

**Exploitation Screening Tool**

**Children, Young People and Adults**

Please complete the Exploitation Screening Tool if you have concerns that a child/young person/adult is at risk from exploitation. Please consider completing the screening tool with the individual.

This screening tool provides some examples of indicators you may see if someone is being exploited, you may not see all of them or any of them, so those included are a guide, you do not have to tick all, but please do highlight those you are concerned about. It is more important that you are able to share your professional judgement for each section.

It’s important to engage the child/young person/adult in a dialogue around your concerns and where appropriate their family/carers.

All completed tools MUST be forwarded to [mash@torbay.gov.uk](mailto:mash@torbay.gov.uk) at Torbay Children’s Services

**1. DETAILS OF CHILD/YOUNG PERSON/ADULT**

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| **Name of Child/Young Person/Adult:**  Forename(s)……………………………… Surname ………………………………………  D.O.B.…….…...………….............. Ethnicity………………………….. ……………  Gender………………………….….. Disability (Y/N) & Details ….…………………  Language …………………………. Translator Needed? ………………………….  Gender Identity…………………… Sexual Orientation……………………………..  Address……………………………………………………………………..  Postcode….………………………..  **Detail of who child/young person/adult lives with, including siblings:**  Forename(s)……………………………… Surname ………………………………………  D.O.B.…….…...………….............. Ethnicity…………………………..  Gender………………………….….. Disability ….………………………  Forename(s)……………………………… Surname ………………………………………  D.O.B.…….…...………….............. Ethnicity…………………………..  Gender………………………….….. Disability ….………………………  **Parent/Carer Details**:   Forename(s) ………………………….. …Surname ………………………….. ……  Relationship: ………………………….. Contact No. …………………………..………  Forename(s) ………………………….. …Surname ………………………….. ……  Relationship: ………………………….. Contact No. …………………………..………  **Current level of support/legal status (please tick):**  **No Plan/formal support** **EHA/Early Help Plan** **Undergoing Social Care Assessment**  **Child in Need Plan** **Child Protection Plan  UASC  YOT/Probation  Any Adult Order**  **Cared For (LAC):**  **S.20 Care Order Interim Care Order** |
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**2. SCREENER’S DETAILS**

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| **Screener’s Details:**  Name …………………………………………Date completed ……………………………………  Agency Name ……………………………… Job Title…………………………………………  Email address…………………………………Telephone No.………………  **Have you discussed the completed tool with your line manager or safeguarding lead before submission?** YES / NO |
| **Lead practitioner name and contact details (if different from screener) :**  Name …………………………………………   Agency Name ……………………………… Job Title…………………………………………  Email address…………………………………Telephone No.………………  **Details of other professionals involved (including agency):**  Name …………………………………………   Agency Name ……………………………… Job Title…………………………………………  Name …………………………………………   Agency Name ……………………………… Job Title…………………………………………  **Is this child/young person/adult placed from a different Local Authority?**  **YES / NO**  If yes – state which and if known what date have they been placed since?  Local Authority………………………………… Date placed…………………………………. |

**Best practise would be to inform/consult with parents; however, this may prove detrimental in certain cases. It may not always be in the child/young person/adult’s best interests to inform parents and each case should be considered individually.**

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| **Further Information** | Yes | No |
| Are parents/carers aware of your concerns? |  |  |
| Is the child/young person/adult aware of your concerns? |  |  |
| Please give details, where the answer is no: | | |
| Who does the child/young person/adult have a key relationship with? | | |

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| **3. CHILD/YOUNG PERSON/ADULT’S SITUATION**   |  |  |  |  |  | | --- | --- | --- | --- | --- | | **Child/Young Person/Adult** | | Current or during the past 6 months | 6 – 12 months ago | Non-recent more than 12 months ago | | **Please summarise:** | | | | | | **What are you worried about for the individual?** | **What is working well for the individual?** | | | | |  |  | | | | | **Concerns - e.g:**   * Evidence of multiple sexual contacts/abuse * Groomed to commit ASB/or crime * Groomed to use/carry and/or conceal weapons | |  |  |  | | **Unexplained amounts of money, expensive clothes or other items – e.g:**   * More than one mobile phone, sim cards or use of a phone that causes concerns – multiple callers or more texts/pings than usual * Unaccounted for money/goods/jewellery/paraphernalia * Bank card repeatedly lost/having bank cards with other people’s names on * No form/multiple forms of identity * Required to earn a minimum amount of money every day/fearful of money being removed from them by professionals/deprived of earnings by another person * In debt bondage or “owes” money to other persons | |  |  |  | | **Groomed/abused via the Internet and mobile technology – e.g:**   * Groomed to take/share images of self or others. * Using internet and targeted online by those who pose a risk. * Evidence of displaying or receiving sexualised bullying via the internet/social media * Multiple social media accounts on the same platform * Excessive texts and calls/changes in behaviour or presentation or being enticed to leave in response to phone/internet activity (aggressive/anxious) * Poor privacy setting on social media and how to stay safe online * Secretive of mobile phones | |  |  |  | | **Evidence of sexual/physical assault including where followed by withdrawal of allegation – e.g:**   * Victim of knife crime * Victim of rape, sexual assault, online exploitation * Evidence of injuries * Victim of offence | |  |  |  | | **Physical injuries without plausible explanation/physical symptoms of exploitation – e.g:**   * Evidence of injuries consistent with punishment * Overly tired in school/work * Indication of manual labour – condition of hands/skin/backaches etc * Injuries which appear old but have had no medical attention | |  |  |  | | **Sexually transmitted infections/pregnancies/termination of pregnancies/miscarriages or stillbirths – e.g:**   * Multiple terminations as unable to access contraception due to being controlled by another. * Injuries consistent with rape and sexual assault * Presenting to GP/Maternity Services late in pregnancy | |  |  |  | | **Drug and/or alcohol (mis)use – e.g:**   * Suspicion of/or arrested for possession of or supply drugs due to coercion * Drug dealers demanding money for drug alleged debt/bondage * Evidence of drugs on child/young person or adult * Increasing use of drugs and alcohol | |  |  |  | | **Self-harming/suicide attempts/ eating disorders/aggression/depression/anxiety – e.g:**   * Identify specific concern | |  |  |  | | **Significant changes in normal presentation please specify – e.g:**   * Changes in presentation e.g. dress/behaviour/language * Story very similar to that given by others e.g. coached | |  |  |  | | **A & E attendance of concern or with no plausible explanation – e.g:**   * No appropriate adult in attendance and they appear unwilling to share details * Attendance with adult/peer who appears controlling * Implausible explanation of presenting symptoms * Multiple attendance at A and E, GP | |  |  |  | | **Professionals are unable to engage, with support services/key worker – e.g:**   * Not registered with or attended a GP practice or other health professionals | |  |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | | **Home** | | Current or during the past 6 months: | 6 - 12 months ago | Non-recent more than 12 months ago | | **Please summarise:** | | | | | | **What are you worried about for the individual?** | **What is working well for the individual?** | | | | |  |  | | | | | **It is unclear whether the individual is under duress to go missing – e.g:**   * Child/young person/adult regularly goes missing * Work has been done to inform the carer of the importance of reporting the individual missing but known episodes of being away from home for significant periods of time have not been reported. * Returning home with injuries, and/or dishevelled. | |  |  |  | | **Lack of information about family dynamics/parenting/caring role of those adults accompanying them – e.g:**   * Being accompanied to appointments by an unknown person that causes concern * Unable to confirm name or address of person meeting them on arrival/address or name given gives rise to concern * Cared for by adults who are not their parents/carers or where the relationship appears controlling/exploitative | |  |  |  | | **Homelessness - e.g:**   * Unsuitable/inappropriate accommodation/sofa surfing/financially unsupported * Unregistered private fostering arrangement | |  |  |  | | **Family conflict/ breakdown/of emotional support/secure relationships/security/bereavement through death, loss, illness of a significant person in their life including divorce and family separation.** | |  |  |  | | **Family involved in crime or exploitation** | |  |  |  | | **Family relationships are breaking down due to influence outside the home.** | |  |  |  | | **Registered at multiple addresses** | |  |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | | **Peers** | | Current or during the past 6 months: | 6 - 12 months ago | Non-recent more than 12 months ago | | **Please summarise:** | | | | | | **What are you worried about for the individual?** | **What is working well for the individual?** | | | | |  |  | | | | | **Contact of concern with adult (male or female) or young person, which might involve physical and/or emotional abuse/sexual abuse and/or gang activity – e.g:**   * Relationship abuse which may be same sex relationship * Believing they are in a relationship with an older adult/peer relationship * Other relationship where control appears to be present that indicates concern * Associations with others known or suspected to be groomed/coerced | |  |  |  | | **Regular/Multiple contacts from unknown adults/young people of concern – e.g:**   * On the telephone/text/messaging apps * Online via social media/gaming/email * Excited about new friendships that are unknown   Being offered work/ways to earn money | |  |  |  | | **Harmful behaviour and/or attitudes that exist within the individual’s peer network.** | |  |  |  | | **Siblings involved in exploitation** | |  |  |  | | **Isolated from or reduced contact with normal peers /social networks** | |  |  |  | | **The individual have been bullied or is a member of a peer network that has been victimised or bullied.** | |  |  |  | | **The individual is part of a peer group where concerns about sexualised behaviour have been raised.** | |  |  |  | | **Harmful or oppressive attitudes towards young women in the peer group.** | |  |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | | **School/Education/Employment** | | Current or during the past 6 months: | 6 – 12 months ago | Non-recent more than 12 months ago | | **Please summarise:** | | | | | | **What are you worried about for the individual?** | **What is working well for the individual?** | | | | |  |  | | | | | **Whereabouts unclear or unknown – day and/or night – e.g:**   * Unusual hours/regular patterns of leaving or returning which indicates probable grooming/coerced | |  |  |  | | **Absences/exclusion from/or not engaged in school/college/training/work – NEET – e.g:**   * Unscheduled or irregular attendance or leaving early from education/work * Being on a part time timetable/reduced hours * Suspended or excluded from EET provision and not in alternative structure (not registered EET) * Elective home educated/work but concern around this and whereabouts during day * Missing from education (CME/MFE ), work/NEET | |  |  |  | | **Poor school/work (EET)** (current in last 6 months) **– e.g:**   * Deterioration in school work results, performance, behaviour | |  |  |  | | **Regular/Multiple contacts from unknown adults/young people of concern at educational provision/work/home or placement** | |  |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | | **Place/Location** | | Current or during the past 6 months: | 6 - 12 months ago | Non-recent more than 12 months ago | | **Please summarise:** | | | | | | **What are you worried about for the individual?** | **What is working well for the individual?** | | | | |  |  | | | | | **Having unexplained contact with hotels, residential properties, taxi companies, fast food outlets or other businesses/organisations which cause concerns – e.g:**   * Unknown hotels/B&Bs * Being picked up/trafficked by different or the same taxi, and/or drivers on a regular basis with no plausible explanation or money to pay for them * Travelling across areas/out of borough * Uniform or business branded items | |  |  |  | | **One among a number of unrelated children/young people/adults found at one address** | |  |  |  | | **Pattern of homelessness** | |  |  |  | | **Located/recovered from a place of exploitation e.g. area with exploitation concerns, cuckooed premises, criminality** | |  |  |  | | **Hotel keys/keys to houses, flats or other premises/keys to cars** | |  |  |  |  |  |  | | --- | --- | | **Locations/premises/environments** | | | Are there any locations or premises that this child/young person/adult or others frequent(s), or has been seen in, that are a cause for concern? (*For example areas where young people congregate with little or no adult supervision, or where adult to child contact is facilitated, including online spaces.)* **Please submit Force Intelligence Bureau form Devon and Cornwall:** <https://www.devon-cornwall.police.uk/contact/contact-forms/partner-agency-information-sharing-form/>    Please provide further details: | | |  |     **4. PERPETRATORS**  **Please submit Force Intelligence Bureau form to Devon and Cornwall Police:** <https://www.devon-cornwall.police.uk/contact/contact-forms/partner-agency-information-sharing-form/>   |  | | --- | | **Suspected Perpetrator(s)** | | Please provide details of any known or suspected perpetrators associated with this child/young person/adult or others, including:   * names and/or nicknames; * any distinguishing marks e.g. tattoos, piercings; * details of any vehicles driven by the suspect(s); * Locations/premises where the suspect has been seen/or is known to frequent.  |  | | --- | |  | |   **5. PROFESSIONAL JUDGEMENT BASED ON TOOL**  **Based on the information available and in your professional judgment, do you consider this child/young person/adult at**  **no risk of exploitation**  **There is evidence of risk of exploitation**  **There is evidence that they are being exploited**  **Please summarise:**  **Please send completed tool to mash@torbay.gov.uk** |