



Child Sexual Exploitation (CSE) Risk Assessment Tool

This document must be completed electronically.

This form allows you to explore some of the vulnerabilities and indicators present in a child or young person that you know might be at risk of or experiencing sexual exploitation. It is intended to help you think about what the risk might be to the young person and about what to do with the information you have. You should always bear in mind other services may have other information to add to what you know so if any of the indicators in Section 2 appear to be an issue, particularly if more than one or if compounded by vulnerabilities in Section 1, you should speak to other agencies or family during the assessment and/or use this assessment to support discussion with your manager. Completed NWG Risk assessment forms need to be sent to the police for a strategy meeting prior to a Wolverhampton MASE meeting being arranged. Please follow checklist on final page and ensure that all questions are answered. Please provide more than YES/NO answers as this can lead to the assessment being returned.

If you suspect anyone is in immediate danger, call the Police on 999.

| General details | | | |
|--|----------------------------------|--|----------------------------------|
| 1) Name and role of worker completing assessment | Click or tap here to enter text. | 2) Agency and contact details | Click or tap here to enter text. |
| 3) Child/Young person's Name/Alias/Known as | Click or tap here to enter text. | 4) Local Authority currently living in | Click or tap here to enter text. |
| 5) Parents names' and DOB's. | Click or tap here to enter text. | 6) Address of the family home | Click or tap here to enter text. |



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| 7) Sibling name's and DOB's. | Click or tap here to enter text. | 8) Your line managers contact telephone number and email address | Click or tap here to enter text. |
| 9) Is the NWG the initial, review or post NWG? | Click or tap here to enter text. | 10) Has the CSE Coordinator been notified of the concerns? | Click or tap here to enter text. |
| 11) Language(s) spoken | Click or tap here to enter text. | 12) Date of Risk Assessment | Click or tap here to enter text. |
| 13) Age and DOB | Click or tap here to enter text. | 14) Legal status | Click or tap here to enter text. |
| 15) Ethnicity | Click or tap here to enter text. | 16) Gender | Click or tap here to enter text. |



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Section 1. Vulnerabilities – These are things which may make a young person more at risk of being targeted for CSE. They give context to the specific indicators of CSE in section 2. However, the absence of these vulnerabilities does not preclude children being targeted; evidence shows victims can come from any background and without any prior vulnerability. You may not need to complete this section if you are also doing a CAF or other standard risk assessment / referral form as long as, in making your summary of risk, you bear these factors in mind. **It is expected that the assessor includes details to evidence the vulnerabilities experienced by the young person.**

| | | | |
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| 17) Migrant/refugee/Asylum Seeker/Trafficked status through NRM | Click or tap here to enter text. | 18) Sexuality (If known) | Click or tap here to enter text. |
| 19) Known to Children’s Social Care/CP Plan/LAC, now or previously? (if yes provide brief details including dates, and type of intervention) | Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, details: Click or tap here to enter text. | 20) Physical/Learning Disabilities / communication disorders (is additional support required, E.G interpreter/sign language) | Click or tap here to enter text. |
| 21) Involvement with the Youth Justice system? (if yes provide brief details including dates, and type of intervention and criminality) | Yes <input type="checkbox"/> No <input type="checkbox"/> If yes: Click or tap here to enter text. | 22) Is the child receiving support or services from any other Agency, such as drug & alcohol or mental health services | Yes <input type="checkbox"/> No <input type="checkbox"/> If yes include lead professional and contact details: Click or tap here to enter text. |



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| <p>23) Has sexual exploitation previously been identified as a specific issue for this child? (if yes provide brief details including dates, and type of intervention)</p> | <p>Yes <input type="checkbox"/> No <input type="checkbox"/> If yes when: Click or tap here to enter text.</p> | | |
| <p>24) Neglect by Parent/Carer/Family member</p> | <p>Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, details: Click or tap here to enter text.</p> | <p>25) History of / current family domestic abuse (including risk of forced marriage/risk of honour based violence/familial child sexual abuse)</p> | <p>Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, details: Click or tap here to enter text.</p> |
| <p>26) Physical / emotional/ sexual abuse by Parent/ Carer/ Family member</p> | <p>Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, details: Click or tap here to enter text.</p> | <p>27) History of / current substance misuse/ drug misuse in family</p> | <p>Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, details: Click or tap here to enter text.</p> |



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| <p>28) Poverty or Deprivation</p> | <p>Yes <input type="checkbox"/></p> <p>No <input type="checkbox"/></p> <p>If yes, details:</p> <p>Click or tap here to enter text.</p> | <p>29) Family history of exploitation or Prostitution</p> | <p>Yes <input type="checkbox"/></p> <p>No <input type="checkbox"/></p> <p>If yes, details:</p> <p>Click or tap here to enter text.</p> |
| <p>30) Unsuitable or inappropriate accommodation (Inc. street homeless, staying with inappropriate adults/hostel/B&B)</p> | <p>Yes <input type="checkbox"/></p> <p>No <input type="checkbox"/></p> <p>If yes, details:</p> <p>Click or tap here to enter text.</p> | <p>31) Family history of mental health difficulties impacting parenting</p> | <p>Yes <input type="checkbox"/></p> <p>No <input type="checkbox"/></p> <p>If yes, details:</p> <p>Click or tap here to enter text.</p> |
| <p>32) Breakdown of Family relationships</p> | <p>Yes <input type="checkbox"/></p> <p>No <input type="checkbox"/></p> <p>If yes, details:</p> <p>Click or tap here to enter text.</p> | <p>33) Family bereavement</p> | <p>Yes <input type="checkbox"/></p> <p>No <input type="checkbox"/></p> <p>If yes, details:</p> <p>Click or tap here to enter text.</p> |
| <p>34) Low self-esteem or history of being bullied or of bullying</p> | <p>Yes <input type="checkbox"/></p> <p>No <input type="checkbox"/></p> <p>If yes, details:</p> <p>Click or tap here to enter text.</p> | <p>35) Lack of positive relationship with a protective/ nurturing adult</p> | <p>Yes <input type="checkbox"/></p> <p>No <input type="checkbox"/></p> <p>If yes, details:</p> <p>Click or tap here to enter text.</p> |



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| <p>36) Recent bereavement or loss</p> | <p>Yes <input type="checkbox"/></p> <p>No <input type="checkbox"/></p> <p>If yes, details:</p> <p>Click or tap here to enter text.</p> | <p>37) Young carer</p> | <p>Yes <input type="checkbox"/></p> <p>No <input type="checkbox"/></p> <p>If yes, details:</p> <p>Click or tap here to enter text.</p> |
| <p>38) Disconnecting from support networks i.e. family/friends</p> | <p>Yes <input type="checkbox"/></p> <p>No <input type="checkbox"/></p> <p>If yes, details:</p> <p>Click or tap here to enter text.</p> | <p>39) Living in a chaotic or dysfunctional household</p> | <p>Yes <input type="checkbox"/></p> <p>No <input type="checkbox"/></p> <p>If yes, details:</p> <p>Click or tap here to enter text.</p> |
| <p>40) Unsure about their sexual orientation or unable to disclose sexual orientation to their families/friends</p> | <p>Yes <input type="checkbox"/></p> <p>No <input type="checkbox"/></p> <p>If yes, details:</p> <p>Click or tap here to enter text.</p> | <p>41) Living in a gang neighbourhood (postcode gangs)</p> | <p>Yes <input type="checkbox"/></p> <p>No <input type="checkbox"/></p> <p>If yes, details:</p> <p>Click or tap here to enter text.</p> |
| <p>42) Gang association either through relatives, peers or intimate relationships</p> | <p>Yes <input type="checkbox"/></p> <p>No <input type="checkbox"/></p> <p>If yes, details:</p> <p>Click or tap here to enter text.</p> | <p>43) Racially motivated gang Activity</p> | <p>Yes <input type="checkbox"/></p> <p>No <input type="checkbox"/></p> <p>If yes, details:</p> <p>Click or tap here to enter text.</p> |



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Section 2. Risk Indicators: Children are groomed and exploited in different ways. It may be difficult for parents, carers and practitioners to differentiate between ordinary teenage behaviour and the risk of or involvement in sexual exploitation but below are some signs that may signify if the child is being groomed for sexual exploitation or actually being sexually exploited.

| Within family / home / relationships | | | |
|---|---|---|---|
| 44) Change in behaviour - being more secretive / withdrawn / isolated from peers or not mixing with usual friends | Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, details: Click or tap here to enter text. | 45) Increasingly disruptive, hostile or physically aggressive at home or school Including use of sexualised language | Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, details: Click or tap here to enter text. |
| 46) Associating or is in a relationship with significantly older men or women who encourage emotional dependence, loyalty and isolation from safe relationships (record details of adults i.e. names, ages, | Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, details: Click or tap here to enter text. | 47) Physical or emotional abuse by a boyfriend / girlfriend, controlling adult or peer including use of manipulation, violence and/or threats | Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, details: Click or tap here to enter text. |



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| occupation/ description) | | | |
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| 48) Associating with other sexually exploited children (give names and details) | Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, details: Click or tap here to enter text. | 49) Multiple callers (unknown adults/older young people) - (record description/names etc.) | Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, details: Click or tap here to enter text. |
| 50) Estranged from family | Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, details: Click or tap here to enter text. | 51) Returning home after long intervals appearing well cared for | Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, details: Click or tap here to enter text. |
| 52) Regularly coming home late or going missing from home, care or education for any period of time (whether reported or not). | Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, details: Click or tap here to enter text. | | |



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| Health and Mental Health | | | |
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| 53) Change in physical appearance (new clothes, more/less make-up, weight gain/loss) | Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, details: Click or tap here to enter text. | 54) Increased health / sexual health related problems | Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, details: Click or tap here to enter text. |
| 55) Marks, scars or physical injuries on the body or face which they try to conceal | Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, details: Click or tap here to enter text. | 56) Expressions of despair (Inc. depression, mental ill health, self-harm, suicide thoughts/ attempts, overdose, eating disorder) | Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, details: Click or tap here to enter text. |
| 57) Branding (i.e. of gang logos) | Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, details: Click or tap here to enter text. | 58) Repeat/unplanned pregnancy or pregnancies (including ending in termination/ miscarriage(s)) | Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, details: Click or tap here to enter text. |
| 59) Sexually Transmitted Infections (STI's) and/or repeat tests | Yes <input type="checkbox"/> No <input type="checkbox"/> | 60) Exclusion from school or unexplained absences from, or not | Yes <input type="checkbox"/> No <input type="checkbox"/> |



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| particularly with negative results | If yes, details: Click or tap here to enter text. | engaged in school/ college/ training/ work | If yes, details: Click or tap here to enter text. |
| Behaviour and experiences | | | |
| 61) Concealed/ concerning use of the internet including web-cam, online gaming (via X-box, PlayStation), chat rooms etc. | Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, details: Click or tap here to enter text. | 62) Reports of being taken to hotels, nightclubs, takeaways or out of area by unknown adults/or other young people at risk of CSE. | Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, details: Click or tap here to enter text. |
| 63) Recent disengagement or unwillingness to work with family, friends, carers, and or professionals. | Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, details: Click or tap here to enter text. | 64) Gay/bisexual or exploring sexuality but have no positive support networks. | Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, details: Click or tap here to enter text. |
| 65) Sexualised risk-taking, including on internet or mobile phone, such as sexting (sending explicit messages or photos to adults or peers) | Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, details: Click or tap here to enter text. | 66) Association with gangs | Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, details: Click or tap here to enter text. |



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| <p>67) Increasing use of drugs or alcohol or misuse of drugs or alcohol</p> | <p>Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, details: Click or tap here to enter text.</p> | <p>68) Fear of victimisation from other gangs due to gang affiliation or rivalry</p> | <p>Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, details: Click or tap here to enter text.</p> |
| <p>69) Inability to negotiate exit from a gang due to fear/dependency</p> | <p>Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, details: Click or tap here to enter text.</p> | <p>70) Displaying signs of harassment/unwanted attention</p> | <p>Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, details: Click or tap here to enter text.</p> |
| <p>71) Fear of gang leaders</p> | <p>Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, details: Click or tap here to enter text.</p> | <p>72) Evidence of sexual bullying and/or vulnerability through the internet and/or social networking sites</p> | <p>Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, details: Click or tap here to enter text.</p> |



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| <p>73) Involved in criminal offending activity (i.e. ASB/criminal damage/theft)</p> | <p>Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, details: Click or tap here to enter text.</p> | | |
| <p>Appearance and possessions</p> | | | |
| <p>74) Unexplained amounts of money, mobiles, credit, expensive clothing, jewellery or any other items/gifts</p> | <p>Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, details: Click or tap here to enter text.</p> | <p>75) Overt sexualised dress</p> | <p>Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, details: Click or tap here to enter text.</p> |
| <p>76) Having multiple mobile phones, sim cards or use of a phone that causes concern – multiple callers or more texts/pings than usual</p> | <p>Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, details: Click or tap here to enter text.</p> | <p>77) Possession of hotel keys/cards or keys to unknown premises</p> | <p>Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, details: Click or tap here to enter text.</p> |
| <p>Incidences</p> | | | |



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If any of these are known to have happened and the Police or Social Care are not yet aware you must refer to the local CSE Team, if there is one, otherwise to Social Care- or direct to the Police in emergencies.

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| <p>78) Child under 13 engaging in penetrative sex with someone over 15 years</p> | <p>Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, details: Click or tap here to enter text.</p> | <p>79) Entering/leaving vehicles /cars with unknown adults or CSE victims</p> | <p>Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, details: Click or tap here to enter text.</p> |
| <p>80) Child meeting different adults and exchanging or 'selling' sexual activity</p> | <p>Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, details: Click or tap here to enter text.</p> | <p>81) Frequenting areas known for on/off street sex work</p> | <p>Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, details: Click or tap here to enter text.</p> |
| <p>82) Receiving rewards of money or goods for introducing peers to CSE adults.</p> | <p>Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, details: Click or tap here to enter text.</p> | <p>83) Disclosure of sexual/physical assault followed by withdrawal of allegation</p> | <p>Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, details: Click or tap here to enter text.</p> |
| <p>84) Knowledge of towns or cities they have no previous connection with</p> | <p>Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, details: Click or tap here to enter text.</p> | <p>85) Being taken to clubs or hotels and engaging in sexual activity</p> | <p>Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, details: Click or tap here to enter text.</p> |



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| <p>86) Abduction or forced imprisonment</p> | <p>Yes <input type="checkbox"/></p> <p>No <input type="checkbox"/></p> <p>If yes, details:</p> <p>Click or tap here to enter text.</p> | <p>87) Association with taxi firms/takeaway owners (night-time economy)</p> | <p>Yes <input type="checkbox"/></p> <p>No <input type="checkbox"/></p> <p>If yes, details:</p> <p>Click or tap here to enter text.</p> |
| <p>88) Being taken to brothels/ massage parlours</p> | <p>Yes <input type="checkbox"/></p> <p>No <input type="checkbox"/></p> <p>If yes, details:</p> <p>Click or tap here to enter text.</p> | <p>89) Seen in CSE hotspots (certain flats, parks, recruiting areas, cars or houses)</p> | <p>Yes <input type="checkbox"/></p> <p>No <input type="checkbox"/></p> <p>If yes, details:</p> <p>Click or tap here to enter text.</p> |
| <p>Please add any additional information that you feel is unusual/ relevant / concerning</p> | <p>Click or tap here to enter text.</p> | | |



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| Action/s already taken or to be taken (with timescale): | Done (date) / To be done (timescales) and any appropriate details |
|--|--|
| | Click or tap here to enter text. |
| When discussed with line manager: | Click or tap here to enter text. |
| Contact local CSE Coordinator | Sandeep.gill@wolverhampton.gov.uk 01902 550523/ 07552211409 |
| NWG sent to CSE inbox | cse@wolverhampton.gov.uk |
| Social Worker allocated: | Click or tap here to enter text. |
| Discuss with Police regarding investigation | Email this form to ppu_referrals_unit@west-midlands.pnn.police.uk with the subject header CSE Risk Assessment. |
| Police Strategy meeting arranged for: | Click or tap here to enter text. |
| Contact/referral to specialist voluntary sector service: | This can be arranged at MASE meeting is more appropriate. |



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| Any other actions, treatment or monitoring arrangements? | Click or tap here to enter text. |
| Details of known suspects: | Click or tap here to enter text. |
| Are there any risks that cannot be disclosed due to confidentiality/data protection? | Click or tap here to enter text. |
| Is there a risk present to others, i.e. other child/vulnerable adult? | Click or tap here to enter text. |
| What immediate risks does the young person face? | Click or tap here to enter text. |



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| For CSE Team Use: | |
| Initial Summary of Risk Level and response needed (Inc. check of other systems) | Refer to Social Care Immediate strategy meeting Refer to local multi-agency meeting Support agency to complete CAF / Signposting |
| | |