**GET SAFE Risk Assessment**

# Guidance for practitioners

The information given throughout this form must be typed.

To support you in completing this GET SAFE risk assessment please use the GET SAFE Practitioners guide:

Language is extremely important when we talk about children who are victims of harm and abuse through exploitation and therefore the following guidance will assist you in how you describe events and risks in this assessment form: [**Appropriate Language – Children’s Society Guidance for Professionals**](https://www.csepoliceandprevention.org.uk/sites/default/files/Guidance%20App%20Language%20Toolkit.pdf)

If you have intelligence about a location and / or suspected perpetrator(s) this information can be shared with police by emailing any intelligence to [**CEHerefordshire@westmercia.police.uk**](mailto:CEHerefordshire@westmercia.police.uk)

If the matter requires Police attendance and a crime has been committed call 101 or 999 if urgent. Please do not use this method to report any safeguarding concerns. This should be done through a MARF.

Any professional working with children, young people or care leavers where they are concerned about exploitation, should complete this tool. Exploitation includes: sexual, criminal, financial, modern slavery, FGM, honour based violence, peer on peer abuse and radicalisation. This tool should be completed with reference to Herefordshire’s multi-agency safeguarding procedures. **If the level of risk is assessed as EMERGING a MARF will not need to be included with this risk assessment. If MODERATE or above, please make a referral MARF to MASH and include the completed risk assessment.** All GET SAFE Risk Assessments should be sent to Get Safe via [**referralscypd@herefordshire.gov.uk**](mailto:referralscypd@herefordshire.gov.uk)

It is always best practice to complete the tool with the young person you are worried about, however if they do not wish to complete it, you should still complete all information to the best of your knowledge if you are concerned that the young person is at risk of, or is being, exploited. You can ask other professionals working with the young person to contribute to the assessment.

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Name and role of person completing assessment** | |  | | **Agency of person completing assessment** | |  | |
| **Date** | |  | | **YOS Involvement**  (Yes / No / Previous) | |  | |
| **Child or young person’s name** | |  | | **Known to Police**  (No / Victim / Offender / Both) | |  | |
| **Gender** | |  | | **CAMHS**  (Yes / No / Previous) | |  | |
| **Ethnicity & Religion** | |  | | **Education Placement** (Name of School) | |  | |
| **Date of birth** |  | **Age** |  | **Part time timetable** | **Yes / No** | **PRU** | **Yes / No** |
| **Mosaic ID** | |  | | **Current Attendance** (%) | |  | |
| **Status**  (i.e. Early Help, S17, S47, CP Plan, looked after, care leaver) | |  | | **Special Educational Needs / Disability**  (If yes, what?) | |  | |
| **Home Address**  (Address / Postcode) | |  | | **Alcohol Misuse** (Yes/No, Suspected) | |  | |
| **Accommodation Type** (i.e. Family home, Residential, Foster Care, Kinship Care,, Supported Lodgings) | |  | | **Substance Misuse** (Yes/No, Suspected)  (List any known drugs used) | |  | |
| **Engaging with sexual health services**  (Not required, yes, no) | |  | | **Engaging with substance misuse services** (Not required, yes, no) | |  | |

# Consent

|  |  |
| --- | --- |
| ***CONSENT***  Has the child given consent to the completion of this Risk Assessment?  YES/NO……………..  Please record any views/comments of the child…………….………………  ………………………………………………………………………………………………………  NO (Tick) if no please state why………………………………………..…………..  ……………………………………………………………………………………………………… | ***Have parents/carers given consent to the completion of this Risk Assessment and information sharing?***  YES/NO……………..  If NO, please state why they have not been informed: …………………….  ……………………………………………………………………………………………...…………  If YES, please state any comments or views …………………………..………..  …………………………………………………………………………………………………..……  Please record any views of both parent/carers. |

# Diagram:

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Circles diagram of child, home and family, peers, schools, neighbourhood to indicate the wider issues affecting a child | | | | Child  * Persistently going missing from school or home. Unexplained sums of money, clothes, or mobile phones * Health concerns * Change in behaviour * Radical thoughts * Change in physical and/or emotional presentation that are not age appropriate/out of character  Home/family  * Regularly leaving their home without explanation * Recent negative change in quality of relationships at home * Poor or negative communication with young person not responding to boundaries, routines or consequences * Culture * Expectations of family * Neglect * Domestic Abuse * Parental Capacity * Parents offending or in prison | Peers (other young people of their age)  * Relationships with controlling individuals or groups. * Peers who are using illegal substances * Peers who are known by criminal justice agencies * Spending more time with peers in the community/whereabouts unknown * Peer group violence/sexual offending  Schools  * Significant decline in educational attainment and attendance * Bullying * NEET * Special Educational Needs * Exclusions/Alternative Educational Provision * Peer recruitment  Neighbourhood  * Public Transport – use of * Anti-Social Behaviour or Criminal Behaviour * Gangs, Risky Adults/Locations * Parks, shopping centres, areas of concern * Any risks from the community in which they live | | |
| **EXPLOITATION RISK CATEGORIES** | | | | | | | | |
| **1.Running Away / Missing / Risky Environments**  **(Child/ neighbourhood)** | EMERGING | Regularly coming home late / absent without permission / returning late to care home / absent from school / whereabouts often unknown | | | | |  | |
| MODERATE | Frequently staying out overnight without permission / episodes of running away, missing from placement / looking uncharacteristically well cared for / regular breakdowns of placement due to behavioural problems/ found in risky area’s known for criminal activity/ Spending time in areas where CSE and or street sex work is known to have taken place/ spending time in areas where drug activity is known to take place/ fearful of going to certain areas. | | | | |  | |
| SIGNIFICANT | Persistently running away, going missing / pattern of street homelessness / whereabouts often unknown or of significant concern / talks about and/or known to travel to different areas or cities/ found in areas or properties known for CSE/ street work/ drug activity/ abducted and forced imprisonment. | | | | |  | |
| Evidence and professional judgement **OR** state if information NOT KNOWN or NOT A CURRENT CONCERN | | | | | | | |
| Actions taken by you or others to reduce the risks: | | | | | | | |
| **2.Coercion / Control / Contact with Abusive Persons / Gang Involvement**  **(Child/ Peers)** | EMERGING | Recent change in peer group / reduced contact with family or friends / late night phone / internet / social media contact/ Some association with unknown adults and / or other sexually exploited children and / or missing children / some association with manipulative peers / some association with gang and county lines involved adults or peers | | | | |  | |
| MODERATE | Secretive about having a mobile phone or more than one / extensive use of mobile phone / internet / social media / limited contact with family or friends/ observation of bruising or injury to body/ linked to other known young people or risky adults associated with gangs/ Associating with unknown adults and / or other sexually exploited children / young people and / or missing children / intelligence around possible county lines or gang members / getting into cars with unknown adults or suspected perpetrators of CSE / new or expensive possessions which cannot be accounted for / access to cash / money. | | | | |  | |
| SIGNIFICANT | Secretive about having a mobile phone or more than one / disclosure of or police intelligence regarding physical or sexual assault followed by withdrawn allegation or reluctant to report / no contact with family or previous friends / disappear from professional / disclosure of or police intelligence relating to county lines / gang activity involvement or links / talks about having drug debts and / or an urgent need for money / family or carers report hostile acquaintances coming to the door or telephoning / messaging frequently and / or making threats/ Identifying as a county lines or gang member / found in areas / properties known for CSE / street sex work / drug activity / evidence or police intelligence to suggest being moved around for sexual activity / abducted and forced imprisonment (described by young person as “locked in”). | | | | |  | |
| Evidence and professional judgement **OR** state if information NOT KNOWN or NOT A CURRENT CONCERN | | | | | | | |
| Actions taken by you or others to reduce the risks: | | | | | | | |
| **3. Concerning Relationships / Forced Marriage**  **(Child/ family)** | EMERGING | | Absence; request for extended leave/ home education; failure to return from visit to country of origin; surveillance by family; deterioration in behaviour; depression due to a relationship; withdrawn; speaking about a new partner. | | | |  | |
| MODERATE | | Known history of forced marriage in family; self-harm or suicide of siblings; married young; family members being accompanied to and from work; death of a parent in a family known for forced marriage; controlling and coercive behaviour in a relationship. | | | |  | |
| SIGNIFICANT | | Child has come from a community where forced marriage and ‘honour’ is culturally embedded; an announcement of engagement to a stranger not previously mentioned; anxious about a wedding abroad in their family; child pregnancy. | | | |  | |
| Evidence and professional judgement **OR** state if information NOT KNOWN or NOT A CURRENT CONCERN | | | | | | | |
| Actions taken by you or others to reduce the risks: | | | | | | | |
| **4. Substance Misuse / Selling of Substances / County Lines**  **(Child)** | EMERGING | | Experimenting with alcohol / cannabis / associating with young people known to use substances regularly. | | | |  | |
| MODERATE | | Regular use of or recent increase in use of substances / use of drugs in addition to alcohol / cannabis (e.g. MDMA, cocaine) / concerns for drug dependency / associating with known drug dealers / seen in known areas for selling drugs / seen associating with young people who are known to be running and involved in drug lines | | | |  | |
| SIGNIFICANT | | Evidence of dependency on alcohol / drugs / using opiates (e.g. heroin, codeine, methadone) / injecting of any substance / dealing of substances / found in areas / properties known for drug activity / supply of substances to others / CSE activity for paying off debts e.g. drug debt / known to be actively involved in networks that run drug lines | | | |  | |
| Evidence and professional judgement **OR** state if information NOT KNOWN or NOT A CURRENT CONCERN | | | | | | | |
| Actions taken by you or others to reduce the risks: | | | | | | | |
| **5. Concerns with Education / Missing from Education**  **(Schools)** | EMERGING | | Mainly engaged in education, employment or training / some attendance / behaviour issues / poor educational achievement | | | |  | |
| MODERATE | | Irregular / poor attendance / truanting from school / losing interest in education / periods of exclusion(s) / whereabouts during school hours unknown / poor educational achievement | | | |  | |
| SIGNIFICANT | | Not in education, training or employment / regular breakdown of school placements due to behavioural problems / whereabouts during school hours unknown and information suggesting links to CSE / county lines or gangs/ poor educational achievement | | | |  | |
| Evidence and professional judgement **OR** state if information NOT KNOWN or NOT A CURRENT CONCERN | | | | | | | |
| Actions taken by you or others to reduce the risks: | | | | | | | |
| **6.Use of Social Media / Phone / Technology**  **(Child)** | EMERGING | | Talking to / communication with unknown adults / peers via the internet / lack of awareness of online safety (young people and / or parents / carers) | | | |  | |
| MODERATE | | Use of internet to share inappropriate or sexual images / meeting in person, adults or peers following contact via social media / concerns young person may be being groomed / extensive and / or secretive use of internet | | | |  | |
| SIGNIFICANT | | Use of internet to regularly meet in person unknown adults or peers for sexual activity / evidence of sexual bullying through social media / internet / evidence of sexual material being shared online without young person’s consent | | | |  | |
| Evidence and professional judgement **OR** state if information NOT KNOWN or NOT A CURRENT CONCERN | | | | | | | |
| Actions taken by you or others to reduce the risks: | | | | | | | |
| **7. Concerning Sexual Activity / Sexual Health**  **(Child)** | EMERGING | | Sexually transmitted infections (STI’s) / access to and engagement with sexual health services | | | |  | |
| MODERATE | | Multiple or untreated sexually transmitted infections (STI’s) / concerning sexual activity with peers or adults / information from peers and / or community highlighting concerning sexual activity / frequent use of emergency contraception | | | |  | |
| SIGNIFICANT | | Repeated pregnancy and /or miscarriages and/or terminations / very concerning exploitative sexual activity with peers and / or adults / disclosure of sexual activity with boyfriend’s / girlfriend’s peers / having knowledge that sex can be exchanged for money and / or goods / relationship with suspected / known CSE perpetrators | | | |  | |
| Evidence and professional judgement **OR** state if information NOT KNOWN or NOT A CURRENT CONCERN | | | | | | | |
| Actions taken by you or others to reduce the risks: | | | | | | | |
| **8.Emotional / Physical Health**  **(Child)** | EMERGING | | Low self-esteem / some or reduced concerns of self-harm and / or eating disorders / difficulty in making or maintaining friendships with peers | | | |  | |
| MODERATE | | Low self-esteem impacting upon young person’s mental health / increased concerns of self-harm / violent or emotional outbursts / bullying or threatening behaviour / offending behaviour / difficulty in making or maintaining friendships with peers / concerns young person may be exposed to violence | | | |  | |
| SIGNIFICANT | | Chronic low self-esteem / changes or extremes in mental health / suicidal ideation / evidence of emotional abuse from domestic violence, as witness or victim / evidence of self-harm, eating disorders, previous suicide attempts or overdoses / frequent attendance at A&E / physical symptoms suggestive of sexual physical assault | | | |  | |
| Evidence and professional judgement **OR** state if information NOT KNOWN or NOT A CURRENT CONCERN | | | | | | | |
| Actions taken by you or others to reduce the risks: | | | | | | | |
| **9. Family Relationships / accommodation / Honour Based Violence**  **(Home/Family)** | EMERGING | | Accommodation generally meets needs of young person / support available from family, parents, carers / communication within home environment is good / known peers/ | | | |  | |
| MODERATE | | Overcrowding / living with other young people who are considered to be at risk of CSE / evidence of decline in relationship and / or communication with family, parents, carers / known peers and / or older siblings who are suspected to have county lines debts / lack of parental supervision or interest in the young person/ family belong to a community where honour based violence is suspected/ aggression/ anxiety to go home. | | | |  | |
| SIGNIFICANT | | Homeless or sofa surfing / young person often stays elsewhere / Lack of a trusting relationship / family, friends or peers are known or suspected perpetrators of CSE / parent is unavailable to them physically or emotionally/ surveillance at school by partner or family/ family belong to an ethnic community where honour based violence is traditionally acceptable/ frequent injuries said to be accidental/ accompanied to appointments. | | | |  | |
| Evidence and professional judgement **OR** state if information NOT KNOWN or NOT A CURRENT CONCERN | | | | | | | |
| Actions taken by you or others to reduce the risks: | | | | | | | |
| **10. Offending / Weapons/**  **Criminal Activity / Criminal Exploitation**  **(Neighbourhood)** | EMERGING | | Coming to the attention of the police / concerns about being involved with offending peers or associates / being in possession of cannabis / talked about or considered carrying a weapon. | | |  | | |
| MODERATE | | Known to be involved in drug related offending / police intelligence indicating or arrested, investigated or charged for offences of possession of offensive weapon, possession of drugs or theft / known to be connected with drug distribution networks and lines. | | |  | | |
| SIGNIFICANT | | Significant intelligence indicating or charged or convicted of robbery / use of offensive weapon / possession of large quantities of drugs / known to be active with drug distribution networks and lines / recruiting others to run drug lines and to organised crime / witness withdrawing statements and suspected intimidation. | | |  | | |
| Evidence and professional judgement **OR** state if information NOT KNOWN or NOT A CURRENT CONCERN | | | | | | | |
| Actions taken by you or others to reduce the risks: | | | | | | | |
| **11. Community/Social**  **Isolation Factors**  **(Neighbourhood)** | EMERGING | | Experiencing low levels of social isolation that may be exacerbated by deprivation (including a perceived inability or reluctance to access more mainstream support) / ethnic and / or cultural background dissonance / being a looked after child or care leaver / identifying as Lesbian, Bisexual, Gay or Transgender / Special Educational Needs / poor educational attainment any other factors / some protective community factors present and support evident. | | |  | | |
| MODERATE | | Experiencing moderate levels of social isolation that may be exacerbated by deprivation / ethnic and / or cultural background dissonance / being a looked after child or care leaver / identifying as Lesbian, Bisexual, Gay or Transgender / Special Educational Needs / poor educational attainment any other factors / some community protective factors are present but the young person is reluctant to access them / starting to socialise with or take an interest in offending peer or community activity / aspires to be part of a local gang or anti-social group. | | |  | | |
| SIGNIFICANT | | Experiencing high levels of social isolation that may be exacerbated by deprivation (including being part of an inward-looking community) / ethnic and / or cultural background dissonance / being a looked after child or care leaver / identifying as Lesbian, Bisexual, Gay or Transgender / Special Educational Needs / poor educational attainment any other factors / being targeted by groups or individuals due to their vulnerability / seeking inclusion or recognition from offending peers or communities / lack of community protective factors or disengagement by young person / known to be an active participant in a local gang or anti-social group. | | |  | | |
| Evidence and professional judgement **OR** state if information NOT KNOWN or NOT A CURRENT CONCERN | | | | | | | |
| Actions taken by you or others to reduce the risks: | | | | | | | |
| **12. Radicalisation**  **(Child)** | EMERGING | | Being drawn to conspiracy theories; beginning to isolate themselves from family and friends; viewing or engaging with inappropriate online content and having uncontrolled or unsupervised access to the internet; expressing concerns about being victimised, for example feeling under attack; discriminating against other individuals or groups of people; a sudden change in behaviour; showing interest in extremists or extreme groups; expressing views that divide us, for example talking about ‘us’ and ‘them’. | | |  | | |
| MODERATE | | Legitimising the use of violence to defend ideology or cause; accessing extremist or terrorist websites, forums and publications; expressing dehumanising views; expressing an interest to travel to a conflict zone; being in contact with a group or individuals known to support a violent extremist ideology, either online or in real life; expressing persistent intolerance towards groups of people perceived as ‘other’ - this may be based on protected characteristics such as gender, religion or ethnicity, but not exclusively; demonstrating a fixation with weaponry or explosives (this may include posing in concerning photographs or videos with weaponry), without an otherwise reasonable explanation; being obsessed with massacre, or extreme or mass violence, without targeting a particular group (for example, high school shootings). | | |  | | |
| SIGNIFICANT | | Verbally or physically attacking someone due to their race, religion, sexuality and so on; committing violent acts guided by a violent extremist ideology or group; taking part in any proscribed violent extremist group (financing, sharing material online, recruiting others and so on); having a ‘kill list’ or detailed plan to carry out mass violence; producing or sharing terrorist material offline or online; recruiting others to a proscribed terrorist group or organisation. | | |  | | |
| Evidence and professional judgement **OR** state if information NOT KNOWN or NOT A CURRENT CONCERN | | | | | | | |
| Actions taken by you or others to reduce the risks: | | | | | | | |
| **13. Modern Slavery /Forced Labour / Debt Bondage / Trafficking**  **(Child)** | EMERGING | | Child is not in education and is working; child is staying with friends with no parents or guardian present; child is an unaccompanied asylum seeking child; child cannot speak English or communicate; child cannot tell you how they came to the UK. | | |  | | |
| MODERATE | | Child lives in groups in the same place as they work; live in unsuitable accommodation; not dressed adequately for the work they do; have no access to their earning; have no labour contract; work long hours; no evidence of parental permission for child to stay in the UK; no pre-existing relationship with the adult they are staying with. | | |  | | |
| SIGNIFICANT | | Have no access to their parent or guardians; look intimidated; have no access to education; engaged in work not suitable for children; travel in groups who are not relatives; sexual activity within the place they live; child has shared they have been forced to work for their food and accommodation. | | |  | | |
| Evidence and professional judgement **OR** state if information NOT KNOWN or NOT A CURRENT CONCERN | | | | | | | |
| Actions taken by you or others to reduce the risks: | | | | | | | |
| **14. Female Genital Mutilation**  **(Child)** | EMERGING | | A female family elder is involved in care of child; family has limited integration in UK community; family have no understanding of harm of FGM or UK Law; child has spoken about long holiday to her country of origin where practice is prevalent; child has attended a vaccine centre for a holiday to country of origin; child withdrawn from PHSE lessons or learning about FGM in school; child presents with symptoms that could be related to FGM; family not engaging with health professionals. | | |  | | |
| MODERATE | | Family have no understanding of harm of FGM or UK Law; family have failed to attend appointment with an FGM clinic and reluctant for any genital examination; family have shared they practice FGM in their home country; family have failed to attend appointment with an FGM clinic and reluctant for any genital examination; Child comes from a family that is known to practice FGM, mother has undergone FGM herself. | | |  | | |
| SIGNIFICANT | | Family members have already had child who have undergone FGM; Family are requesting reinfibulation (closing of vagina) following childbirth; family who say that FGM is integral to cultural or religious identity; family already known to practice FGM; family who are returning to their country with female child following disclosing FGM beliefs; child has disclosed a ‘special procedure’ or ‘special occasion’ to go on holiday and ‘become a woman’ | | |  | | |
| Evidence and professional judgement **OR** state if information NOT KNOWN or NOT A CURRENT CONCERN | | | | | | | |
| Actions taken by you or others to reduce the risks: | | | | | | | |
| Any other information to support the Risk Assessment |  | | | | | | | |

Summary and Overall Risk Assessment- complete the table below with the responses to each risk category above.

|  |  |
| --- | --- |
| **Risk categories** | **Level of risk (emerging, moderate, significant, not known, not a concern)** |
| Running away / Missing / Risky environments |  |
| Coercion / control / contact with abusive person/ gang involvement. |  |
| Concerning relationships / forced marriage |  |
| Substance misuse / selling of substances / county lines. |  |
| Concerns with education / Missing from education |  |
| Use of social media / phone / Technology. |  |
| Concerning sexual activity / Sexual health |  |
| Emotional/ physical health |  |
| Family relationships / accommodation / honour based violence |  |
| Offending/ weapons / criminal activity / criminal exploitation. |  |
| Community / Social Isolation Factors |  |
| Radicalisation |  |
| Modern slavery / forced labour / debt bondage / Trafficking |  |
| Female Genital Mutilation |  |

# Child exploitation concerns

Taking into account the summary risk assessment, the likely relative weight of influence, the significance, severity and likelihood, use your professional judgment to determine the overall risk. If evidence indicates ACTUAL exploitation, state this below.

|  |  |
| --- | --- |
|  | **Exploitation Risk** |
| **EMERGING**  **There is some evidence that the young person is at risk of exploitation. There are some concerns that the young person is at risk of being targeted or groomed, but there are positive protective factors in their life which contribute to the overall risk being lower.** |  |
| **MODERATE**  **A young person who is vulnerable to being exploited but there are not immediate or urgent safeguarding concerns. There is evidence the young person may experience protective factors, but circumstances and / or behaviours place them at risk of exploitation.** |  |
| **SIGNIFICANT**  **A young person who may be targeted for opportunistic abuse through exchange of sex for drugs, alcohol, accommodation or goods.**  **A young person who is at significant risk of being sexually exploited.**  **A young person who is significantly threatened or physically harmed or is coerced into causing physical harm / threats to others as a result of drug debts.** |  |

# WHAT DO YOU NEED TO DO NEXT

**This is not a referral to Children’s Social Care. If you have an immediate concern about the safety and welfare of a child please phone MASH directly on 01432 260800 for advice or Out of Hours Emergency Duty Team on 01905 768020 and /or Police where appropriate.**

If the outcome is that, in your professional opinion, the child is **NOT** at risk of experiencing exploitation there is no need to submit this form to the multi-agency Get Safe inbox. You may need to consider an Early Help Assessment to address the concerns identified and safeguard the child. It is recommended that this form is saved by your agency should further concerns arise to enable you to review this risk assessment.

If you have identified that the child **IS** **AT RISK** to exploitation – **MODERATE** or **SIGNIFICANT**, then please submit the GET SAFE Risk Assessment via MASH then you must complete a referral to Herefordshire’s Children’s Social Care **AND** submit the GET SAFE Risk Assessment via MASH to [**referralscypd@herefordshire.gov.uk**](mailto:referralscypd@herefordshire.gov.uk).

**If** the child in your professional opinion is **EMERGING** please send this standalone risk assessment to [**GetSafeCYPD@herefordshire.gov.uk**](mailto:GetSafeCYPD@herefordshire.gov.uk)**.**

This information will be shared with the multi-agency **GET SAFE panel** and they will identify the outcome and appropriate pathways of help and support this child needs where there is GET SAFE concerns. The outcome will be shared with you within 5 working days of the multi-agency meeting which is every Monday.