

Children and young people who display harmful and problematic sexual behaviour

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Islands Safeguarding Children
Partnership Board

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Foreword

Sarah Elliott

Pan Island Independent Chair-Safeguarding Partnerships

I am delighted to introduce this multi-agency framework to address the needs of children and young people who display harmful and problematic sexual behaviours.

The NSPCC have highlighted the difficulty in determining the true number of children and young people affected by harmful sexual behaviours in the Bailiwick but research into prevalence in other jurisdictions has indicated that about a third of child sexual abuse cases are likely to be by other children and young people.

That's why it's important that all professionals including teachers, social care and health staff, police, convenor and tribunal staff, volunteers in youth and sports clubs and many other organisations working with children and young people in the Bailiwick are trained, equipped and confident in recognising and responding to harmful and problematic sexual behaviours in children and young people.

Harmful sexual behaviour can be easily misunderstood, leading to unhelpful reactions which is why we require an operational framework which encourages collaborative multi agency working. This approach helps determine if the behaviour is normal for the developmental age of a child and that there is an understanding of the background and context in which a child is growing up.

The enclosed framework helps us do this by setting out a clear procedure to be followed including use of tools such as the Brook Sexual Behaviours Traffic Light Tool, referral to MASH and with a clear pathway to follow including where there may be more serious concerns that may require management through the criminal justice system.

We want to ensure that all children and young people in the Bailiwick can grow up safely and the framework sets out how preventative work such as education in schools, advice to parents, therapeutic and specialist support can ensure the right help is given at the right time.

I am grateful to the HSB Co ordinator and many people who have played a role in researching best practice and developing this excellent resource to aid our understanding and provide a consistent and tailored approach to address harmful sexual behaviours.

I commend the framework to you and through the Islands Safeguarding Children Partnership (ISCP) who will be overseeing implementation, monitoring the impact of the framework and celebrating good practice in addressing this important area of safeguarding.

Sarah Elliott

Pan Island Independent Chair-Safeguarding Partnerships

01 Aims and Objectives

Harmful sexual behaviour (HSB) by children and young people includes a range of behaviours in a variety of situations and can be defined as follows:-

Sexual behaviours expressed by children and young people under the age of 18 years old that are developmentally inappropriate, may be harmful towards self or others, or be abusive towards another child, young person or adult.
Hackett 2014

It is important to recognise that increasingly Harmful Sexual Behaviour also takes place on-line. In relation to Technology -Assisted Harmful Sexual Behaviour (TA-HSB) the following definition is useful:

TA-HSB refers to one or more children engaging in sexual discussions or acts – using the internet and/or any image-creating/sharing or communication device - which is considered inappropriate and/or harmful given their age or stage of development. This behaviour falls on a continuum of severity from the use of pornography to online child sexual abuse.
Hollis and Belton, 2017

Much of the research in the UK and in other jurisdictions suggests that at least one third of all harmful sexual behaviour towards children and young people is committed by children and young people. (Hackett et al 2016)

Identifying and challenging potentially harmful sexual behaviour can raise the anxiety of many professionals working with children and young people. The guidance is required to support professionals to manage these behaviours and to support the children and young people themselves involved and their family networks.

The purpose of this procedure is to provide an operational framework in respect of children and young people who display HSB and young people who suffer the effects of HSB.

Three core principles should guide work with children and young people who display HSB:

Three Core Principles:

1

The need for a co-ordinated approach across agencies and with families.

2

The needs of children and young people who harm others should be considered separately from the children that they harm. Agencies should be alert to the fact that children who harm others may pose a risk to children other than any children currently known to have been harmed and/or be at risk of significant harm themselves.

3

An assessment should be carried out in each case, appreciating that the child may have considerable unmet developmental needs, as well as specific needs of children who experience it.

Language

Professionals must be aware of the legitimate concerns about the inappropriateness of placing labels upon children and young people, given their developmental status, for example, referring to a child or young person as a 'young sex offender' or 'young abuser' is not appropriate. The use of the term 'a child/or young person who displays problematic or harmful sexual behaviour' is more appropriate and accurate, as it emphasises the child or young person's developmental status first and foremost whilst acknowledging the behaviours that require attention.

02 The Principles of Multi-Agency Working

Work with children & young people who harm others must recognise that such children are likely to have considerable needs themselves and that they may pose significant risk of harm to other children and young people.

The needs of the children and young people who sexually harm should be considered separately from those who have been harmed.

Evidence suggests that children and young people who cause harm to others may have suffered considerable disruption in their lives, they may have been exposed to violence within the family, 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, some will in addition be suffering from, or at risk of significant harm and may themselves be in need of protection.

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.

Young people who sexually harm others have a right to be consulted and involved in all matters and decisions that affect their lives. Their parents have a right to information, respect and participation in matters that affect their family.

The complex nature of the problem requires a co-ordinated, multi-disciplinary approach which addresses both child protection and criminal justice issues.

03 Identifying Sexual Behaviours

Exploration during childhood is a normal part of development and it is important that those working with children and families develop an understanding of age-appropriate sexual behaviour. There are no officially agreed ways of describing sexualised behaviours which cause concerns however, the Brook Sexual Behaviours Traffic Light Tool (the “Brook Tool”) complements organisational safeguarding procedures by supporting professionals working with children and young people to identify, understand and respond appropriately to sexual behaviours. The Brook Tool must not be used unless individuals have undertaken specific training via Brook. Multi Agency training is available to all front line practitioners in regard to Harmful Sexual Behaviour and also specifically for the use of the Brook Traffic Light Tool.

The Brook Tool divides behaviours seen by age groups- 0-5 years, 5-9 years, 9-13 years and supports professionals to:

- Identify behaviour and establish if sexual behaviour is typical or developmentally appropriate, problematic or harmful.
- Understand what that behaviour is communicating and why the child or young person may be exhibiting the behaviour.
- Respond appropriately, considering how the type of response will depend on what is motivating the behaviour, what the behaviour is communicating and the severity of the behaviour.

<div>Healthy/Normal Sexual Behaviours (green)</div> <div>Key features in healthy/normal sexual behaviours are that the behaviours are:</div>	<ul style="list-style-type: none">• Mutual• Consensual, participants feel they have a choice whether or not to engage in the behaviour• Exploratory – age appropriate• No intent to cause harm• Fun, humorous• No power differentials• Younger children aged 0-4 may have periods of disinhibition when they like to shed their clothing. Children usually become ‘socialised’ out of this behaviour and it would only become a potential concern if they were still doing it in the aged 5-7 stage.
<div>Concerning Sexual Behaviours (amber)</div> <div>Characteristics of concerning sexual behaviours are:</div>	<ul style="list-style-type: none">• Displaying sexualised behaviours that are not age appropriate. For example, a young child using sexual language or not having clear boundaries regarding personal spaces, therefore making others feel uncomfortable.• Some one-off incidents of low-key behaviours (e.g., touching over clothing).• Incidents where there appears to be peer pressure to engage in the behaviour• Behaviours are spontaneous rather than planned.

Concerning Sexual Behaviours (amber)

Characteristics of concerning sexual behaviours are:

- Behaviours may be self-directed (e.g., excessive masturbation).
- Disproportionate interest or use of pornographic material.
- There are no other balancing factors for example, lack of intent to cause harm, or the level of understanding of the child/young person about the behaviours they are engaging in; or there is acceptance of responsibility for the behaviour and some remorse shown.
- Other factors in their background such as parents/carers who are concerned about the behaviour and interested in working with the child/young person to change.

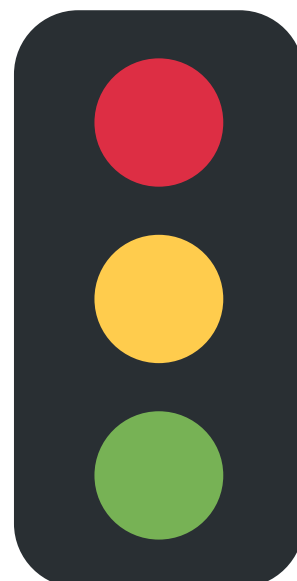
Harmful Sexual Behaviours (red)

Characteristics of harmful sexual behaviours are:

- Sexual behaviours that are not age appropriate.
- Elements of planning, secrecy, force, or coercion.
- Power differentials between the children/young people involved e.g., age, size, status, strength.
- The response of the children/young people targeted e.g., negative feelings such as fear, anger, aggression etc. expressed by the child/young person doing the behaviour.
- The child/young person does not take responsibility for their behaviour, blames others, or feels a strong sense of grievance.
- Incidents are frequent or increasing in frequency and the child/young person's focus on them is disproportionate to other aspects of their life.
- The child/young person is not easily distracted from the behaviour, and the behaviour appears compulsive and is persistent despite intervention.
- Other concerning behaviours such as cruelty to animals, fire setting, violence, disproportionate interest or use of pornographic material.

An individualised approach is important as children and young people with problematic and harmful sexual behaviour are diverse in character. Learning disability as well as additional learning needs, developmental delay, adversity, and trauma should always be considered in the context of harmful sexual behaviour. Chronological age should be considered alongside emotional and developmental stage.

The above is a guide. When an initial concern is identified, if possible, the Brook Tool should be used as a starting point to enable an initial red, amber, green (RAG) rating unless there is a clear need to act immediately. If you are unsure or have not undertaken the Brook training, please discuss with your Identified Safeguarding Lead or Child Protection Officer for your agency or if there is not one, please discuss with the HSB co-ordinator. In every incident where possible, discussions should always take place with the agency's Identified Safeguarding Lead/Child Protection Officer, and conversations and decisions documented.



04 Harmful Sexual Behaviour

Procedure

4.1 A referral to MASH following identification of amber or red concerns should always be the starting point for all Professionals. If the matter is urgent and outside of office hours, the duty social worker can be contacted. If the case is already open to Children and Family Community Services any amber or red concerns should be passed onto the case holder. In addition, anyone who has concerns that a child may have been abused by another child, or where an adult may have been subject to harmful sexual behaviour by a child or young person under 18 should also report their concerns to the Police.

4.2 If you have any queries or concerns regarding a child/young person displaying sexual behaviour/s that you would like to discuss you can also contact the HSB Coordinator for advice, support, and guidance.
HSBcoordinator@gov.gg/ (0)1481 223182

4.3 Following discussion at a MASH meeting or a conversation between the case holder and their manager, if there is a recommendation that a strategy meeting be convened, this should be arranged within three days. Where there are concerns that there is immediate risk of harm to the child, a strategy discussion will take place within 24 hours. A strategy discussion may take place via telephone. Any strategy discussion or meeting should be convened and chaired by a Children and Family Community Services, social work manager.

4.4 Strategy discussions should involve a first line manager from Children's Services, police, and the referrer if they are a professional. Where there has been an immediate strategy discussion a follow up strategy meeting should take place within three days. The meeting must also involve all key professional agencies, for example, Education, Health, Youth Justice Service, Reparative Care Team/HSB coordinator and any identified current professional case worker. In cases where there has been sexual assault on a child the following professionals must be included:

- Police
- Paediatrician
- FME from Jersey (Deryn Evans at Dewberry House D.Evans@health.gov.je or helpline [01534 888222](tel:01534888222) if Deryn is not available a crisis worker may be able to join the call and offer advice and guidance)
- Social Worker
- Emergency Department (if involved)

4.5 The purpose of a strategy meeting is to decide whether the threshold has been met for a single or joint agency (HSC and Police) child protection investigation, and to plan that investigation. They happen when it is believed a child has suffered, or is likely to suffer, serious harm.

4.6 A strategy meeting may need to be reconvened during or after the investigation has been concluded, where there are developments suggesting that a different plan is needed from that agreed in the original strategy discussion.

4.7 In cases involving multiple young people, care should always be taken to assess the contextual risks whilst also considering each young person individually. When HSB relates to a peer group, there should also be a focus on taking a contextual safeguarding approach. A contextual safeguarding form must be completed and referred into the Police via PPU. If required PPU will refer into MASH. Police will then take lead on a contextual safeguarding meeting involving all key and relevant professionals.

The strategy meeting is a forum to: -

- Share available information around the context of the behaviour and the background of the young person and their family and consider what further information is required
- Consider issues of child and public protection, including a clear understanding and description of the alleged incident
- Agree what action is required immediately to protect the child and provide interim services and support
- Complete the Brook Tool to identify behaviours which meet the concerning sexual behaviour range (AMBER) or Harmful Sexual Behaviour Range (RED) if this has not already been completed
- Agree on the conduct and timing of any criminal investigation
- Consider referral to HSB Coordinator and whether an AIM assessment is required and referred as a priority to the Youth Justice Service/Reparative Care Team
- Determine if legal action is required
- Consider a referral to MAPPA, where there is a risk of significant harm (*See Appendix 8*)
- Consider the needs of other children who may be affected, for example siblings, other children living in the same premises, or children and young persons in contact with alleged abusers
- Ensure the child welfare checklist and any relevant child welfare principles are used when making decisions
- Develop a clear multi-agency risk management plan which is Specific, Measurable, Achievable and Time Bound (SMART) including follow on review meeting dates if applicable
- Determine what information will be shared with the family and who will share this information

A decision on how to proceed will be made during or after the Strategy Meeting on the following: -

- Whether a child protection investigation is commenced.
- Whether the question of compulsory intervention arises and whether to refer to the Convenor.
- The Police will give consideration as to whether a criminal investigation is to be commenced.
- HSB professionals meeting (*See Appendix 5*)

Sometimes more than one pathway will be appropriate and will run in conjunction with each other.

4.8 Where the behaviours are thought to be complex, but not serious enough to warrant a child protection investigation, referral to the Convenor and/or a criminal investigation the matter may be dealt via the following individual or combined routes:

- Early Help Services
- Psycho educative support via allocated case holder
- Advice, support & guidance via the HSB coordinator to the family/child
- Advice, support & guidance via the School Nurse/Sexual Health Outreach Nurse

- Advice, support, and guidance via a third sector agency, for example the Youth Commission Service or Action for Children
- Advice and support from the Safeguarding Lead in the States Early Years Team
- HSB professionals meeting (*See Appendix 5*)

4.9 Complex behaviour should always be referred into MASH in the first instance. Even where behaviour does not require the higher-level response of a Strategy meeting the case will be discussed via the multi-agency MASH process and will feed into the multiagency data collection plan to identify the scale of HSB in Guernsey.

4.10 It is important to involve the child or young person, and family wherever possible throughout the process. Further consideration should be given to family involvement if it is likely to generate separate or further child protection concerns.

4.11 Where the child, young person, or family are not willing to engage in assessments a referral to the Convenor should be considered.

05 HSB Professionals Meeting

5.1 A HSB professionals meeting should take place, when concerns do not meet the threshold of a strategy meeting or as an outcome of a strategy meeting, when there is a need for further multi agency management and discussion of the case. The Brook Tool must be used to enable a (RAG) rating and identified need for a HSB professionals meeting. An AIM checklist will then be completed by Youth Justice and the Reparative Care Team prior to the HSB professionals meeting.

5.2 MASH must have gained consent from the family though the initial MASH referral prior to the HSB professionals meeting taking place. If the case is already open to Children and Family Community Services, the allocated worker convenes the HSB professionals meeting and must also gain consent from the family.

5.3 The HSB Coordinator or a professional who has a relationship with the child, young person or family should take the lead on the HSB professionals meeting.

5.4 The purpose of the HSB professionals meeting is to provide a multi-agency forum with all relevant and key professionals to give further context to the case and provide a holistic view of the child or young person and family.

Things to consider during the HSB professionals meeting: -

- The context of the behaviours considering the child's individual developmental needs, parenting, family, and environmental factors
- Is there agreement by the child/family to work with relevant agencies to address the problem
- Initial safety planning in all key environments (*See Appendix 10*)
- How will safety plans in other key environments be shared with the family
- If any safety plans need to be shared with other people or organisations. If this is felt necessary and parents/carers and child/young person have not consented to information being shared, legal advice should be sought.

- Pattern Mapping
- Whether an AIM assessment is needed to inform possible further intervention
- Psycho educative work and support for the parents/carers
- Regular HSB professionals' meetings/timescales
- How services provided will be coordinated, considering the possible impact on other statutory processes.

06 Criminal Justice Route

Prior to prosecution

6.1 This procedure applies where a young person who has reached the age of criminal responsibility (12 years) displays sexually harmful behaviour that will be reported or investigated as an offence. Where it is apparent a criminal offence may have occurred, Police and HSC will conduct a joint investigation. If criminality is identified, then police will take primacy for the investigation, but HSC will be involved to a degree and will be fully informed throughout the investigation.

6.2 Where there is sufficient evidence to provide a realistic prospect of conviction of a young person for an offence, the designated officer (usually a police officer) will send a report of the offence to the Children's Convenor. Where the officer decides it may be necessary in the public interest to prosecute the child, the report will also be submitted to the Law Officers.

6.3 In making a decision on whether or not to submit a report to the Law Officers, the designated officer will have regard to a number of factors, including the nature and gravity of the offence and all information available in respect of the offence and the young person.

6.4 Where the Convenor receives a report the Convenor will make some initial investigations and gather some information about the young person. The Convenor Referral Meeting (CORM) will be used for this purpose for the majority of young people.

6.5 Where a report has been made only to the Children's Convenor, the Convenor can transmit the report to the Law Officers if after investigation the Children's Convenor decides it may be necessary in the public interest to prosecute the young person. In their decision making the Convenor will have regard to the same factors as above.

6.6 Where a report of the offence is received by both the Law Officers and the Convenor, the Law Officers will review the report and consider all information available in respect of the offence, the young person and any representations made by the Children's Convenor. At this stage, the information that will be considered is that which is already available (e.g. school reports, assessment of progress if subject to any existing orders). After review, the Law Officers will decide whether to prosecute the young person or whether to refer the young person to the Children's Convenor. If referred to the Children's Convenor, the route to criminal prosecution ends but the Convenor will decide whether compulsory intervention may be required and if so, will refer the young person to a hearing of the Child, Youth and Community Tribunal.

6.7 Where it has been decided by the Law Officers that the young person will not be prosecuted, and the case has been referred to the Children's Convenor the Convenor can request an AIM assessment from Youth Justice.

07 Criminal Justice Route

Where behaviour is disputed or prosecution will take place

7.1 This procedure applies to a young person where the Law Officers have decided to prosecute.

7.2 If a plea of not guilty is entered, the legal process continues to a contested trial hearing, either before the Youth Court in front of a Magistrate, or before the Royal Court. If a guilty plea is entered or the young person is found guilty after trial, the Court can request a Social Enquiry Report and should be asked for sufficient time for an AIM assessment to be completed by Youth Justice that will then inform the Social Enquiry Report.

7.3 The Court can make a condition of bail that the child defendant comply with the preparation of reports (if there is an indication of non-compliance or a history of not attending appointments).

08 MAPPA

Where there is a risk of serious harm

8.1 Multi Agency Public Protection Arrangements (MAPPA) form the basis of public protection, through multi-agency partnership, to manage the risk of sexual harm, and/or serious violence, presented by certain individuals.

8.2 Serious harm is defined as harmful behaviour of a violent or sexual nature, which is life threatening and/or traumatic, and from which recovery, whether physical or psychological, may reasonably be expected to be difficult or impossible.

There are three categories of individual who are managed via the MAPPA process – Cat 1 & Cat 2 are automatically subject to MAPPA

1. Persons subject to Notification Requirements (sex offender registration) as a result of conviction or Police Caution for any sexual offence
2. Persons sentenced to imprisonment/youth detention for a sexual offence, or sentenced to over 1 year imprisonment for a violent offence (there are also provisions for those who have committed a serious act who have been detained for mental health purposes)
3. Other persons who are considered by the MAPP Unit to pose an ongoing, serious risk of harm to the public, and who require multi-agency management under the auspices of MAPPA.

MAPPA Referral Process

8.3 The category 1 and 2 referrals should come from Criminal Justice Agencies (usually Police, Probation Service, Prison or Youth Justice).

8.4 Category 3 referrals can come from any service, whereby the referrer has very good reason to consider that a person presents a serious risk of violent or sexual harm to another individual, group of

individuals or members of the public generally, as per the above definition. It is advised that contact is made with the MAPP Unit to discuss the suitability of a referral in the first instance. (NB: In the event that management under MAPPA is not deemed appropriate, individual agency/other risk management processes may still apply).

8.5 Referrals should be made on the MAPPA A referral form which can be obtained by contacting the MAPP Unit on [01481 224337](tel:01481224337).

MAPPA Registration Process

Once a case is identified as appropriate for management under the auspices of MAPPA, the MAPP Unit will:

- Identify a lead agency (this must be a member of the Responsible Authority identified within the law – i.e. Probation Service, Police Service, or Prison Service) and a lead contact name.
- Identify a management level
- Inform relevant agencies of the registration of a person as a MAPPA subject, the lead contact name, summary of initial risk concerns, the initial risk management plan, and any planned meeting.

8.6 Children under the age of 18 who are subject to relevant sentences will usually be supervised by the Youth Justice Service. As such, whilst the Probation Service may be the relevant member of the MAPPA Responsible Authority identified as lead agency, in reality this role would be delegated to the Youth Justice Service as the specialists in risk assessment and management of young people (this provision echoes the proposed new Probation Law).

8.7 Children may also be referred into MAPPA under category 3 (i.e. no conviction, but a risk of sexual harm or risk of serious physical harm to others, that needs multi-agency management, is deemed to be present). In these cases, it is also considered that the best placed lead agency for management/co-ordination under the auspices of MAPPA is the Youth Justice Service. In cases whereby no prosecution has occurred for a sexual offence committed by a child, consideration must always be given to a referral into MAPPA. The legal framework for MAPPA may assist in the exchange of information for the purposes of risk management not available under other legal frameworks.

8.8 The MAPP Coordinator and Guernsey Probation Service management team will be available to liaise with Youth Justice to discuss specific case complexities and advise accordingly.

8.9 Once a person is registered as a MAPPA subject risk management is the shared responsibility of the identified MAPPA group. The co-ordination of the risk management plan however is the responsibility of the lead agency.

8.10 Regular formal review of the risk assessment and risk management plan must occur. These will be in meeting form (or between the MAPP Unit and lead agency for level 1 cases). Frequency of these formal reviews will be determined within prior meetings/reviews and outcomes will be communicated with all relevant agencies.

8.11 A person will be de-registered from MAPPA when the relevant agencies agree that the risk of harm no longer requires multi-agency risk management planning. The ultimate responsibility for the decision lies with the lead agency, in conjunction with the MAPP Unit.

8.12 Where a sexual risk is presented, and conditions are necessary to protect. In terms of conditions attached, these Orders can have both requirements and prohibitions.

- Sexual Offences Prevention Orders
- Risk of Sexual Harm Order

If you have any queries regarding a referral or concerns regarding a case you should contact the MAPP Unit on [01481 224337](tel:01481224337).

09 Safety Planning

9.1 During all stages of intervention, it is necessary to consider and respond to several risks that could contribute to further sexual behaviours and a safety plan assists with this process. Safety plans should be dynamic and adapted over time to reflect ongoing internal and external factors that impact on risk management.

Safety Plans are useful frameworks to provide discussion around the following:

- Anticipating situations or stressors that will impact on risk
- How to manage potentially risky situations
- Introducing and maintaining appropriate rules, boundaries, and supervision
- Providing clear messages about adult responsibility
- Discussing behaviours and risk with a young person in a meaningful way
- Discussing safety with other children and young people who are considered potentially vulnerable

Safety Planning in young person's living environments/home

9.2 The safety plan should apply to the young person's current living environment. This could be the family home, foster care setting or residential setting and should still apply where a child has been moved for protective reasons. The plan needs to be written in a way that is understandable to the child or young person and those supporting them, as well as others within the home including siblings, and other children and young people within a care placement (e.g. foster siblings). It is possible the plan guides safety planning within multiple environments for example where a child has regular contact or respite. Parents and carers must be part of this process, as well as the young person where appropriate, and the plan should be reviewed regularly through multi-agency risk management meetings.



A safety plan should consider:

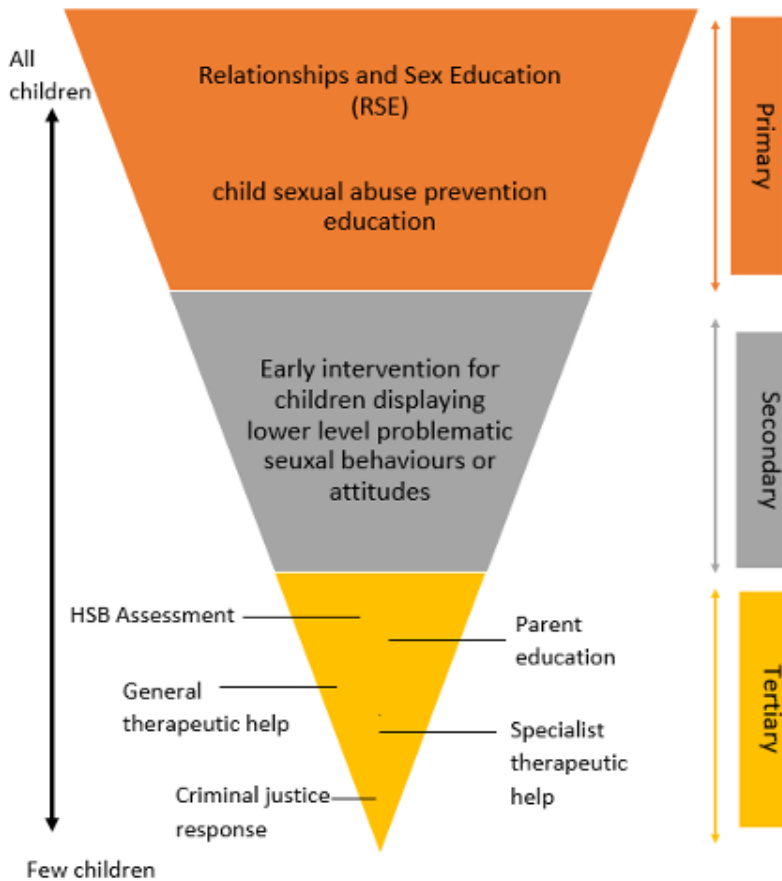
Young persons living environments/home	<ul style="list-style-type: none">• Sexual behaviour in the current living environment• Occupancy• Bedrooms and sleeping arrangements• Bathroom and toilet including privacy and boundaries, activity, and dress code• Sexualisation of environment including access to sexual images and materials• Play and activities inside the living environment including internet and social media• How access to multi-media is monitored• How rules are implemented and communicated
Activities outside of the living environment	<ul style="list-style-type: none">• Sexual behaviour in the community• How and where the young person spends their time in the community• Is the young person vulnerable in the community• How access to multi-media is monitored in the community and in other people's houses• Level of supervision in the community
Safety Planning and Risk Management in education settings	<ul style="list-style-type: none">• Teaching and learning• Supervision• Other children and young people• Individual work• Unstructured times

The above is a guide and not a definitive list of all considerations for safety planning and risk management. Robust risk assessment should identify all areas where someone could present a risk of harm to others. If there is a need for safety planning the HSB Professionals Meeting provides a multi-agency forum for initial safety planning and risk management using AIM and the RAMP Plan.

Where there is good reason to consider that a person presents a serious risk of violent or sexual harm the MAPPA referral process should be followed, and a MAPP meeting should be convened as soon as is practically possible to discuss the safety of those potentially at risk of harm and appropriate measures put in place to mitigate against identified risks.

10 A 'Whole Setting' Safeguarding Approach (primary level)

To prevent and address harmful and problematic sexual behaviours the implementation of a continuum of interventions that meets the needs from prevention to specialist support is vital.



The diagram here suggests a potential range of preventative responses for consideration at primary, secondary and tertiary level. [NOTE - the terms 'primary', 'secondary' and 'tertiary' relate to the level of intervention. They do not relate to phases of school education.]

Primary prevention is the largest area of preventative work, as it covers all children and young people. Keeping children safe within all key settings (schools, colleges, early years, health, youth clubs, recreational and sporting settings, residential and foster care) is a priority.

Primary and early intervention activities are paramount in keeping all children and young people from becoming involved in any form of harmful sexual behaviour.

Universal services (health, education, public safety, and community-based support) all have a role in primary prevention and early intervention to avoid harm to children.

Key aspects of Primary and Early Intervention

Adults model respectful and appropriate behaviour

Children and young people are clearly educated about what is acceptable and unacceptable behaviour

Adults create a rich environment to promote resilience, providing positive role models and a respectful culture

Attention is given to the child's wider needs

Adults create a safe environment where children and young people feel able to talk openly and honestly and know where to seek support

Children are supported to have a good understanding of consent and healthy relationships

10.1 A 'whole setting' safeguarding approach should extend to implementing policies and practices which promote a safe and respectful culture, including encouraging children and young people to recognise and report situations where others are causing them harm.

In particular there should be: -

- Clear recognition of HSB as an issue (including sexual harassment and sexual violence) and a zero-tolerance approach
- Relevant online filtering and monitoring systems in place where relevant and possible
- Appropriately trained staff (*See appendix 12*)
- Robust recording of concerns and actions in a manner that enables monitoring in line with systems (*See Appendix 14 for multi-agency recording form*)
- Referral of incidents through the established safeguarding channels including, for amber and red cases, onward referral to MASH (and Police where appropriate), as per this ISCP procedure.



10.3 The majority of children come into contact with professional adults most frequently in early years, primary and secondary school settings. In addition to the points above, education providers should be committed to ensuring that:



- The protective measures in place to safeguard learners are of the highest standard
 - Learners should be taught about safeguarding, including online, through teaching and learning opportunities across the whole curriculum.
 - Specific PSHE education contributes to personal development by helping pupils to build their confidence, resilience, and self-esteem and to identity and manage risk, make informed choices, and understand what influences their decisions.
-
- Schools should develop a framework and resources to help effective delivery to ensure pupils are being taught safeguarding and can practice skills to keep themselves and others safe. (The PSHE Association programme of study can help support schools to develop a whole school approach to effective relationships and sex education, including work on sexual abuse in an age appropriate way.)



11 Intervention (secondary & tertiary level)

11.1 As shown in the earlier diagram, illustrating behaviours and the potential range of preventative responses, secondary and tertiary levels of behaviour include more specialised intervention.

11.2 Secondary prevention may be necessary where there has been a behaviour of concern, or an environment combined with other factors signals high risk of potential harmful behaviours. Secondary level responses may include educative work, screening using the AIM checklist, further assessment, and safety planning.

11.3 Tertiary prevention describes interventions that are necessary when a child or young person displays harmful sexual behaviours which are violent or abusive. Tertiary level responses will include screening using the AIM checklist, a full AIM assessment to inform direct intervention and safety planning.

11.4 Where there is a need for further intervention for a child or young person a Harmful Sexual Behaviour (HSB) referral form must be completed. A referral can be made by any person concerned that a child or young person is displaying harmful or problematic behaviour at any point provided the criteria is met. A referral form can be accessed by contacting HSBcoordinator@gov.gg. Any queries or referrals should also be made to the HSB Coordinator.

11.5 Screening will be carried out in the first instance using the AIM checklist which will determine whether there is a need for bespoke educative work for the child/young person/family or a full AIM assessment. If required, the appropriate AIM assessment will be carried out to inform further intervention.

11.6 Structured interventions are based on the harmful sexual behaviour itself and the developmental stage and learning ability of the child or young person. The interventions carried out consider factors that may have contributed to the harmful sexual behaviours, such as parenting, family, environmental factors, or any trauma they may have experienced.

11.7 Risk management procedures will run alongside intervention. Containment of risk, monitoring of risk factors, imminence of risk and compliance with conditions and treatment outcomes is paramount alongside treatment to achieve best outcomes in terms of public protection.



12 Resolution of Professional Disagreements

12.1 All workers should feel able to challenge decision-making and to see this as their right and responsibility to promote the best multi-agency child protection practice. The resolution of professional disagreements procedure is written to resolve disagreements which may occur across agencies, when working on child protection.

12.2 Disagreements could arise in several areas, but are most likely to arise around:

- Levels of need/thresholds
- Roles and responsibilities
- The need for action
- Communication

The ISCP offer a six-stage process to facilitate navigation of professional disagreements and debrief at the end. You can find the process and access the audit tool on the ISCP website. For further advice or discussion, please contact the ISCP Business Manager.

Resolution of Professional Disagreements - <http://iscp.gg/article/118107/Resolution-of-Professional-Disagreements---Escalation-Policy>

13 Recording

Sexual Behaviour Recording Form

This template of questions should be used as a guide when completing a recording. A separate recording should be made each time there is an incident a young person displays harmful or concerning sexual behaviour. This form should be kept on the child/young person's confidential file in accordance with agency protocols and shared with other professionals where it is assessed that a multi-agency approach is required.

It is important to have as much detail as possible about the incident. Please complete this form for each new sexual behaviour concern. This will highlight information about behaviours, for example if they are increasing/decreasing/changing in severity/victims to inform an ongoing analysis of risk.

The form can be used to assist in making a referral to MASH / case holder / HSBcoordinator@gov.gg

Child's Name:	DOB:
Date/time of incident:	
Form completed by:	

Type of behaviour: describe in as much detail as possible, what the child/yp did or said:

Context of the behaviour: what preceded the behaviour, for example, where did the behaviour occur, what was the young person doing immediately prior to the behaviour, was the behaviour spontaneous or planned, what was the atmosphere of the environment? If another young person was involved, was there use of force, coercion, threats, or other forms of manipulation?

Relationship between the child/yp involved: e.g., are they of a similar age, would they normally associate with each other; is there anything to suggest that one child/yp might be more in control than the other e.g., size, ability, status, strength differences?

Response of the other children/yp, adult involved: e.g., did they engage freely? Were they uncomfortable? Were they anxious or fearful?

Response of the child/yp when challenged about behaviour:e.g., were they defensive, denying, aggressive, angry, or were they passive; or were they embarrassed, regretful, taking responsibility?

What was attempted to address the behaviour: How did you respond to the behaviour for example what did you say and do? How effective was this?

What do you think caused these behaviours? Along with thinking about why, try to think about what needs the young person was meeting by engaging in the behaviours?

Response of the parents when informed of their child's sexual behaviour:

Other actions taken? Please document any contact made with other agencies for e.g., for purposes of seeking advice or making a referral. Include whom you spoke to, actions agreed by whom and when etc.

Signed:

Date:

14 Training

Multi-Agency

15.1 Developing an Understanding of Harmful Sexual Behaviour training is available through the Islands Safeguarding Children Partnership and will be available to access alongside other relevant Safeguarding Children & Young People training. The training aims to increase knowledge and skills in the following: -

- Our understanding of Harmful Sexual Behaviour and the risks and needs of children who present with Harmful Sexual Behaviour
- What is OK/not OK sexual behaviour
- The underlying reasons why a child might present with this behaviour and the impact on the family
- How to respond to Harmful Sexual Behaviour including safety planning

15.2 Initially the Brook 'Sexual Behaviours Traffic Light Tool' training will be rolled out through the Islands Safeguarding Children Partnership to identified agencies but will then be made available to all agencies.

Education

15.3 It is proposed that all School Child Protection Officers (SCPO), SCPO Deputies and Safeguarding Leads across the Bailiwick within Early Years, Primary, Secondary and College of Further Education attend a one-day training course in the summer term, in preparation to deliver Harmful Sexual Behaviour awareness training to all staff as part of their INSET programme.

15.4 Education providers will have access to a HSB handbook for recognising and responding to harmful and problematic sexual behaviours in their setting, which will include resources and recording templates. (See Appendix 13)

Intervention

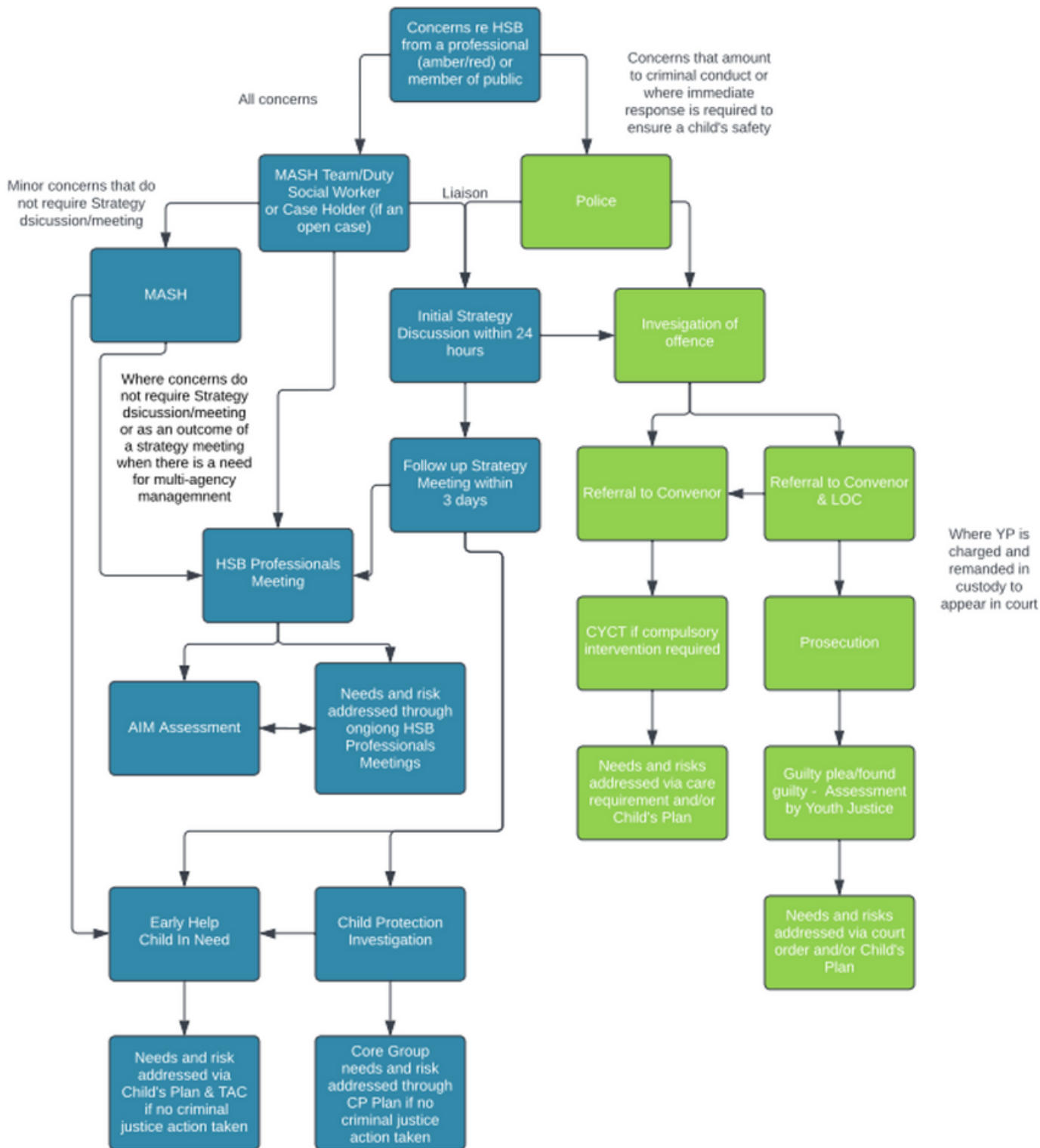
15.6 The Reparative Care Team and Youth Justice Service are training in various intervention programmes to offer direct work that meet the unique needs of children and young people who have displayed harmful or problematic sexual behaviours.

15.7 It is imperative that intervention is relevant, time bound, and evidence based to achieve the most positive and cost-effective outcomes: All staff delivering interventions therefore will be trained to a required standard, and there must be a commitment to the maintenance of training to ensure up to date knowledge is applied and interventions adapted accordingly.

15.8 All staff delivering treatment / intervention should receive regular clinical supervision.

All training will be ongoing annually through the Islands Safeguarding Children Partnership.

15 Flowchart



16 Resources

The additional NSPCC recommended links below provide useful resources for agencies and carers. **[NOTE: Whilst Guernsey has its own legislation, similarities with UK legislation mean that the Police endorse these as helpful in building general understanding.]**

<https://www.contextualsafeguarding.org.uk/resources/>

<https://www.contextualsafeguarding.org.uk/toolkits/beyond-referrals-toolkit-schools/>

<https://www.childline.org.uk/info-advice/friends-relationships-sex/sex-relationships/>

<https://www.parentsprotect.co.uk>

<https://learning.nspcc.org.uk/child-abuse-and-neglect/harmful-sexual-behaviour>

<https://learning.nspcc.org.uk/safeguarding-child-protection-schools/promoting-healthy-relationships>

https://learning.nspcc.org.uk/media/1377/pants-for-early-years-pdf_gd_aw.pdf

<https://bishtraining.com>

<https://learning.nspcc.org.uk/child-abuse-and-neglect/harmful-sexual-behaviour/understanding>

<https://learning.nspcc.org.uk/research-resources/2019/harmful-sexual-behaviour-framework>

<https://learning.nspcc.org.uk/media/1657/harmful-sexual-behaviour-framework.pdf>

<https://www.nice.org.uk/guidance/ng55>

<https://www.brook.org.uk/training/wider-professional-training/sexual-behaviours-traffic-light-tool/>

<https://learning.nspcc.org.uk/health-safeguarding-child-protection>

<https://www.nspcc.org.uk/keeping-children-safe/support-for-parents/pants-underwear-rule/>

<https://www.stopitnow.org.uk>

<https://www.parentsprotect.co.uk>

<https://www.nspcc.org.uk/keeping-children-safe/online-safety/#inappropriate>

<https://www.gov.uk/government/publications/sharing-nudes-and-semi-nudes-advice-for-education-settings-working-with-children-and-young-people>

Resources continued

<https://www.thinkuknow.co.uk>

https://www.thinkuknow.co.uk/professionals/resources/thinkuknow-toolkit/?utm_source=Thinkuknow&utm_campaign=a2f3bcc3b7-EMAIL_TUK_APRIL_2019&utm_medium=email&utm_term=0_0b54505554-a2f3bcc3b7-64772669

<https://www.childline.org.uk/info-advice/bullying-abuse-safety/online-mobile-safety/sexting/>

<https://www.gov.uk/government/organisations/uk-council-for-internet-safety>

<https://www.childnet.com/resources/step-up-speak-up/teaching-toolkit/>

<https://www.childline.org.uk/info-advice/your-feelings/feelings-emotions/getting-through-tough-time/>

<https://www.childline.org.uk/info-advice/friends-relationships-sex/sex-relationships/healthy-unhealthy-relationships/>

<https://www.childline.org.uk/info-advice/friends-relationships-sex/sex-relationships/sex-consent/>

<https://www.youtube.com/watch?v=pZwvrXVavNQ>

<https://www.brook.org.uk>

<https://www.brook.org.uk/your-life/porn/>

<https://learn.brook.org.uk>

<https://bishtraining.com/planet-porn/>

<https://learning.nspcc.org.uk/training/harmful-sexual-behaviour-hsb-schools>

<https://learning.nspcc.org.uk/safeguarding-child-protection-schools>

<https://www.disrespectnobody.co.uk>

<http://coolnotcoolquiz.org>

<https://www.nda.services/control>

<https://www.tht.org.uk>

<https://www.gettingiton.org.uk>

<https://www.fpa.org.uk/product/jasons-private-world/#product-content>

Resources continued

[https://www.thinkuknow.co.uk/professionals/resources/thinkuknow-toolkit/?](https://www.thinkuknow.co.uk/professionals/resources/thinkuknow-toolkit/?utm_source=Thinkuknow&utm_campaign=a2f3bcc3b7-EMAIL_TUK_APRIL_2019&utm_medium=email&utm_term=0_0b54505554-a2f3bcc3b7-64772669)

[utm_source=Thinkuknow&utm_campaign=a2f3bcc3b7-](https://www.thinkuknow.co.uk/professionals/resources/thinkuknow-toolkit/?utm_source=Thinkuknow&utm_campaign=a2f3bcc3b7-EMAIL_TUK_APRIL_2019&utm_medium=email&utm_term=0_0b54505554-a2f3bcc3b7-64772669)

[EMAIL_TUK_APRIL_2019&utm_medium=email&utm_term=0_0b54505554-a2f3bcc3b7-64772669](https://www.thinkuknow.co.uk/professionals/resources/thinkuknow-toolkit/?utm_source=Thinkuknow&utm_campaign=a2f3bcc3b7-EMAIL_TUK_APRIL_2019&utm_medium=email&utm_term=0_0b54505554-a2f3bcc3b7-64772669)

<https://www.fpa.org.uk/product/law-on-sex-factsheet/>

<https://www.sentencingcouncil.org.uk/wp-content/uploads/Sexual-Offences-Definitive-Guideline-web5.pdf>

https://www.sentencingcouncil.org.uk/wp-content/uploads/Sexual-offences-Sentencing-Children-and-young-people-Definitive-Guide_FINAL_WEB.pdf

<https://www.nice.org.uk/guidance/ng55>

<https://learning.nspcc.org.uk/health-safeguarding-child-protection>

https://www.thinkuknow.co.uk/professionals/?utm_source=Thinkuknow&utm_campaign=a2f3bcc3b7-EMAIL_TUK_APRIL_2019&utm_medium=email&utm_term=0_0b54505554-a2f3bcc3b7-64772669

<https://www.contextualsafeguarding.org.uk>

Glossary

Adversity - highly stressful, and potentially traumatic, events or situations that have occurred

AIM – Assessment of child or young person who has displayed harmful sexual behaviour

AIM checklist – A tool used to put sexual behaviours in context to make a proportionate and informed decision

Brook – An organisation that operates several sexual health and wellbeing services across the UK

Brook Tool – sexual behaviours traffic light tool to support professionals working with children and young people to identify, understand and respond appropriately to sexual behaviours

Convenor – An experienced lawyer independent from all other services and has wide powers to investigate a child's circumstances from a legal and welfare perspective. Guidance on the referral of children to the Children's Convenor - <https://www.convenor.org.gg/content/referral-form>

CORM – Convenor referral meeting

CP Plan – Child Protection Plan

CYCT – Child Youth Community Tribunal

Developmental delay – when a child’s overall development occurs slower than normal, is consistently slow in one area, or seems to stop moving forward

Emotional development – emergence of the experience, expression, understanding, and regulation of emotions from birth and the growth and change in these capacities throughout childhood, adolescence, and adulthood.

FME – Forensic Medical Examiner

HSB – Harmful Sexual Behaviour

HSC – Health and Social Care

ISCP – Islands Safeguarding Children Partnership

LOC – Law Officers of the Crown

MAPPA – Multi Agency Public Protection Arrangements

MASH – Multi Agency Support HUB

NSPCC – National Society for the Prevention of Cruelty to Children

NYCC health & wellbeing – North Yorkshire County Council

Office of the Children’s Convenor - professionals from a range of backgrounds including law and social work.

Pattern Mapping - exploring the impact of significant life events on the child or young persons world and how this might have also impacted on their sexual behaviours

PPU – Public Protection Unit

Prosecute - Institute or conduct legal proceedings against a person or organisation

RAG – Red, Amber, Green rating in relation to the sexual behaviours traffic light tool

RCT – Reparative Care Team

SOPS’s – Sexual Offences Prevention Orders

TAC – Team around the Child

TA-HSB – Technology Assisted Harmful Sexual Behaviour

Trauma - a person’s emotional response to a distressing experience or series of events.

