

CALDERDALE SAFEGUARDING CHILDREN BOARD

Practice Guidance

Sexually Harmful Behaviour by Children and Young People

This document is Practice Guidance which is consistent with Calderdale Safeguarding Children Procedures on how to respond to sexually harmful behaviour.

The West Yorkshire Multi-Agency Safeguarding Procedures contain guidance and procedures for cases where a child is abused by another child. Please refer to Section 5.1 of the procedures and procedures relating to S47 Enquiry, Strategy Discussions and Strategy Meetings can be found in Section 3 of the Procedures.

These procedures can be accessed at www.calderdale-scb.org.uk

Introduction

All cases involving sexually harmful behaviour (SHB) by children and young people must be managed in a consistent manner and at all times consider the impact for both the child or young person displaying sexually harmful behaviour and the child or young person harmed, at any point either party could be in need of services or protection.

When any agency or professional observes sexually harmful or aggressive behaviour or receives information and/or a disclosure that a child or young person may have been harmed, either sexually or physically, by another child or young person, consideration must be given to the holistic needs of both parties, as set out in the Framework for the Assessment of Children and their Families (2000).

The Calderdale Safeguarding Children Board (CSCB) has endorsed the **Initial Identification and Assessment Tool**, to assist the identification and assessment of SHB and inform multi-agency responses to children and young people who display SHB. It is important to separate out unacceptable but developmentally appropriate behaviour from SHB.

The tool has been designed by a multi-agency group of professionals for use by all agencies working with children and young people to aid their identification and assessment and to inform the intervention pathway where SHB has been identified. In addition the tool has been developed to assist professionals in a range of settings to identify at what level on the Calderdale Continuum of Need, concerns should be addressed. The tool can be accessed via the Board's website (details above). It is recognised that age, ability and capacity to give informed consent (especially where there are Special Educational Needs (SEN) and Disability) and the context in which the alleged behaviour and incident took place are critical to ensure robust assessment and decision making.

If you have any concerns relating to SHB, you must seek advice from the designated safeguarding lead in your agency.

Concerns at Level 4 or 5 of the Calderdale Continuum of Need (CoN) would indicate the need for an appropriate referral and assessment to be undertaken and appropriate consultation with the Multi-Agency Assessment and Screening Team (MAST) must be undertaken.

New Referrals

In relation to new cases i.e. not already open to children's social care, it is expected that a S47 (child protection) referral will be made to children's social care in respect of both the person harmed and the person who displays sexually harmful behaviour as set out in CSCB procedures and this practice guidance.

Children's social care will undertake a strategy discussion or meeting as set out in Working Together to Safeguard Children (2013) to determine whether a s47 enquiry will be undertaken i.e. whether the threshold for child protection has been reached, in respect of either party. Where there is evidence of multiple children and young people involved this must be a meeting and involve all those agencies actively involved with the child, young person, family or carer.

Professionals should also be mindful of the CSCB procedure, Complex (Organised or Multiple) Abuse (1.4.18) this is defined as abuse involving one or more abusers and a number of related or non-related children or young people. The abusers may be acting in concert to abuse children, sometimes acting in isolation or may be using an institutional framework or position of authority to recruit children for abuse.

On occasions SHB can become a community issue and attract considerable public attention, including press interest, in such cases it is imperative that joint communication strategy is developed in partnership with West Yorkshire Police, Children's Social Care and any other statutory agency involved in the investigation into SHB. The Local Authority Press Office along with any other appropriate agency press office should be notified immediately.

Irrespective of whether or not a S47 enquiry is to be completed in respect of the child or young person displaying SHB a multi-agency meeting will be convened within 48 hours to consider the need for further multi-agency assessment or intervention.

The multi-agency meetings will be chaired by Children's Social Care (CSC) and will include representatives as a minimum from:-

- Children's social care (CSC)
- School
- Police
- Youth Offending Team (YOT)
- Relevant Agencies involved with the child i.e. Young People's Service/CAHMS

The multi-agency meeting will scope the assessment and intervention pathway. The outcome of any assessment may be no further role for Children's Social Care; however, children, young people and their families will be signposted to appropriate services that will continue to support and meet their needs.

Specific Agency – Roles

Police

The child or young person may be subject to a criminal investigation which will be led by the Police safeguarding unit, Richmond Close, Halifax, in partnership with CSC and other relevant agencies; any investigation should involve all agencies involved with both parties and consider the impact of vulnerability and Special Education Needs (SEN).

Interviews will be conducted using Achieving Best Evidence procedures and where possible children and young people should be supported by those who know them best or understand their communication or behavioural issues e.g. Learning Mentor or Support Assistants in school

Children's Social Care

Whereby either party is already known to a team within CSC child protection procedures will still be followed for both parties as set out above. In cases where the person harmed or person who displays sexually harmful behaviour live in areas covered by different teams, responsibility for each child will be held by the team that covers the area in which the child or young person lives. Teams will need to liaise closely during and post assessment/investigation. Where more than one team in CSC is involved effective communication is important, and one manager should be designated to provide oversight of both cases.

All Agencies Responsibilities

Where a young person has engaged in SHB, it will be necessary to establish whether the child or young person poses a risk to others. In most cases, the responsibility for co-ordinating this assessment will rest with the social worker, although in some cases it may be more appropriate, for example, for the Youth Offending Team (YOT) in partnership with CSC to take the lead. However, it must follow the Aim2 assessment framework.

The multi-agency meeting will identify which professionals and agencies will contribute to the assessment. YOT referrals will be processed through the designated YOT Operational Manager. CAMHS referrals are to be made in line with the normal CAMHS pathway and LAACH pathway will be used if the young person is looked after.

Following the completion of the assessment, the social worker and relevant co-worker will work in partnership to produce a report outlining key areas of concern or risk and a multi-agency action plan to manage and reduce that risk.

Where a young person is considered to pose a risk to others, they will normally be considered to be a Child in Need (CIN) and dealt with accordingly in line with CIN procedures. In some cases, where the person who displays sexually harmful behaviour is felt to be at risk of significant harm, they may need to be made subject to a Child Protection Plan or other form of intervention to protect them.

General Principles - Person harmed

In relation to the **person harmed**, some key elements to consider are:

- Whether there is an ongoing risk of harm if the person who displays sexually harmful behaviour is a sibling; a member of the same household or institution (i.e. residential unit) or a pupil at the same School. How will the person harmed be protected from further abuse?
- The ability of parents /carers/service providers (e.g. Schools, residential units) to ensure the ongoing protection of the person harmed and potential person harmed (e.g. siblings, other pupils, residents)
- The specific needs of the person harmed and their family
- Is Disability or SEN an issue for this child or young person?

Evidence suggests that children and young people who have been harmed are best supported by:

- Getting back to a normal routine ASAP because this is comforting, real and therapeutic
- Not reinforcing or labelling the person harmed as “a victim” shapes and speeds up their recovery
- Consistent management and care which can be much more important than therapy alone
- People close to them and are often much more important, relevant and skilled than any external “so called expert”

In some, but not all, cases, a person harmed will require professional support. This can be obtained from a number of providers in the district, including:

- **CAMHS** are able to provide support to the person harmed and their families. Referrals should follow the usual CAMHS pathway.
- **Education Psychology Services** can offer specialist advice and support to a range of settings and all have completed Aim2 training
- **Family Information Service** can provide information on local services for children, young people and their families
- **STAR (Surviving Trauma After Rape)** a service operated jointly by West Yorkshire Police and the NHS, providing support to young people 14 and above. The service is aimed at providing support to people who have experienced rape or sexual assault, and will only accept self referrals. If any agency working with the person harmed feels that they would benefit from this service, they should be supported to make contact. The STAR website includes more details about the services that can be provided and how they can be accessed at www.starproject.co.uk

General Principles - Person who displays sexually harmful behaviour

In relation to the **person who displays sexually harmful behaviour**, some key elements to be considered are:

- The level of future risk they may pose to the person harmed or other children/young people who they may come into contact with
- Is the person who displays sexually harmful behaviour experiencing abuse or neglect themselves, or have they experienced it in the past? If so, this will need to be formally investigated and action may be needed to protect them
- The specific needs of the person who displays sexually harmful behaviour and their family, or offence-related intervention
- Arrangements for future management/supervision in partnerships with families and agencies
- Is Disability or SEN an issue?

Evidence suggests that children and young people are best supported by:

- Getting back to a normal routine ASAP because this is comforting, real and therapeutic
- Schools and settings should be supported to develop effective risk management strategies that does not isolate the child or young person displaying SHB but ensures that other children and young people are not placed at risk
- Consistent management and care is essential to ensure that the inappropriate SHB is challenged but the individual is not demonised
- People close to them and are often much more important, relevant and skilled than any external “so called expert” to normalise behaviour and ensure that they do not harm

An individual who displays SHB is likely to require ongoing professional support. This can be obtained from a number of providers in the district, including:

- **CAMHS** are able to provide support to the person who displays SHB and their families. Referrals should follow the usual CAMHS pathway.
- **Education Psychology Services** can offer specialist advice and support to a range of settings and all have completed Aim2 training
- **Family Information Service** can provide information on local services for children, young people and their families

Learning and Development

Calderdale Safeguarding Children Board has facilitated a comprehensive multi-agency training programme, over 50 staff from a range of services and settings have been trained in the Aim2 Assessment model including Children’s Social Care, YOT, Education Psychology Service, Schools, Family Intervention Team and CAMHS (including LAACH).

Professionals involved in specialist assessments (Aim 2) work must have completed training including:-

- Awareness of sexually harmful behaviour (one day course)
- Comprehensive assessment training (minimum 2 days) – Aim2 Assessment
- The Calderdale Safeguarding Children Board, multi-agency training programme also offers training relating to undertaking programmes of intervention with young people and there is an expectation that staff keep their skills up-to-date.

In addition

- The CSCB has also developed a basic awareness e-learning course relating to SHB

More details about the CSCB, the multi-agency training programme and SHB can be found on www.calderdale-scb.org.uk

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