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**Solihull all age exploitation screening tool**

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| **Purpose of tool**  This screening tool is designed to support staff to determine whether an individual (child, young person or adult) is potentially being exploited or groomed for exploitation. It should be completed when you have concerns that there is a risk of exploitation, or you have spotted some signs of exploitation. Where possible, the screening tool should be completed in partnership with the individual it concerns & where appropriate their parent/carer’s.  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, but should still record your professional judgement if you suspect grooming and or exploitation. [**There is further guidance that should be read before completing this tool**](https://view.officeapps.live.com/op/view.aspx?src=https%3A%2F%2Fwestmidlands.procedures.org.uk%2Fassets%2Fclients%2F6%2FAll%2520Age%2520Exploitation%2520Guidance%2520Doc%2520for%2520All%2520Age%2520Screening%2520Tool%2520-%2520December%25202022.doc&wdOrigin=BROWSELINK)**.** |

**Screening tool**

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| **Individual’s details** | | | | | | | | |
| First name | Click or tap here to enter text. | | Surname | | | Click or tap here to enter text. | | |
| Date of birth | Click or tap here to enter text. | | Ethnicity | | | Click or tap here to enter text. | | |
| Physical/ learning difficulty /health conditions | Click or tap here to enter text. | | Communication needs | | | Click or tap here to enter text. | | |
| Contact details;  Include address/es & postcode/s, contact telephone number/s & email address/es | Click or tap here to enter text. | | Sex & Gender identity | | | Click or tap here to enter text. | | |
| Was the screening tool completed with the individual? | | | | Yes |  | | No |  |
| Did the individual consent to the screening tool being completed? | | | | Yes |  | | No |  |
| If no- select the reason for the form still being completed | | | | Choose an item. | | | | |
| Date completed | Click or tap here to enter text. | Details of current support in place:  (Include education/ employment contact details) | | | | | | |
|  | | | | | | | | |
| **Parent/ Carer / representative’s details** | | | | | | | | |
| First name | Click or tap here to enter text. | | Surname | | | Click or tap here to enter text. | | |
| Relationship | Click or tap here to enter text. | | Contact details | | | Click or tap here to enter text. | | |
| First name | Click or tap here to enter text. | | Surname | | | Click or tap here to enter text. | | |
| Relationship | Click or tap here to enter text. | | Contact details | | | Click or tap here to enter text. | | |
| **Person completing the screening tool’s details** | | | | | | | | |
| First name | Click or tap here to enter text. | | Surname | | | Click or tap here to enter text. | | |
| Role | Click or tap here to enter text. | | Organisation | | | Click or tap here to enter text. | | |
| Telephone number | Click or tap here to enter text. | | Email address | | | Click or tap here to enter text. | | |
| **Screening questions** | | | | | | | | |
| Potential signs of exploitation | | | Detail of concerns relating to these signs | | | | | |
| **Issues with/ unexplained amounts of money, expensive clothes or new products**, for example:   * More than one phone or sim cards and a lot of phone contact * New products such as jewellery, clothing etc. * Multiple or lost bank cards * Needing to make a certain amount of money * Owing money to others * Debt bondage- being forced to sell/carrying drugs weapons for others / have sex to clear supposed “debt” | | | Click or tap here to enter text. | | | | | |
| **Changes in behaviour**, for example:   * Hostile/ abusive language (especially to those closest- parents, carers, siblings) * Disengaging from usual activity / education / employment * Not being where they say they will be * Going missing for periods of time (not just overnight) * Missing with different people who are being controlling or coercive * Secrecy regarding new networks/ social acquaintance’s * bullying/ intimidation/ disengagement from supportive networks * Changing of appearance * Carrying a weapon | | | Click or tap here to enter text. | | | | | |
| **A&E / clinic attendances**, for example:   * Concerning attendance/s at A&E * Implausible explanation of symptoms * Attending with another person who appears to be controlling * Evidence of physical/ sexual assault * Unfamiliar with the area/location they are attending A&E in * Sexually transmitted infection * Unwanted pregnancy/ repeat terminations | | | Click or tap here to enter text. | | | | | |
| **Emotional difficulties/ Self-harm**, for example:   * Rapid & extreme mood changes * Poor self-image/ low self esteem * Drug / alcohol misuse * Attempted suicide * Eating disorders * Scars from self-cutting * Grief- recent bereavement/ loss of trusted relationship | | | Click or tap here to enter text. | | | | | |
| **Internet and mobile usage**   * Rapid changing of numbers * Multiple social media accounts/ platforms/ gaming sites * Excessive/ obsessive use of phone/ communication technology (interrupting usual daily functioning) * Secrecy around phone/ technology use/ sites accessed * High levels of communication via phones/ online networks * Victim of/ retaliation to online bullying/ harassment (may include sexualised content) * Being enticed to meet contacts that have previously only known virtually * Coerced into sexual activity- virtually or in physical reality * Accessing sites that contain age inappropriate material or promote excessive physical or sexual violence/ use of weapons/ criminal activity | | | Click or tap here to enter text. | | | | | |
| **Evidence of assault**   * Physical injury * Disclosure of sexual/ physical assault often followed by withdrawal of allegation | | | Click or tap here to enter text. | | | | | |
| **Accommodation:**   * Evidence of home invasion**-** where the person’s home is being used by others without informed consent, including for parties & illegal purposes * Abduction/ false imprisonment * Multiple accommodation changes/ homelessness * Living in environments where others behaviours increase concerns (e.g. parent/ carer/ siblings or others in residential accommodation known for substance misuse, domestic abuse, to be involved in sex/drug trade/ criminal or organised gangs etc.) * Collected/ dropped off in unknown vehicles | | | Click or tap here to enter text. | | | | | |
| **Questions for the individual** | | | | | | | | |
| Has anyone made you feel scared or unhappy, or told you to keep secrets? | | | Click or tap here to enter text. | | | | | |
| Has anyone given you something and asked you to do something in return for that gift? | | | Click or tap here to enter text. | | | | | |
| Has anyone stopped you from doing the things you want to do? | | | Click or tap here to enter text. | | | | | |
| Do you feel able to say no when people ask you to do things? | | | Click or tap here to enter text. | | | | | |
| Would you like to speak to someone about concerns around money, housing, drugs / alcohol, or sex and relationships? | | | Click or tap here to enter text. | | | | | |
| What things do you enjoy and think are working well to help you in life? | | | Click or tap here to enter text. | | | | | |
| What do you think your parents/carers/ & professionals can do to help keep you safe? | | | Click or tap here to enter text. | | | | | |
| **Question for parent/ carers** | | | | | | | | |
| Has anyone threatened you, or your child/ the person you care for? | | Click or tap here to enter text. | | | | | | |
| What things do you think your child/ the person you care for enjoys and are working well to help them? | | Click or tap here to enter text. | | | | | | |
| What do you think professionals can do to work with you to help keep your child/ the person you care for safe? | | Click or tap here to enter text. | | | | | | |
| What do you think needs to happen to help keep your child/ the person you care for safe? | | Click or tap here to enter text. | | | | | | |
| **Overall summary of current situation** | | | | | | | | |
| What are you worried about for this individual in relation to exploitation?  Please include lived experiences, and specific types of exploitation if known as well as:   * What will the immediate harm and impact be if nothing is done within the next 24 hours? * If no immediate harm, what will be the potential risk of harm or impact in the next 7 days? * If no immediate risk of harm in this time, what will be the potential risk and impact if nothing changes? | | | Click or tap here to enter text. | | | | | |
| What are the current safety arrangement & existing things working well for the individual? | | | Click or tap here to enter text. | | | | | |
| Are there any potential people of concern? | | | Click or tap here to enter text. | | | | | |
| Are there any locations of concern? | | | Click or tap here to enter text. | | | | | |
| **Scaling Question – based on your overall summary** | | | | | | | | |
| Click or tap here to enter text.  **0 10**  **significant risk no risk** | | | | | | | | |

**West Midlands Police FIB form** Whether or not a victim is identified, if you have information that suggests exploitation may be occurring you can inform the Police by completing a FIB form. [Click here for the form](https://www.safeguardingsolihull.org.uk/lscp/wp-content/uploads/sites/3/2022/05/FIB-Form.doc). Please see this [presentation](https://www.safeguardingsolihull.org.uk/lscp/wp-content/uploads/sites/3/2021/09/FIB-Solihull-Presentation-1.pdf) for more information about FIB

**Please refer to** [**Solihull Exploitation Pathways**](https://www.safeguardingsolihull.org.uk/lscp/wp-content/uploads/sites/3/2021/12/Combined-Childrens-Adults-Transitions-Flowcharts.docx) **for children or adults for next steps**

Where a risk of exploitation is identified the form should be attached to a referral:

For under 18’s- Children’s Services <https://eservices.solihull.gov.uk/ChildrensSocialWorkServiceReferral/> 0121 788 4300

For 18 & over- Adult Services <https://eservices.solihull.gov.uk/SMBCWebForms/?Form=Report_Abuse> 0121704 8007