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| --- | --- | --- | --- | --- | --- | --- | --- |
| Sefton Council  Team…  Tel:  Fax: | | | | | | | |
| **Multi-Agency Exploitation Screening Tool** | | | | | | | |
| **Details of Child:** | | | | | | | |
| Family Name | |  | | Given Names | |  | |
| Actual DOB | |  | | Gender | |  | |
| Ethnicity | |  | | Primary Language | |  | |
| Primary Address | |  | | Telephone | |  | |
| Secondary Address | |  | | Case Number | |  | |
| **Multi-Agency Exploitation Screening Tool**  **The purpose of the tool is to enable professionals to identify indicators which suggest a child is, or is at risk, of Exploitation, in a consistent way which facilitates sound judgement. The screening tool can be used for all children (male and female) at any point in the child’s journey and with young people up to 21yrs. It can be used by any practitioner working with and supporting children or young people where there is a concern a child may be exploited.** | | | | | | | |
| **Important points to remember when considering exploitation:**Both girls and boys can be victims of exploitation and are equally vulnerable.The coercer(s) and perpetrator(s) are usually adult(s), but children and young people can also act in an exploitative, 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 exploitation of their children.Groups of children and multiple perpetrators may be involved (organised abuse).No child under 13 years should be assessed as Low Risk if behaviours indicate a risk of exploitation.Children with additional needs require special consideration up to the age of 21 years.No child with a learning disability or additional learning needs should be assessed as Low Risk if behaviours indicate involvement in or risk of exploitation.Be aware: disclosure of information by the child may take time and evident risks may only emerge during ongoing assessment, support and interventions with the child and/or family. | | | | | | | |
| **Guidance on the use of the Screening Tool**Completion of the Screening Tool should always involve liaison with other agencies to ensure multi-agency Information sharing and support.The screening tool is intended to assist professional judgment by considering a range of features and indications of exploitation and associated behaviours. Professionals are encouraged to go beyond the child’s presenting behaviour e.g. missing or challenging behavioural to explore what else might be going on for this child/young person. This often requires a prediction of harm.If a child presents with one indicator, action is required. Early intervention improves the chances of positive outcomes. One indicator is unlikely to require Children’s Social Work Services or specialist services intervention unless it is a Significant Risk category. Early help and prevention services within the community should always be considered.Assessing or screening for child exploitation should not be seen as a one- off event. Young people can move very quickly between risk categories, therefore regular assessments should be undertaken using the Screening Tool. Any escalation of risk should be referred to the named Children’s Services worker or CHAT, if unknown.Using the Screening Tool will determine which level of intervention is required dependent on the assessed level of risk. If in doubt, please contact Sefton Children’s Help and Advice Team (CHAT) on **0151 934 4013**.Disruption and prosecution of the perpetrator/s is also of significant importance therefore, any information which comes to light about the victim/s or perpetrator/s (however insignificant this may seem) should be passed on to the Police. | | | | | | | |
| **IMMEDIATE SAFEGUARDING CONCERNS:**If you are concerned that a child or young person is at immediate risk of harm then you should dial ‘999’ and tell the Police. If you have information which might help protect a child, you should dial 101.  To report any ‘intelligence’ that does not require immediate action, you can use the Merseyside Police Reporting form via this [link](https://www.merseyside.police.uk/contact/af/contact-us/contact-us-to-discuss-something-else/). | | | | | | | |
| **Personal Details:** | | | | | | | |
| Date form completed: | |  | | | | | |
| **Details of Person completing the Screening Tool:** | | | | | | | |
| Name: | |  | | | | | |
| Organisation/role: | |  | | | | | |
| Telephone No: | |  | | | | | |
| Email address: | |  | | | | | |
| **Young Person’s Information:** | | | | | | | |
| Full name | |  | | | | | |
| Gender | |  | | | | | |
| DoB | |  | | | | | |
| LL ID Number | |  | | | | | |
| Address: | |  | | | | | |
| School/Education Setting | |  | | | | | |
| EHCP? | | Yes/No/Unknown\* | | | | | |
| \*If unknown, when is it going to be obtained? | |  | | | | | |
| Social Care Case Level | | CP/Cared For/CIN/Not open at time of referral/YOT/Early Help | | | | | |
| Ethnicity | |  | | | | | |
| Age at time of assessment | |  | | | | | |
| **Alleged Perpetrators’ Details (if known)** | | | | | | | |
| **Family Name** | **First Name(s)** | **Middle Name(s)** | **Alternative Name:** | **Date of Birth:** | **Gender:** | **Ethnicity:** | **Age:** |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
| **Risk Assessment** | | | | | | | |
| Did the Child/Young Person participate in this assessment? | | Yes/No\* | | | | | |
| \*If yes, what are their views? | |  | | | | | |
| \*If no, why not? | |  | | | | | |
| **Significant Risk Select all appropriate options** | | | | | | | |
| |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | | |  |  | | --- | --- | |  | Previous victim of CE | |  | Unexplained gifts or additional mobile phone/Simcard | |  | Visiting hotels with adults/ or other young people | |  | Visiting nightclubs with adults | |  | Recruiting others into exploitative situations | | |  |  | | --- | --- | |  | Meeting known or unknown adults inappropriately | |  | Being groomed to meet via the internet | |  | Transported from town to town for sexual /or criminal activity with adults (including purchase of train tickets and taxi fares) | |  | New Clothes / phones / money / jewellery / drugs / cigarettes | |  | Over sexualised appearance | | |  |  | | --- | --- | |  | Associating with known CE perpetrators/ drug dealers or other victims of exploitation | |  | Presence at hotspot CE areas such as taxi ranks, bus stations, off licences and take-aways | |  | Information of direct involvement in exploitation | |  | Engaging in sexual activity with adults or with peers at young age | |  | Presence or frequenting red light areas | | |  |  | | --- | --- | |  | Other | |  | No factors identified | | | | | | | | | |
| **Please provide further information:** | |  | | | | | |
| **Strong Indicators of exploitation Select all appropriate options** | | | | | | | |
| |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | | |  |  | | --- | --- | |  | Considerable change in school performance / attendance / behaviour | |  | Multiple callers to address | |  | Receiving calls/text from unknown person / additional unexplained mobile phone or other mobile device | |  | Self-harming and/or suicide tendencies / Substance misuse | |  | Association with other victims of exploitation | |  | Multiple Perceived boyfriends/girlfriends | |  | Involvement in crime or anti-social behaviour | | |  |  | | --- | --- | |  | Regular STI’s or Emergency Contraception | |  | Forming relationships via internet | |  | Missing or Absent from home episodes | |  | Entering or leaving unknown vehicles | |  | Found in areas with no known connection | |  | Overly sexualised behaviour for age | |  | Victim of exploitative relationships | | |  |  | | --- | --- | |  | Involved in gang type activity. Possessing large amount of unexplained cash. Suspicious bank account activity | |  | Association with risky adults | |  | Pregnancy and/or termination | |  | Unexplained relationships with adults | |  | Evidence of self-harming | |  | Older boyfriend/girlfriend or friendship groups | |  | Unexplained physical injuries | | |  |  | | --- | --- | |  | Exclusion from school due to behaviour – may not have been excluded - reduced timetable/alternative provision | |  | Change in physical appearance - weight loss/ weight gain / external signs such as extreme fatigue or sudden increase in make-up, tattoos, piercings etc | |  | Other | |  | No factors identified | | | | | | | | | |
| **Please provide further information:** | |  | | | | | |
| **Early Indicators of CSE Select all appropriate options** | | | | | | | |
| |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | | |  |  | | --- | --- | |  | Absent/truanting from school | |  | Detached from age related activities | |  | Lack of interest in education | |  | Physically aggressive to other family members | | |  |  | | --- | --- | |  | Frequent poor behaviour | |  | Secretive relationships | |  | Returning home late | |  | Secretive behaviour | | |  |  | | --- | --- | |  | Becoming estranged from family | |  | Mood swings | |  | Hostility towards other family members | |  | Secretive about internet use | | |  |  | | --- | --- | |  | Change in appearance – including sudden increase in make-up or tattoos or piercings etc | |  | Change in sporting or leisure activities/ interests (e.g. no longer interested in football / dancing when they used to be) | |  | Other | |  | No factors identified | | | | | | | | | |
| **Please provide further information:** | |  | | | | | |
| **Vulnerability Factors Select all appropriate options** | | | | | | | |
| |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | | |  |  | | --- | --- | |  | Live in a chaotic or dysfunctional family | |  | Low self-esteem or confidence | |  | Parents/carers with mental health problems | |  | Live in residential or foster care or unstable adoptive placement | |  | Drugs or alcohol abuse | | |  |  | | --- | --- | |  | Mental health problems | |  | Sexually active | |  | Subject of bullying | |  | History of sexual abuse within the family | |  | Social or learning difficulties | | |  |  | | --- | --- | |  | Recent bereavement or loss | |  | Homeless | |  | Parents/carers with drugs or alcohol abuse | |  | Migrant, refugee or asylum seeker | |  | Unsure of their sexual orientation/ difficulties with identity | | |  |  | | --- | --- | |  | Previous victim of CE | |  | Lack of protective factors within family unit | |  | History of domestic abuse within the family | |  | Other | |  | No factors identified | | | | | | | | | |
| **Please provide further information:** | |  | | | | | |
| **Additional Comments:** | |  | | | | | |
| **Name(s) and Signature(s) of Professional(s) making this assessment** | | | | | | | |
| **Name:** | |  | | | | | |
| Organisation/role: | |  | | | | | |
| Add professional? (yes/no) | |  | | | | | |
| Choose the manager to authorise this form: | |  | | | | | |
| **Management oversight:** | | | | | | | |
| **Please provide your oversight:** | |  | | | | | |
| **Child Exploitation Team Decision:** | | | | | | | |
| **Progress to Child Exploitation?** | | Yes/No | | | | | |
| **Is the Child/Young Person:** | | * **Suffering** significant harm through exploitation?\* * At  **risk**  of suffering significant harm through exploitation?\*\*  \*Start Exploitation process managed by Child Exploitation.\*\*Start Exploitation process and re-assign to Social Work Team Manager. | | | | | |
| **Please provide comments:** | |  | | | | | |