

Harmful Sexual Behaviour Guidance

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Keeping children safe is everyone's responsibility

Contents

1	Introduction	3
2	Using this guidance	3
3	Principles	3
4	Local training and education	4
5	Training available	4
6	Tools and resources available.....	5
7	Consistency	7
8	Harmful Sexual Behaviour Flowchart (pre-MASH)	8
9	Appendix 1: Harmful Sexual Behaviour Safeguarding Pathway	9
10	Appendix 2: Harmful Sexual Behaviour Strategy Discussion Guidance.....	10

1 Introduction

Torbay Safeguarding Children Partnership (TSCP) is committed to ensuring that children and young people who display and are affected by harmful sexual behaviour are provided with a well-coordinated multi-agency response to meet their identified needs.

A child or a young person displaying harmful or inappropriate sexual behaviour is likely to be a child with needs, and some will be suffering, or at risk of suffering significant harm and therefore in need of protection themselves.

As such, this document provides guidance on the pathways and processes that should be followed when a child or young person is identified as displaying and/or are affected by sexually harmful behaviour.

2 Using this guidance

The intention of this document is to support the Torbay workforce to identify, respond, and manage harmful sexual behaviours displayed and experienced by children and young people.

It should be read in conjunction with the SWCPP procedures on HSB to be found here [Harmful Sexual Behaviour \(proceduresonline.com\)](https://www.proceduresonline.com). This procedure includes definitions, risks, indicators, protection, and action to be taken, issues and further information.

This document links to the Multi-Agency Safeguarding Hub (MASH) flowchart in Section 8 of this document. Where a behaviour is of concern the AIM checklist should be used before any potential referral to MASH. This supports consistent identification and escalation of HSB concerns.

3 Principles

The Torbay local area is working to adopt Restorative Practice, a strength-based approach that recognises building a positive relationship with children, young people and families who need support is important.

We recognise that listening to children, young people and families working 'with' rather than doing things 'for' or 'to' people is the best way we can help support. This way of working is called restorative practice.

When working with children and young people who display and are affected by harmful sexual behaviour the following procedures and policies to address identified needs must be applied by all agencies;

- Those working with children and young people who harm others must recognise that such children are likely to have considerable needs themselves;
- The needs of the children and young people who exhibit harmful sexual behaviour should be considered separately from the needs of those who have experienced the harm;

- Evidence suggests that children and young people who abuse may have suffered considerable disruption in their lives, been exposed to violence within the family, may have witnessed or been subject to physical or sexual abuse, have problems in their educational development and may have committed other offences. Such children and young people are likely to be children in need, and some will in addition be suffering from, or at risk of, Significant Harm and may themselves be in need of protection;
- When working with children and young people who exhibit and are affected by harmful sexual behaviour, practitioners should work in a trauma informed and responsive way;
- Early and effective intervention with children and young people who sexually harm others may play an important part in protecting children, by preventing the continuation or escalation of abusive behaviour;
- Children and young people who display and are affected by harmful sexual behaviour have a right to be consulted and involved in all matters and decisions that affect their lives. Their parents or carers, where appropriate, and in consultation and consent with the child have a right to information, respect, and participation in matters that affect their family;
- The complex nature of harmful sexual behaviour requires a co-ordinated, multi-disciplinary approach, which addresses the needs of children and young people through the lens of child protection and criminal justice issues;
- Ensure children and young people who display harmful sexual behaviour have a right to access their education in line with their age, ability, and needs as outlined in the Education Act 1996

4 Local training and education

Training is available for all staff working in Torbay regarding Harmful Sexual Behaviour. The training is made available via the [iLearn platform](#), which everyone can register for, whether working in the voluntary and community sector, health settings, education settings or any other. The platform is free to users and facilitates a range of professional training.

If you are external to Torbay Council and wish to register for an iLearn or 'learning Pool' account, please use this link: [New account \(learningpool.com\)](#). You will then receive your login details via email within two working days.

5 Training available

AIM checklist

This requires a 1-hour induction / watching of a video. This outlines using the checklists to facilitate a shared professional judgement about the behaviours displayed. The video and checklists are suitable for all staff and volunteers working at all levels.

The AIM Checklists provide a framework to inform and support professional decision making, as not all behaviours which have a sexual component will need a referral to another agency or an

AIM3 or AIM Under 12s assessment. There are four AIM Checklists to reflect different levels of development due to age or ability.

The checklists available to use are applicable to:

1. Adolescents
2. Adolescents with learning disabilities
3. Children under 12 years old
4. Children under 12 years old with learning disabilities

The checklist can only be accessed if the training video is watched, and AIM terms and conditions are agreed to.

AIM 1-day training courses

These are online and booked and delivered via the [iLearn platform](#):

The courses are suitable for all practitioners, but managers and safeguarding leads are invited to attend. Current one-day courses available are:

1. Foundation Awareness of Harmful Sexual Behaviour
2. Foundation Awareness of Technology Assisted Harmful Sexual Behaviour
3. Advanced course (please note, attendance criteria for the following course)
4. Understanding and managing problematic and HSB in education settings

All courses will currently be delivered online, training and / or materials costs may apply.

6 Tools and resources available

AIM checklist and training

Use the following link to log into your iLearn account or to request an account: [Welcome to iLearn!: Log in to the site \(learningpool.com\)](#)

Circles SouthWest

Our Young People's Service accepts referrals for young people aged between 10yrs and 20yrs who have displayed harmful sexual behaviour.

[Young People's Services - Circles South West \(circles-southwest.org.uk\)](http://circles-southwest.org.uk)

Devon Rape Crisis and Sexual Abuse Service

Devon Rape Crisis and Sexual Abuse Service is available to any young person between the ages of 13-21 who has experienced sexual violence. This includes rape, historic abuse, sexual exploitation, online abuse, sexual assault, and sexual harassment.

[Young People's Support – Devon Rape Crisis and Sexual Abuse Services](#)

Early Help

Early Help Torbay offer early intervention in the form of group work or 1:1 intervention for young people and parents/ carers to address emerging behaviours and prevent escalation. More information, including making an early help assessment or referral can be found here: [Early Help - Torbay Council](#)

Kooth

Kooth.com is commissioned by the NHS, Local Authorities, charities, and businesses to provide anonymous and personalised mental health support for Children and Young people.

[Kooth for Children & Young People - Kooth plc](#)

Make Amends

Is a commissioned Restorative Justice Service across Devon and Cornwall who use trained and registered practitioners to provide restorative justice interventions to support people who have been affected by crime (including harmful sexual behaviour), conflict, anti-social behaviour or harm caused by the actions of others.

[Shekinah - Make a Referral](#) Call 01803 222033

South West Grid for Learning

A support service for professionals in tackling harmful sexual behaviours.

[Harmful Sexual Behaviour Support Service | SWGfL](#)

Available 8am-8pm Mon- Fri. Call 0344 2250623 or email hsbsupport@swgfl.org.uk

Sexual Assault Referral Centre (SARC)

[Devon and Cornwall SARC – NHS \(sarchelp.co.uk\)](#) Call **0300 3034626**

SARC offers a dedicated children's service for children up to their 18th birthday who have been raped or sexually assaulted by adults or other children and young people. SARC staff welcome professional conversations about exploring SARC services for children and YP displaying harmful sexual or sexualised behaviour as their behaviour may be an expression of sexual abuse that they have themselves been subjected to.

Non-recent assaults are classified as anything that has happened **more than 10 days ago**. In Torbay, as well as Devon and Plymouth, these are dealt with at our specialist paediatric service in **Exeter**. In Cornwall or the Isles of Scilly, these cases are seen at the **Truro SARC**. The children's service ensures that every referral for a child or young person is reviewed by a clinical team, to make sure that all health needs are addressed. They consider a broad range of support services for children and ensure appropriate onward referrals to relevant services, including sexual health, the **Independent Sexual Violence Advisor (ISVA)** service and therapy service. Children who have experienced recent cases of sexual assault (**10 days or less ago**) in Torbay, Devon, Cornwall and the Isles of Scilly are cared for at our facility in Exeter. They will be given immediate medical care, a forensic medical assessment, emergency contraception if required, and support and advice about what to do next. We can also arrange for an **Independent Sexual Violence Adviser (ISVA)** to support you with any police investigation, sexual health follow-up/ support and therapy service.

If you or somebody you know has been a victim of recent sexual assault you can get help by calling **0300 3034626** or by filling in a [quick referral form](#).

Victim Care Unit

[Victim Support Devon and Cornwall | Victim Care Devon and Cornwall](#)

Young Devon

Our Wellbeing team provide safe spaces for young people to talk, where they can feel heard and supported without judgement.

[Our Wellbeing Services | Young Devon](#)

7 Consistency

It is intended that by using the AIM checklist tool and training, this will bring about a consistency of professional judgement and process for agreeing actions and next steps.

By using the AIM checklist, where a referral to another agency is considered necessary, this will bring about a consistency and efficiency of approach across agencies and professionals.

8 Harmful Sexual Behaviour Flowchart (pre-MASH)

Incident of possible HSB at school, in the community, or other environment

Designated Safeguarding Lead (DSL), or other appropriate safeguarding officer is informed and collates information to inform next step/s. The lead may wish to seek advice from the MASH

Clear indication of HSB
(complete HSB checklist to guide decision making)

When considering whether sexualised behaviour is harmful, refer to the following prompts to aid decision making but consider any others if applicable.

- Has the other person consented or are they able to give consent?
- Are there differences in age, power, strength and/or cognition?
- Sexual behaviour between children is considered harmful if one of the children is much older (two years age differential is relevant as is pre-post pubescence)
- A younger child can abuse an older, particularly if they have power over them.
- What is the frequency and severity of the behaviour?
- Is the behaviour developmentally appropriate?

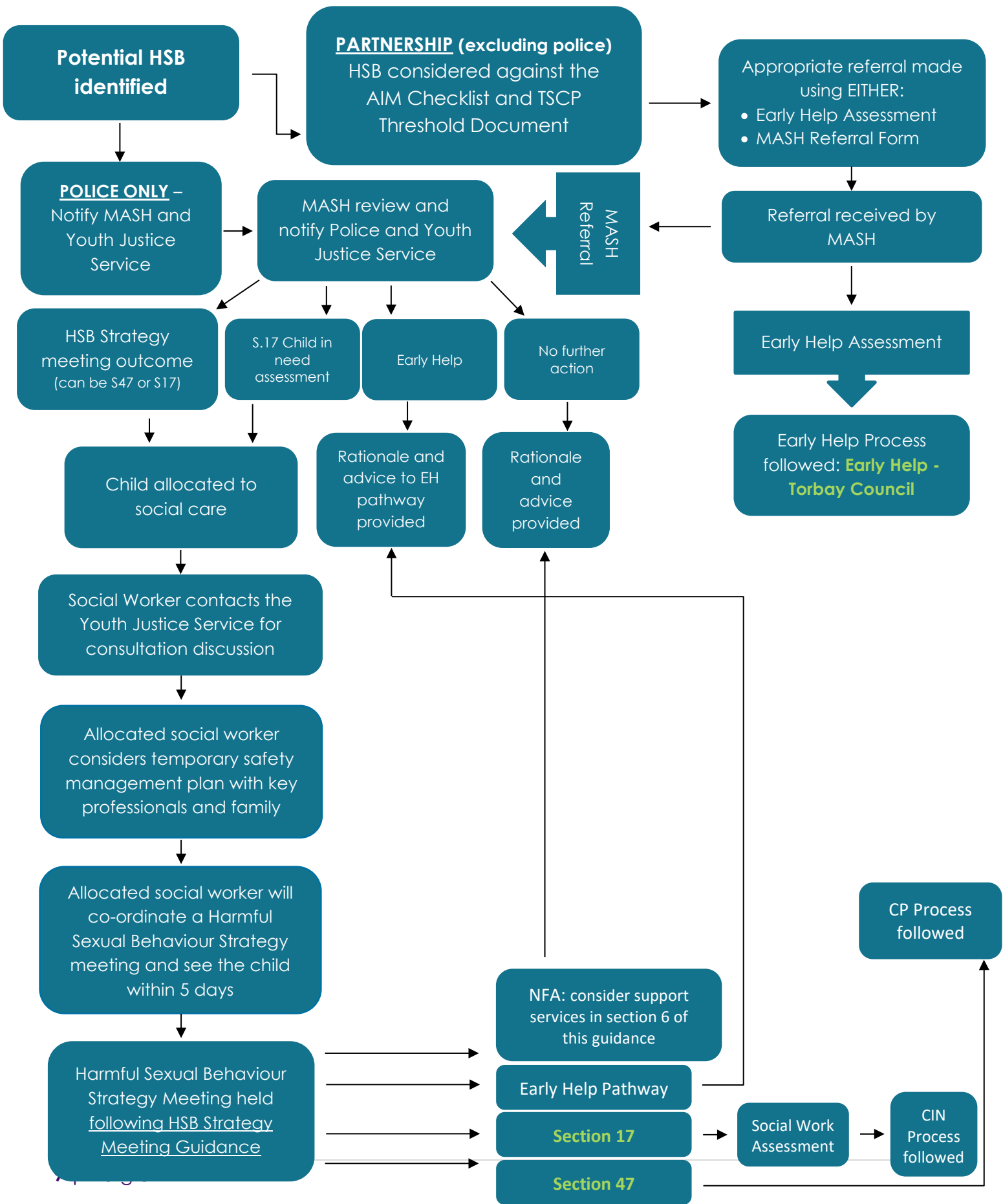
Refer to MASH

HSB appears to be present

No HSB evident

- Ensure incident is recorded, pay attention to repeat behaviours
- Is any further action required? Are any safeguarding measures needed?
- Does the child need other support /

9 Appendix 1: Harmful Sexual Behaviour Safeguarding Pathway



10 Appendix 2: Harmful Sexual Behaviour Strategy

Discussion Guidance

Overview

Whenever there is reasonable cause to suspect that a child is suffering or is likely to suffer significant harm there should be a strategy discussion involving local authority children's social care the police, health and other bodies such as the referring agency. This might take the form of a multi-agency meeting or phone calls and more than one discussion may be necessary.

A strategy discussion can take place following a referral or at any other time, including during the assessment process and when new information is received on a child / young person already open to children's social care.

Purpose

Local authority children's social care should convene a strategy discussion to determine the child's welfare and plan rapid future action if there is reasonable cause to suspect the child is suffering or is likely to suffer significant harm or behave in a way that places others at risk of harm, for example through harmful sexual behaviours (HSB). In the case of strategy meetings that are convened in response to HSB, the strategy meeting will need to take place in respect of the child whom the allegation/ information relates to, as opposed to the alleged victim or recipient of the behaviour.

Strategy discussion attendees

The allocated local authority social worker should be in attendance along with the following representatives as a minimum:

- health
- school
- Local Authority education department
- police
- CAMHs
- Youth Justice Service

The meeting will be chaired by a Team Manager from Children's Social Care.

The attendance of other relevant practitioners will depend on the nature of the individual circumstances but may also include:

- the practitioner or agency which made the referral
- the child and their sibling's school or nursery
- any health or care services the child or family members are receiving or the Sexual Assault Referral Centre (SARC)

All attendees should be sufficiently senior to make decisions on behalf of their organisation and agencies.

Strategy discussion tasks

The discussion should be used to:

- share available information
- agree the conduct and timing of any criminal investigation
- decide whether enquiries under section 47 of the Children Act 1989 must be undertaken.

Where there are grounds to initiate an enquiry under section 47 of the Children Act 1989, decisions should be made as to:

- what further information is needed if an assessment is already underway and how it will be obtained and recorded
- what immediate and short-term action is required to support the child, and who will do what by when – this needs to include any urgent safety planning required for the child, their siblings, and any other relevant children the child may have contact with. This will also include consideration of safety planning within any education setting the child attends.
- whether legal action is required

The timescale for the section 47 enquiry to be completed is within a maximum of 15 working days – however should there be an indication that Child Protection planning may be required then this must be planned for by the social worker and Team Manager by day 5 of the enquiries with an expectation that the Initial Child Protection Conference will take place within the 15 working days of the start of section 47 enquiry.

The timescale for the single assessment to reach a decision on next steps should be based upon the needs of the individual child, consistent with the local protocol and no longer than 45 working days from the point of referral into local authority children's social care or the initiation of a new single assessment.

Social workers should

Convene the strategy discussion and make sure it:

- Considers the child's welfare and safety, and identifies the level of harm faced by the child
- Decides what information should be shared with the child and family (on the basis that information is not shared if this may jeopardise a police investigation or place the child at risk of significant harm)
- Agrees what further action is required, and who will do what by when, where an Emergency Protection Order¹ (EPO) is in place or the child is the subject of police powers of protection
- Records agreed decisions in accordance with procedures
- Follows up actions to make sure what was agreed gets done

¹ [Make an urgent or emergency application to the Court of Protection - GOV.UK \(www.gov.uk\)](https://www.gov.uk/government/topics/emergency-protection-orders)

Health practitioners should

- Advise about the appropriateness or otherwise of medical assessments, and explain the benefits that arise from assessing previously unmanaged health matters that may be further evidence of neglect or maltreatment
- Provide and co-ordinate any specific information from relevant practitioners regarding family health, maternity health, school health mental health, domestic abuse and violence and substance misuse to assist strategy and decision making
- Secure additional expert advice and support from named and/or designated professionals for more complex cases following preliminary strategy discussions
- Undertake appropriate examinations or observations, and further investigations or tests, to determine how the child's health or development may be impaired

Police should

- Discuss the basis for any criminal investigation and any relevant processes that other organisations and agencies might need to know about, including the timing and methods of evidence gathering
- Lead the criminal investigation (local authority children's social care have the lead for the section 47 enquires and assessment of the child's welfare) where joint enquiries take place.

Education/ Schools should

- Ensure they provide any relevant background history for the child and family, including attendance records, information about peer group dynamics and any behaviour of concern identified by the school.
- Seek to ensure there is a comprehensive safety plan in place to ensure that any behaviours or concern or risk to the child or other pupils can be safely managed.
- Ensure the child continues to be able to access their education setting or if this is not possible due to significant unmanageable levels of risk as agreed by all Partners, immediate plans are put in place for the child to access equivalent alternative arrangements, prior to any withdrawal.