**Swindon Safeguarding Partnership Adult Exploitation Screening Tool**

**Definition of Exploitation**

The Home Office 2018 defines exploitation as:

*An individual or group takes advantage of an imbalance of power to coerce, control, manipulate or deceive a child, young person or adult and exploits them:*

*a) Through violence or the threat of violence, and/or*

*b) For financial or other advantage of the perpetrator or facilitator and/or*

*c) In exchange for something the victim needs or wants*

*d) Can also occur through use of technology*

Swindon Safeguarding Partnership recognises that exploitation is deliberate maltreatment and manipulation irrespective of their age, gender, ethnicity, background or ability and sexuality and comes in many forms including:

Modern Slavery

Human Trafficking

Sexual Exploitation

Criminal Exploitation

**Purpose of the tool**

This screening tool is designed to support staff to determine whether an 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 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**.

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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, Mental Health, Learning Difficulties/Neurodiversity?  | 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 |[ ]
| Has the individual consented 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) |
| Click or tap here to enter text. |
| Does the adult have any care and support needs?  | Click or tap here to enter text. |
| Does the adult have their own bank account? | Click or tap here to enter text. |
| Is the adults’ money paid into their own bank account? | 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. |

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| **Potential Signs of Exploitation** |  |
| **Issues with/ unexplained amounts of money, expensive clothes or new products**. | **Very concerned** | **Sometimes concerned** | **Not concerned** | **Not Known** |
| More than one phone or sim cards and a large number of phone contacts. |  |  |  |  |
| 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”. |  |  |  |  |
| Money being spent/given to others such as family/friends/carers. For example, this may be seen during weekly shopping, bills being paid not associated with that person, frequent amounts of cash being withdrawn and given. |  |  |  |  |
| Large unexplained amounts of money passing through bank accounts or bank accounts frozen for concerns around fraud. |  |  |  |  |
| **Any issues noted?** **Please Provide Details:** | **Yes** | **No** | **Not Sure** |  |
|  |
| **Changes in Behaviour** | **Very concerned** | **Sometimes concerned** | **Not concerned** | **Not Known** |
| Hostile/ abusive language (especially to those closest - Family/Carers). |  |  |  |  |
| Disengaging from usual activity/ 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.  |  |  |  |  |
| Signs of self-neglect – limited food in the fridge, minimal money available to spend on food/drink and essentials. |  |  |  |  |
| Signs of deterioration in health and mental/emotional well-being. |  |  |  |  |
| **Any issues noted?** **Please Provide Details:** | **Yes** | **No** | **Not Sure** |  |
|  |
| **A&E / clinic attendances** | **Very concerned** | **Sometimes concerned** | **Not concerned** | **Not Known** |
| 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. |  |  |  |  |
| **Any issues noted?** **Please Provide Details:** | **Yes** | **No** | **Not Sure** |  |
|  |
| **Emotional difficulties/ Self-harm** | **Very concerned** | **Sometimes concerned** | **Not concerned** | **Not Known** |
| Rapid & extreme mood changes. |  |  |  |  |
| Poor self-image/ low self-esteem. |  |  |  |  |
| Drug / alcohol misuse. |  |  |  |  |
| Attempted suicide. |  |  |  |  |
| Eating disorders. |  |  |  |  |
| Scars from self-cutting. |  |  |  |  |
| **Any issues noted?** **Please Provide Details:** | **Yes** | **No** | **Not Sure** |  |
|  |
| **Internet and mobile usage** | **Very concerned** | **Sometimes concerned** | **Not concerned** | **Not Known** |
| 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 inappropriate material or promote excessive physical or sexual violence/ use of weapons/ criminal activity. |  |  |  |  |
| **Any issues noted?** **Please Provide Details:** | **Yes** | **No** | **Not Sure** |  |
|  |
| **Evidence of assault** | **Very concerned** | **Sometimes concerned** | **Not concerned** | **Not known** |
| Physical injury. |  |  |  |  |
| Disclosure of sexual/ physical assault often followed by withdrawal of allegation.  |  |  |  |  |
| **Any issues noted?** **Please Provide Details:** | **Yes** | **No** | **Not Sure** |  |
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| **Accommodation** | **Very concerned** | **Sometimes concerned** | **Not concerned** | **Not known** |
| Cuckooing **-** 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.)  |  |  |  |  |
| Known to be associating with others suspected or known to have been exploited or involved in the exploitation of others. |  |  |  |  |
| Collected/ dropped off in unknown vehicles. |  |  |  |  |
| **Any issues noted?** **Please Provide Details:** | **Yes** | **No** | **Not Sure** |  |
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| **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 carers** |
| Has anyone threatened you, or person you care for?  | Click or tap here to enter text. |
| What things do you think 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 the person you care for safe?  | Click or tap here to enter text. |
| What do you think needs to happen to help keep 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. See guidance for how to scale.**  |
| Click or tap here to enter text.**0 10****significant risk no risk** |

**Wiltshire Police Community Partners information sharing form:**

<https://www.wiltshire.police.uk/police-forces/wiltshire-police/areas/about-us/about-us/Community-Partners-information-sharing-form/>

**Please note:** this form is not monitored 24/7 and is not for reporting crime. If you need to report a crime please [use this online service](https://www.wiltshire.police.uk/link/8b303075f47b4bf6b6dedfb69f8ab448.aspx). This form should not be used to replace statutory safeguarding procedures.

**Adult Safeguarding:**

<https://www.swindon.gov.uk/info/20011/adult_social_care_and_support/1120/report_a_safeguarding_concern_about_an_adult_at_risk_of_or_experiencing_harm>