



SERAF Risk Assessment Form

Name of worker completing assessment (by phone or email)		Name and contact details of referrer	
Child's Name		Local Authority	
Known to social services since		Date of SERAF Assessment	
Age		Legal status Section:	
Date of birth		Migrant/Refugee/Asylum Seeker/Trafficked status Please specify:	
Ethnicity		Gender	
Physical/learning disabilities		Languages spoken	
Have child protection procedures been initiated? (If yes provide date)	Yes <input type="checkbox"/> No <input type="checkbox"/> If yes when:	Involvement with the youth justice system?	Yes <input type="checkbox"/> No <input type="checkbox"/>
Is the child receiving support or services from any other agency?	Yes <input type="checkbox"/> No <input type="checkbox"/>	If other agencies are involved please list them here e.g. CAMHS, EWO etc.	
Has sexual exploitation previously been identified as a specific issue for this child?	Yes <input type="checkbox"/> No <input type="checkbox"/> If yes when:	Has the All Wales Safeguarding and Promoting the Welfare of Children who are at Risk of Abuse through Sexual Exploitation Protocol been used?	Yes <input type="checkbox"/> No <input type="checkbox"/> If yes when:

Vulnerabilities	Please tick	Vulnerabilities	Please tick
Emotional neglect by parent/carer/family member	<input type="checkbox"/>	Family history of mental health difficulties	<input type="checkbox"/>
Physical abuse by parent/carer/family member	<input type="checkbox"/>	Low self-esteem	<input type="checkbox"/>
Sexual abuse	<input type="checkbox"/>	Unsuitable/inappropriate accommodation	<input type="checkbox"/>
Breakdown of family relationships	<input type="checkbox"/>	Isolated from peers/social networks	<input type="checkbox"/>
Family history of domestic abuse	<input type="checkbox"/>	Lack of positive relationship with a protective/nurturing adult	<input type="checkbox"/>
Family history of substance misuse	<input type="checkbox"/>		

Moderate risk indicators	Please tick if present on date of referral or during the past 6 months
Staying out late	<input type="checkbox"/>
Multiple callers (unknown adults/older young people)	<input type="checkbox"/>
Use of a mobile phone that causes concern	<input type="checkbox"/>
Expressions of despair (self-harm, overdose, eating disorder, challenging behaviour, aggression)	<input type="checkbox"/>
Exclusion from school or unexplained absences from or not engaged in school/college/training/work	<input type="checkbox"/>
Sexually Transmitted Infections (STIs), pregnancy/termination of pregnancy	<input type="checkbox"/>
Drugs misuse	<input type="checkbox"/>
Alcohol misuse	<input type="checkbox"/>
Use of the internet that causes concern	<input type="checkbox"/>
Living independently and failing to respond to attempts by worker to keep in touch	<input type="checkbox"/>

Significant risk indicators	Please tick if present between 6 and 12 months ago	Please tick if present on date of referral or during past 6 months
Disclosure of sexual/physical assault followed by withdrawal of allegation	<input type="checkbox"/>	<input type="checkbox"/>
Peers involved in clipping/sexual exploitation	<input type="checkbox"/>	<input type="checkbox"/>
Periods of going missing overnight or longer	<input type="checkbox"/>	<input type="checkbox"/>
Older 'boyfriend'/ relationship with controlling adult	<input type="checkbox"/>	<input type="checkbox"/>
Physical abuse by controlling adult / physical injury without plausible explanation	<input type="checkbox"/>	<input type="checkbox"/>
Emotional abuse by controlling adult	<input type="checkbox"/>	<input type="checkbox"/>
Entering/leaving vehicles driven by unknown adults (not taking and driving away: car theft)	<input type="checkbox"/>	<input type="checkbox"/>
Unexplained amounts of money, expensive clothing or other items	<input type="checkbox"/>	<input type="checkbox"/>
Frequenting areas known for on/off street sexual exploitation	<input type="checkbox"/>	<input type="checkbox"/>

SERAF Score	In addition: Physical/Learning Disability: Score 1 Age under 13 and at least 1 significant risk factor present: Score 5
Risk Category	

Vulnerabilities Identified: (if any of these have been ticked please detail why)

Emotional neglect by parent/carer/family member:

Physical abuse by parent/carer/family member:

Sexual abuse:

Breakdown of family relationships:

Family history of domestic abuse:

Family history of substance misuse:

Family history of mental health difficulties:

Low self-esteem:

Unsuitable/inappropriate accommodation:

Isolated from peers/social networks:

Lack of positive relationship with a protective/nurturing adult:

Moderate Risk Indicators Identified: (if any of these have been ticked please detail why)

Staying out late:

Multiple callers (unknown adults/older young people):

Use of a mobile phone that causes concern:

Expressions of despair (self-harm, overdose, eating disorder, challenging behaviour, aggression):

Exclusion from school or unexplained absences from or not engaged in school/college/training/work:

Sexually Transmitted Infections (STIs), pregnancy/termination of pregnancy:

Drugs misuse:

Alcohol misuse:

Use of the internet that causes concern:

Living independently and failing to respond to attempts by worker to keep in touch:

Significant Risk Indicators Identified: (if any of these have been ticked please detail why)

Disclosure of sexual/physical assault followed by withdrawal of allegation:

Peers involved in clipping/sexual exploitation:

Periods of going missing overnight or longer:

Older 'boyfriend'/ relationship with controlling adult:

Physical abuse by controlling adult / physical injury without plausible explanation:

Emotional abuse by controlling adult:

Entering/leaving vehicles driven by unknown adults (**not** taking and driving away: car theft):

Unexplained amounts of money, expensive clothing or other items:

Frequenting areas known for on/off street sexual exploitation:

Additional information: