



HARMFUL SEXUAL BEHAVIOUR PROJECT

TERMS OF REFERENCE

In North Lincolnshire, agencies are collaborating in a project to provide a specialist service to children and young people who have engaged in harmful sexual behaviour (HSB). This includes harm to other children, young people and themselves.

The service consists of a 'virtual team' of multi-agency practitioners who have been trained in the issues surrounding HSB, and in specialist assessment, using the AIM2 methodology.

In addition, there is a HSB Panel, with multi-agency management representation. In general terms, the purpose of the Panel is to act as a steering group for the project; act as the referral and allocation route for the service; and act as a source of knowledge, expertise and support for the practitioner team.

Panel representation

The Panel consists of the following:

- Consultant Clinical Psychologist, CAMHS North Lincolnshire
- Service Manager, Barnardo's
- Humberside Police Representative
- Education Inclusion Senior Officer (Careers and Progression)
- Health Service representative
- Service Manager, Case Management, Children's Services, NLC
- Service Manager, Case Management, YOS, NLC
- Principal Educational Psychologist / Lead Officer Emotional Health and Wellbeing
- Principal Officer, Vulnerable C&YP (Education Division)
- Service Manager, FaSST, NLC
- HSB Practitioner Chair

Additional Invitees (Case Dependent)

- National Probation Service
- NLC, Adult Services

Conduct of Meetings

The Panel is quorate if 3 members are present.

Meetings will be recorded and action notes will be produced for circulation to Panel members and others, as the Panel deems appropriate.

The Panel will decide upon a Chair of the meetings as it sees fit. In case of dispute, the Chair will be chosen by a simple majority of the Panel members at the meeting.

Substitutes are allowed at the discretion of the Panel.

The Panel may second other members as it sees fit. In case of dispute, additional members will be allowed by a simple majority of the Panel members at the meeting.

Frequency of Panel Meetings

The Panel will meet every month at minimum. Panel members may decide to meet at greater or lesser intervals as they deem fit. In case of dispute, a simple majority of the Panel members may decide whether a meeting should take place or not.

Purpose of the Panel

The Panel exists to:

- receive cases from specified agencies (predominantly social care and YOS) and agree if suitable for assessment and/or intervention from the virtual team
- allocate agreed cases in a fair and transparent manner between practitioners who are trained and form part of the virtual team
- advise (via management arrangements) what each individual agency should do with referred cases (responsibility of the agency not the virtual team practitioners)
- quality assure assessment reports
- offer management overview (manage the virtual team)
- support the practitioners forum as appropriate
- liaise with the Children's Multi-Agency Resilience & Safeguarding Board [MARS] about developments of the project/virtual team
- advise and agree on practice developments and training needs

Criteria for referrals to the Project

Referrals will be considered concerning children and young people who:

- have engaged in harmful sexual behaviour resulting in significant harm to another child or young person;
- are assessed as being likely to engage in harmful sexual behaviour that would result in significant harm to themselves or others;
- are aged between 12-18 years for assessment and/or interventions. However, Panel may provide discretionary consultation for younger children.

Referrals will be considered from targeted and specialist agencies that have had a child fitting the above criteria referred to them as part of their responsibilities and duties. Referrals will be submitted to the Panel Chair.

The Panel expects referrals to be accompanied by appropriate assessment reports detailing the requirement for referral to the virtual team.

The Panel will have sole discretion over whether a referral is accepted or not. Where a referral is not accepted, the Panel will provide explanation as to why it is not accepted.

It will be expected that the referring agent/agency will act as key worker for the case with the virtual team acting to support their work with a more specialised assessment of risk and intervention

Membership of the Virtual team

Practitioners from any of the agencies engaged in the Project may be invited to become a member of the virtual team, at the discretion of the HSB Panel.

Such practitioners will be expected to have considerable practice experience in their field, and will undertake the prescribed specialist G-MAP training as part of becoming a full member of the virtual team.

Members of the virtual team will be expected to work with cases allocated by the HSB Panel, carrying out an assessment of harmful sexual behaviour and providing interventions either alone or with other practitioners, according to an agreed plan approved by the HSB Panel.

Assessments and other reports will be written using an agreed standard template, with the Children's MARS logo featuring at the head of any report.

Note: The North Lincs HSB Panel cannot accept responsibility for anyone [outside of the NL HSB Practitioner Group] who trains, then goes on to undertake AIM2 assessments/interventions. This accountability has to rest with the service/agency in which the worker is employed.

A concern is raised re sexual behaviour of a young person. Consultation to take place with Chair/Vice-Chair of the HSB Practitioner Group or person delegated by the HSB Panel.

Does this behaviour fit within the category of significant / potential HSB?

Yes

No

Advice / guidance to be given as appropriate to individual cases.

Refer to HSB Panel

New HSB referral presented to HSB Panel

Does the referral meet the criteria for formal HSB Work?

Yes

No

Panel to make recommendations on a case by case basis.

Panel agrees allocation to HSB Practitioners to undertake AIM2 assessment and/or HSB interventions

HSB Practitioners complete AIM2 Assessment and/or Interventions. Present AIM2 Report to Panel.

Does the AIM2 report indicate further need for HSB intervention work?

Yes

No

Case closed to HSB. Professionals notified accordingly with appropriate stepdown recommendations where applicable.

Panel agrees allocation to HSB Practitioners for HSB Intervention Programme

HSB Intervention work completed – Final Report presented to Panel
HSB Panel sends 'HSB Closure Letter' to professionals advising that no further HSB interventions are required. If Final Report contains recommendations/concerns/issues, these are included in the 'HSB Closure Letter'.