**CRE Risk Assessment**

**Professional Assessment of Child’s Risk of Exploitation**

**Name of Child:**       **Age/DOB:**

**Address:**      

**Which Local Authority has responsibility for this Child?**

* **Name of allocated Social Worker/MAT / Early Help Worker, if known:**
* **Contact details:**

**Has this Child previously had a CSE/CRE Risk Assessment undertaken?**

**Does the Child have any disabilities?**

**Section 1: CRE Risk Indicators**

**Remember:** if indicators suggest they are at risk of CRE, **no child under 13 years or with Special Educational Needs and Disabilities (SEND) issues** can be assessed as Low Risk. CCE = child criminally exploited, CSE = child sexually exploited. Risk = Low (L), Medium (M) or High (H).

| **Indicators**  **One or more indicators identified requires input** | **CCE** | **CSE** | **Risk**  **L/M/H** |
| --- | --- | --- | --- |
| Concern re: online activity |  |  |  |
| Regularly missing from home, care or education |  |  |  |
| Being abused on or off line by an adult /or targeted by an adult |  |  |  |
| Change of contact with family and friends and other support networks |  |  |  |
| Experimenting with drugs and/or alcohol (dependent on age) |  |  |  |
| Noticeable change of self-image/appearance or dress |  |  |  |
| Peer on peer abuse, including sexualised bullying and revenge pornography |  |  |  |
| Getting into cars with adult(s) |  |  |  |
| Associating with peers or adults with a known risk of exploitation |  |  |  |
| Arranging to meet for sexual activity |  |  |  |
| Making and then withdrawing a complaint/s |  |  |  |
| Unexplained injuries |  |  |  |
| Going to unsafe places i.e. known houses or places identified as a risk |  |  |  |
| Knowledge of other areas or located out of area, with no legitimate links to that area |  |  |  |
| Unaccounted for money or goods including mobile phones, drugs and alcohol |  |  |  |
| Increased interest in making money or need for money |  |  |  |
| Self-harming |  |  |  |
| Offending e.g. violence, theft and drug dealing |  |  |  |
| Gang member or association with gangs or extremist thinking including ‘normalisation’ of gang violence and criminality. Consideration to be given to:   * Graffiti style ‘tags’ on possessions * Starting to adopt certain types of groups behaviours e.g. ways of talking, hand signs and abbreviated text * New nicknames |  |  |  |
| Coerced into sexual activity |  |  |  |
| Evidence of grooming |  |  |  |
| Abduction and forced imprisonment |  |  |  |
| Indicators of modern slavery/trafficking |  |  |  |
| Miscarriages or terminations/presenting for pregnancy or sexually transmitted infection (STI) testing |  |  |  |
| Carrying weapons/feeling the need for protection |  |  |  |
| Forced marriage or marriage of convenience or preparations for such |  |  |  |
| Suspected Female Genital Mutilation (FGM) or known culture of this within the family |  |  |  |
| Child shows/family interest in radicalisation or extremism |  |  |  |
| Other:  Please expand on any indicator above (external agencies only) |  |  |  |

|  |  |
| --- | --- |
| **Summary of CRE Risk Indicators** | |
| Level of Risk (low / medium / high): |  |
| Related to Thresholds: emerging concerns (Early Help)/ complex or serious needs (Section 17 Child In Need) or child protection concerns (Section 47): |  |

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| **Offender/Location/Environments of Concern** - give as much information as possible about those locations, environments and persons who pose a risk to the child |
| **Locations:**  **Environments:**  **Person/s who pose a risk:**  **Other:** e.g. does child pose a risk to themselves? |

**Section 2: Cultural, Identity or Additional Vulnerability Factors**

In this section please note the current concerns and consider in your commentary whether the child is at risk as a result of these factors.

| **Factors** | **Historic** | **Current** | **Commentary** |
| --- | --- | --- | --- |
| Looked after child / fostered / private fostering / child leaving care or living independently |  |  |  |
| Some form of family conflict / break down of relationships |  |  |  |
| Witnessing or experiencing abuse and / or neglect |  |  |  |
| Young carer |  |  |  |
| Homelessness / sofa surfing |  |  |  |
| Emotional or mental health issues of child, parent or carer |  |  |  |
| Substance or alcohol misuse by parents / carers / wider family |  |  |  |
| Capacity issue, learning needs,  disability of child or their parent /  carer |  |  |  |
| Subjected to discrimination i.e. homophobia / racism |  |  |  |
| Criminality within family |  |  |  |
| Death or loss or illness of a significant person |  |  |  |
| Financially unsupported |  |  |  |
| Lack of love and security |  |  |  |
| New arrival / refugee / asylum seeker |  |  |  |
| Social exclusion / isolation/ disappearing from the system |  |  |  |
| Previous history of exploitation |  |  |  |

**Other Important Information**

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## Section 3: Risk Assessment Analysis and Summary

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| **What is the current level of risk? Low, Medium or High?** |  | **What is the primary risk / type of exploitation?** |  |

**Immediate concerns:**

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|  |

**Action already taken against person/s or places of risk**

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|  |

**Protective Factors/Resilience of child**

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**Contextual Safeguarding Analysis (Are there other impacts of this abuse i.e. bullying / isolation / stigma)**

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|  |

**Immediate actions to safeguard child:**

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| --- | --- | --- |
| **Action** | **Responsible** | **Timescale** |
|  |  |  |
|  |  |  |

|  |  |
| --- | --- |
| **Are the child and family aware of referral?** |  |
| **Are there any barriers to engagement with professionals?** |  |
| **Are there any risks to practitioners?** |  |
| **Threshold met related to safeguarding thresholds:** i.e.emerging concerns (Early Help), complex or serious needs (Child In Need) or child protection concerns (Section 47) or complex (organised or multiple) abuse |  |

|  |  |  |  |
| --- | --- | --- | --- |
| **Date CRE Risk Assessment completed:** | |  | |
| **Date of referral to Children’s Social Care:** |  | **Date of referral to the Police:** |  |

|  |  |  |  |
| --- | --- | --- | --- |
| **Name of Practitioner completing CRE Risk Assessment:** |  | **Date:** |  |
| **Agency and contact Details:** |  | | |