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| **Child Exploitation and Risk outside the Home** | |
| **Practitioner Information** | |
| Practitioner |  |
| Assessment started on |  |
| **Young Person's Information** | |
| Forename |  |
| Surname |  |
| Date of Birth |  |
| Age |  |
| Gender |  |
| Address |  |
| Other Address  (e.g., stays with parent at weekends) |  |
| Telephone (Primary Contact) |  |
| Nationality |  |
| Ethnicity |  |
| Primary Language |  |
| Current Key Agencies |  |
| Poor Attendance? | |  |  | | --- | --- | | ☐ | No | | ☐ | Yes | | ☐ | NEET | | ☐ | Other (e.g., in employment) | |
| Current Legal Status |  |
| Disabilities |  |
| SEND/ Learning Disability |  |
| Substance Misuse | |  |  | | --- | --- | | ☐ | Alcohol | | ☐ | Drugs | | ☐ | Both | | ☐ | Neither | | ☐ | Not Known | |
| Missing Person Episode |  |
| **Child Exploitation & Risk Outside the Home** | |

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| Are there any concerns in this area? | |  |  | | --- | --- | | ☐ | Yes | | ☐ | No | |
| **Please complete the following sections in relation to your concerns** | |
| Please tick the boxes which best describe your areas of concern | |  |  |  |  | | --- | --- | --- | --- | | ☐ | Child Sexual Exploitation (CSE) | ☐ | Intimate Partner Violence | | ☐ | Child Criminal Exploitation (CE) | ☐ | Modern Slavery | | ☐ | Serious Youth Violence | ☐ | Online Exploitation | | ☐ | County Lines | ☐ | Racial Abuse | | ☐ | Peer on Peer Abuse | ☐ | Antisocial Behaviour (ASB) | | ☐ | Harmful Sexual Behaviour | ☐ | Other | |
| **What are your current concerns around Risk outside the Home?**  Please provide a detailed account of your current concerns and the risks. Include any relevant information around missing episodes/school absences, physical injuries, change in presentation, offending behaviour, concerning relationships, unexplained items, victim of offences, potential perpetrators, county lines etc. Please be as specific as possible, giving dates, examples of incidents |  |
| **Young person’s vulnerabilities**  Please document any current concerns or vulnerabilities around school attendance, special educational needs (SEND), missing episodes, substance misuse, looked after child, substance misuse, self-harm, suicide, familial concerns etc. Please also consider previous relevant information and record as necessary |  |
| **Peer Group Information** | |
| Are there any concerns in this area? | |  |  | | --- | --- | | ☐ | Yes | | ☐ | No | |
| **Please complete the following sections in relation to your concerns** | |
| Children, young people or adults involved (please include names of known peers, associates and/or perpetrators)  **Please record any known information and add additional rows if required**  If completed, please attach a peer map showing relationships between the group and any identified perpetrators and locations | |
| |  |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | --- | | Name/Nickname/Known as (whatever information is known) | Date of Birth (whatever information is known) | Age (whatever information is  known, could be approx age, age range, etc.) | Gender (whatever information is known) | Address (whatever information is known) | Ethnicity (whatever information is known) | School Education Setting/Workplace (whatever information is known) | Are they open to Social Care? | Peer ID if known | |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  | | |
| Please list other known information relevant to peer group members (eg learning difficulties, alternate address, known to YOT, etc) |  |
| **What are the concerns around this group?**  Provide a detailed account of your concerns and risks including group dynamics. |  |
| **Location Information** | |
| Are there any concerns in this area? | |  |  | | --- | --- | | ☐ | Yes | | ☐ | No | |
| **Please complete the following sections in relation to your concerns** | |
| Town/Place | |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | | ☐ | Amesbury | ☐ | Lavington | ☐ | Salisbury | | ☐ | Bradford on Avon | ☐ | Ludgershall | ☐ | Tidworth | | ☐ | Bulford | ☐ | Lyneham | ☐ | Tisbury | | ☐ | Calne | ☐ | Malmesbury | ☐ | Warminster | | ☐ | Chippenham | ☐ | Marlborough | ☐ | Westbury | | ☐ | Corsham | ☐ | Melksham | ☐ | Wilton | | ☐ | Cricklade | ☐ | Mere | ☐ | Other (In county) | | ☐ | Devizes | ☐ | Pewsey | ☐ | Other (Out of county) | | ☐ | Downton | ☐ | Purton | ☐ | Salisbury | | ☐ | Hilperton | ☐ | Royal Wootten Bassett | ☐ | Tidworth | |
| If other (in county), please state where; |  |
| If other (out of county), please state where; |  |

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| Type of Premises | |  |  |  |  | | --- | --- | --- | --- | | ☐ | Residential Address | ☐ | Shop/Supermarket | | ☐ | Open Space (e.g., Park, Town Centre, Car Park) | ☐ | School/Education Establishment | | ☐ | Hotel/AirBnB | ☐ | Military Camp | | ☐ | Takeaway/Food Outlet | ☐ | Transport Network e.g., Taxi, Bus, Train inc Station | | ☐ | Public House | ☐ | Other | |
| If other, please state |  |
| What are your concerns around this/these location(s)?  Please provide a detailed account of your concerns including any addresses (inc postcode where possible), individuals and/or vehicles. And dates and times of any incidents  These can be the name of a business (e.g., McDonalds) or a description (e.g., the alley behind the houses in Bythesea Road) |  |
| **Online & Social Media Information** | |
| Are there any concerns in this area? | |  |  | | --- | --- | | ☐ | Yes | | ☐ | No | |
| **Please complete the following sections in relation to your concerns** | |
| Is there evidence that technology and/or social media is being used? | |  |  | | --- | --- | | ☐ | Yes | | ☐ | No | |
| If yes, which types of social media and apps are of most concern? Tick all which apply | |  |  |  |  | | --- | --- | --- | --- | | ☐ | Facebook | ☐ | Grindr | | ☐ | Twitter | ☐ | Tumblr | | ☐ | Instagram | ☐ | Yubo | | ☐ | Snapchat | ☐ | Reddit | | ☐ | TikTok | ☐ | Discord | | ☐ | YouTube | ☐ | Yellow | | ☐ | WhatsApp | ☐ | Omegle | | ☐ | Roblox | ☐ | Other | | ☐ | Tinder |  |  | |
| If Other, please state which one(s) |  |
| Do these have cause for concern?  Tick all that apply and provide information in the box below | |  |  |  |  | | --- | --- | --- | --- | | ☐ | Gaming/Console | ☐ | Sexualised messages/pictures | | ☐ | Multiple Phones | ☐ | Online Grooming | | ☐ | Multiple Sim Cards | ☐ | Dark Web use | | ☐ | Excessive calls or texts | ☐ | Hacking/Online criminality | |
| Describe your concerns with these technologies where known, include info about IP addresses, URLs, phone numbers, social media handles, usernames etc. |  |
| **Views & Analysis** | |
| **Please complete the following sections and consider strengths and protective factors**  Consider strengths for individuals but also contexts – are there strengths in the places or spaces the young person is at risk? Are there people with responsibility for/a reach into places could who could help safeguard young people in this space? | |
| **Young Person's views**  Include any strengths and protective factors helping to reduce the risk of harm |  |
| **Parent/Carer's views**  Include any strengths and protective factors helping to reduce the risk of harm |  |
| **Professionals' analysis**  Include any strengths and protective factors, relevant history and views on what should happen next |  |
| **Manager Review** | |
| Manager's Comments |  |
| Name |  |
| Date |  |
| **Emerald Review (Not to be completed by referrer)** | |
| Following Emerald review at ROTH panel, concerns are currently assessed as:  Green - minimal evidence at present to suggest risk outside the home  Amber - risk outside the home identified  Red - high risk outside the home identified and immediate action required to reduce risk | |  |  | | --- | --- | | ☐ | Green | | ☐ | Amber | | ☐ | Red | |
| Manager's comments and rationale |  |
| Outcome | |  |  | | --- | --- | |  | Intelligence submission | |  | Safer Young People Context Meeting | |  | Safer Young People Strategic Group | |  | Allocation of Young People's Support Worker | |  | Risk Management Panel | |  | Harmful Sexual Behaviour (HSB) Consultation | |  | Send guidance and resources | |  | MASH Referral | |  | National Referral Mechanism (NRM) | |  | Other | |
| Name |  |

|  |  |
| --- | --- |
| Date |  |