and young people at risk of sexual exploitation similar behaviours can be seen in those at risk of other forms of exploitation and therefore please use this form to support your assessment.

**Important points to remember when considering CSE and other forms of exploitation:**

• Child exploitation is a child protection matter

• Both girls and boys can be victims of child exploitation and are equally vulnerable

• The coercer(s) and perpetrators(s) are usually adult, but children and young people can also act in a sexually abusive way towards other young people or exert power e.g. group/gang members of either gender

• Although it is rare, parents/carers may be involved in the sexual/criminal exploitation of their children

• Groups of children/young people and multiple perpetrators may be involved (organised abuse)

• No child under 13 years should be assessed as low risk if behaviours indicate involvement in or risk of CSE

• No child or young person with a learning disability should be assessed as Low Risk if behaviours indicate involvement in or risk of CSE

• Be aware: disclosure of information by the child may take time and evident risks only emerge during on-going assessment, support and interventions with the child/Young person and/or family

* Should a child be approaching 18 and still considered vulnerable consideration should be given to making a referral to adult safeguarding.

Consider what type of exploitation the child/young person maybe experiencing based on the information known:

**Inappropriate relationship:** the child/young person is in a relationship with an older partner who exerts a great deal of influence and control over them due to imbalance of power. The child/young person is likely to believe they are in a serious adult relationship and not recognise its exploitative nature.

**Peer exploitation:** the child/young person is in a relationship with another child/young person who is coercing them into sexual activity or other forced activity with their friends. This is the model that gang related exploitation follows.

**Organised exploitation:** the child/young person is being groomed or exploited by a network of perpetrators and may be being coerced into sexual activity or other forced activity with different people. Some children or young people may be used to recruit others.

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| **Risk Indicator (Behaviour)** | **No Risk** | **Low Risk**  **(Vulnerable)** | **Medium Risk**  **(At Risk)** | **High Risk**  **(Child Exploitation)** |
| **1. Missing** | Has Never been missing or absent | Sometimes has been absent/truanting | Often goes missing and is reported as missing to the police | Regularly goes missing overnight or for long periods, Police have had to search for them |
| Has been missing once and Police are aware | Sometimes goes missing and is not reported to the police |
| **2.**  **Relationships** | Current boyfriend or girlfriend who is around their age | Believes it’s OK to have a boyfriend or girlfriend who is not close to their own age | Current boyfriend or girlfriend who is not close to their own age | Done or doing sexual acts with others to help out their boyfriend or girlfriend or to please them. Taking/Supplying drugs through coercion. |
| No current boyfriend or girlfriend | Tells lies and keeps secrets about their relationship |
| **3. Vehicles** | Only uses vehicles of family or friends that parents/carers know well | Sometimes uses older friends vehicles that parents/carers do not know well | Unknown or vehicles concern have been seen around the young persons home | Has been seen entering or leaving vechicles of unknown adults or vechicles of concern |
| Has used prepaid taxis on occasion | Regulary uses taxis that are paid for and desination is unknown |
| **4. Gifts/stuff** | Never broken the law to get or do stuff they needed or wanted | Broken the law before to get or do stuff they needed or wanted | Would be OK with doing sexual or other criminal acts to get things they needed or wanted | Done or doing sexual/criminal acts to get or do stuff they needed or wanted |
| Has been given or offered something in exchange for sex/criminal acts |
| Never received unexplained gifts, items etc. | Some gifts or items have been noticed but explanations given | Often has unexplained items or gifts but tries to conceal them. No plausible explanations given | Has offered sex to people in exchange for something |
| Regularly had unexplained items or gifts, doesn’t hide them and refuses to answer how they got them |
| **5. Areas** | Only hangs around in their local area where they know & are safe | Visits adult venues such as pubs, nightclubs & adult house parties | Visits places (inside or outside) where adults go for sex  Visits places known for drug use | Visits places where they have been or are being given or offered something for sex/drugs |
| **6. Grooming** | Doesn’t chat to unknown young people or adults | Has secret accounts on social media | Has multiple profiles on social media where false information such as age is given | Belives they are in a loving relationship with an adult |
| Chats to only people online that they know | Has unsupervised access to the internet on a regular basis | Has adults or young people they do not know that they communicate with regularly | Is keeping ‘relationships’ either online or off line secret from friends or family |
| Sometimes talks to strangers | Has started being secretive about people they have met either online or offline | Regulary talks to strangers either offline or online and discloses personal information |
| **7. Whereabouts** | A parent/carer always knows where they are | Sometimes visits places or stays out without telling parents or carers or lies about it | Often visits places or stays out without telling parents/carers where they are or lies about it | Visited or visits places connected to criminal or sexual activity to get something they needed or want |
| **8. Education or training** | Engaged in full time education or training | Registered in education or training but sometimes doesn’t attend | Regularly doesn’t attend educational establishment | Not attending education or any atempts to enage them in education |
| On a reduced timetable | On a very reduced timetable | No education provision currently being provided or provision is inadequate (a few hours a week) |
| **9. People** | No unknown callers at the home or by phone. | One off occasion of unknown caller at the home or phone | Regular callers of concern/unwanted at the home or by phone that parents/carers are aware of | Multiple unknown calllers at the home or by phone |
| Some unknown callers at the home or on the phone | Multiple mobiles used to contact different people |
| **10. Physical injuries** | No unexplained injures | A few physical injuries occurred but explanations always given that were plausible and collaborated | Often has physical injuries where the explanation given is not plausible or believed | Regular physical injuries (in particular bites, burns, bruises) that are attepted to be concealed and no explaination given |
| Has injuries after returning from periods of missing or unknown whjereabouts |
| **11. Sexual Health** | Always uses protection during sex. Is knowledgeable about STIs& where to get support | Previous STIs and/or unsafe sex and is worried this might happen again | Previous or current multiple STIs | Given or offered something in exchange for sex. Recounts being unable to recall giving consent or having sex due to being substance affected. |
| Never had sex | Lack of knowledge regarding STIs and unsafe sex | Rarely uses protection during sex |
| **12. Pregnancies** | Has never been pregnant | Has been/got somebody pregnant as part of an age appropriate relationship with no concerns | Has had more than one pregnancy/termination | Has had multiple terminations |
| Has got someone pregnant multiple times | Has had multiple pregnancies |
| Has never got anyone pregnant | Has had a few pregnancy ‘Scares’ | Has been/got somebody pregnant as a result of a concerning or inappropriate ‘relationship’ | Has repeatedly got different people pregnant |
| Has tried to conceal pregnancies |
| **13. Drugs** | Doesn’t take drugs | Sometimes takes drugs & sometimes wakes up forgetting what happened | Often drinks a & often wakes up forgetting what happened | Done or doing sexual or criminal acts to get drugs or pay debt |
| Sometimes takes drugs but it doesn’t seriously affect their life | Sometimes takes drugs and lies or is secretive about it | Sometimes breaks the law to get money to buy drugs |
| **14. Alcohol** | Doesn’t drink alcohol | Sometimes drinks alcohol & sometimes wakes up forgetting what happened | Often drinks alcohol & often wakes up forgetting what happened | Done or doing sexual/criminal acts to get alcohol or to be allowed to go to parties |
| Sometimes drinks alcohol but it doesn’t seriously affect their life | Sometimes drinks alcohol and lies or is secretive about it | Sometimes break the law to get money to buy alcohol |
| **15. Mental Health** | No mental health concerns | Some mental health behaviour concerns | Often Self harms or suicidal idealisations | Diagnosed mental health issue |
| ‘Superficial’ self-harm | Concerns over young person’s eating | Undiagnosed mental health concerns |
| Beginning to demonstrate concerning signs | Refusal to engage with services regarding concerns | Regular attempts to take their own life |
| Has made an attempt on their own life | Attendance at hospital/sepcoialist services due to concerns |
| **16. Phones** | Never sent or received sexual or inappropriate content or images | Sent or received non-sexual, inappropriate content or images to adults they have not met | Sent or received sexual content or images only to their boyfriend or girlfriend who is around their age | Sent or received sexual content or images to or from adults to get something they needed or wanted |
| **17. Internet** | Doesn’t chat to people online | Chats to adults online they don’t know & have never met | Chats to adults online they don’t know. They have met some of them & would be fine meeting some of the others | Used or using the internet to meet adults for sex  Using internet contact to engage in criminal activity |
| Only chats to people online they know & have met before |
| **18. Sexual Assault** | Never been sexually assaulted | Has made disclosures about situations that could have resulted in sexual assault | Has been sexually assaulted historically | Is currently being sexually assaulted on a regular basis |
| Has been sexually assaulted by current ‘partner’ | Evidence suggests they have been or continue to be sexually assulted |
| **19. Disclosures** | No need to make a disclosure | Has made low level disclosures that have been supported | Has made a disclosure but later retracted it | Has made multiple disclosures and then retracts them |
| Has made a disclosure and remained in contact with alleged offender | Has made disclosures whilst under the influence and then withdrawn them later |
| Friends have made disclosures about the individual that they refuse to talk about | Has eluded to incidents but refuses to disclose due to fear of concequences |
| **20. Sexual Activity** | Had or is having sex with someone around their own age without feeling forced or pressured | Had or is having sex with people around their own age. Doesn’t always feel confident to say no | Looking for an adult or someone not close to their own age to have sex with | Been or being pressured, persuaded, tricked or forced into doing sexual acts |
| Never had sex | Had or is having sex with people around their own age. Sometimes feels pressured | Believes it’s OK to have sex with adults | Done or doing sexual acts to get something they need or want |
| Under 16 having or had sex with someone aged 18 or over |
| **21. Personal Safety** | Does not take risks with their personal safety | Understands personal safety but sometimes puts themselves at risk | Has a lack of understanding around personal safety and often doesn’t keep themselves safe | Regularly putting themselves in situations that are a risk to their personal safety |
| Has a good understanding of personal safety | Has a lack of understanding around personal safety | Is unable to keep themselves safe due to SEND and requires support to do this | Has no understanding of keeping themselves safe |
| Takes risks on purpose to achieve adrenealine rush or attention |
| **22. Friends** | Current friends who are around their age | No friends | Current close friends who are not close to their own age | Done or doing sexual/criminal acts to, with or for their friends to help them out or to get something they need or want |
| Current close friends who do sexual /criminal acts to, with or for adults |
| **23. Engagement** | No need to engage with services | Sporadic engagement with services | Reluctant to engage with agencies but has a trusted adult | Refues to engage with any agency and has no trusted adult |
| Engages well with services |
| **24. A and E** | Never attended A and E | Sometimes has attended A and E for mental health, drug or alcohol issues and engaged in any ongoing support offered | Often attends A and E | Has atteneded A and E whilst or recently returning from a missing episode |
| Has attended A and E on the rare occasion with support from parents/carers and a plausible explanation | Attends A and E sometimes but refuses to give explanation of cause of concerns | Has attened A and E with a unknown adult, or been dropped at A and E by unknown adult/vechicle |
| **25. Appointments** | Attends appropriate routine appointments with parent/carer | Attends appointments alone and is not willing to discuss with parents/carers | Has additional appointments and attends these with adult | Being accompanied to appointments by different people on a regular basis |
| Sometimes doesn’t attend routine appointments | Adult other than parent/carer attending appointments with the Young Person | Unknown adult accompanying YP to appointments |
| **26. Gangs** | No association with gangs and not in a gang area | Lives in a gang neighbourhood/area but not involved | Associating with gangs in their area | A gang member that is linked into gang life and culture |
| Associating with city gangs outside of their area | In a ‘relationship’ with a gang member |
| Has begun to start a gang and becoming a known group |

**Appendix 2**

Child Exploitation:

Warning signs and vulnerabilities checklist

The following are typical vulnerabilities in children prior to abuse:

• Living in a chaotic or dysfunctional household (including parental substance use, domestic violence, parental mental health issues, parental criminality).

• History of abuse (including familial child sexual abuse, risk of forced marriage, risk of ‘honour’-based violence, physical and emotional abuse and neglect).

• Recent bereavement or loss.

• Gang association either through relatives, peers or intimate relationships.

• Attending school with young people who are sexually exploited.

• Learning disabilities.

• Unsure about their sexual orientation or unable to disclose sexual orientation to their families.

• Friends with young people who are sexually or criminally exploited.

• Homeless.

• Lacking friends from the same age group.

• Living in a gang neighbourhood.

• Living in residential care.

• Living in hostel, bed and breakfast accommodation or a foyer.

• Low self-esteem or self-confidence.

• Young carer.

The following signs and behaviour are generally seen in children who are already being sexually exploited:

• Missing from home or care.

• Physical injuries.

• Drug or alcohol misuse.

• Involvement in offending.

• Repeat sexually-transmitted infections, pregnancy and terminations.

• Absent from school.

• Change in physical appearance.

• Evidence of sexual bullying and/or vulnerability through the internet and/or social networking sites.

• Estranged from their family.

• Receipt of gifts from unknown sources.

• Recruiting others into exploitative situations.

• Poor mental health.

• Self-harm.

• Thoughts of or attempts at suicide.

This content is taken from the interim report of the Office of the Children’s Commissioner’s inquiry into child sexual exploitation in gangs and groups (pages 114-115). For more information, including about data sets relevant to the above signs, the report can be accessed here: <http://www.childrenscommissioner.gov.uk/info/csegg1>