

ANGUS CHILD PROTECTION COMMITTEE



INTERAGENCY PROTOCOL FOR YOUNG PEOPLE (14 – 18 years) WHO PRESENT A RISK TO OTHERS DUE TO CONCERNS OF A SEXUAL NATURE

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1. This inter-agency protocol is agreed by the following agencies:
 - Angus Council Social Work Department;
 - Angus Council Education Department;
 - Angus Council Housing Department
 - Barnardo's Bridge Project; and
 - Tayside Police
2. It is recognised that concerning behaviour of a sexual nature in a young person may come to the attention of any of the member agencies at any time. This protocol is consistent with, but does not supersede, the Angus Interagency Guidelines for Professional Staff issued by the Child Protection Committee. The most common starting points for identifying a young person who presents a sexual risk to others is a complaint or allegation by a victim of inappropriate sexual behaviour in a public or care setting. In most instances Tayside Police and Social Work and Health Children's Services will be the lead agencies carrying out investigations into these types of referral.
3. Where a young person (aged 14 – 18 years) is referred to Social Work and Health Children's Services or Tayside Police as the alleged perpetrator, a joint police/social work child protection investigation will be carried out in accordance with existing child protection procedures outlined in the Angus Child Protection Committee Interagency Guidelines for Professional Staff. The investigation will be recorded on Social Work and Health's Child Protection Investigation Report (C08). The young person may be referred to the Procurator Fiscal and/or to the Reporter to the Children's Hearing depending on the outcome of police enquiries and the young person's age and legal status.
4. Where the young person is **not** an open case to Social Work and Health Children's Services a referral should be made directly to the Youth Justice Team by the investigating Social Work Team Manager for an initial risk assessment within fourteen days of the completion of the Child Protection Investigation Report. An Initial Referral Meeting will be convened by the Team Manager, Youth Justice Team in order to identify the immediate safety plan for the period of initial assessment. The Youth Justice Team will during that period undertake the more detailed, comprehensive AIM2 risk assessment, (a risk management tool that measures and identifies the level of supervision for the young person) to be completed within six weeks of the initial referral meeting.

5. If the young person is already **actively** involved with Social Work and Health, the case responsible social worker or team manager should make a referral to Barnardo's Bridge Project for an initial assessment within fourteen days of the completion of the Child Protection Investigation Report. At this point the Bridge Project will arrange an initial visit to the young person and their family. An Initial Planning Meeting will then be convened by Barnardo's Bridge Project. This will be attended by the young person and their family/carers and all professionals deemed relevant. This meeting will explore the level of worry held by all present and identify areas of strength. An initial safety plan will be agreed at this stage. Outcomes will be set which will identify all areas of work that will be covered by the young person, family/carers and the Bridge Project. The Bridge Project will undertake an AIM 2 assessment and/or a Bridge assessment over a six to twelve week time scale.
6. The Service Manager (Child Protection) will be alerted to the issues pertaining to the relevant young person, will seek further information from the involved social work staff, and present this to the next Joint Assessment Group (JAG). The purpose of the Joint Assessment Group is to:
 - Share information between police and social work to enable the prevention of crime and facilitate risk assessments; and
 - Enable the identification of children (and vulnerable adults) who may be at risk in order to facilitate preventative measures.

The Joint Assessment Group meets on a monthly basis and discusses information received by staff in Angus Council Social Work and Health and Tayside Police indicating that there may be a sex offender or other potentially dangerous offender living in, or about to live in Angus. Information is shared to enable participants to make the necessary checks or further investigations within the context of prevention of crime and public protection.

7. All young people between the ages of 14 and 18 years old who are believed to present actual or possible sexual risk to children will be discussed under a separate heading at the Joint Assessment Group meetings. This will include both new referrals into children's services since the last Joint Assessment Group meeting and open cases where either new incidents indicate risk or where there has been a cumulative pattern of concern. Information about the young person, levels of risk and risk management planning will be shared by the Joint Assessment Group member agencies (Police Sex Offenders Officers; Police Family Protection Unit; Social Work and Health - Criminal Justice Service; Child Protection Service; Learning Disabilities Service; Throughcare and Aftercare Service and Neighbourhood Services - Housing Division).
8. Where appropriate, young people identified at the Joint Assessment Group may be the subject of an individual police case conference.
9. This protocol will interface with the Multi Agency Public Protection Arrangements (MAPPA) through the Joint Assessment Group, which will identify any young people for consideration for MAPPA meetings. It should be noted that the

MAPPA legislation includes only those young people convicted of relevant offences by the court. In the case of urgent necessity, out with the JAG timescales, the Service Manager for Child Protection, or for Criminal Justice Services, will initiate MAPPA proceedings in appropriate cases.

10. Young people identified at the Joint Assessment Group will be reviewed in an ongoing way in that setting until either they are deemed to present no further significant risk or there is no further locus for professional intervention.
11. The Service Manager, Social Work and Health, in whose service sector the young person's case is held will convene a Risk Assessment and Risk Management Meeting four monthly, or on an emergency basis if there is a significant incident or development indicating increased risk. It will be the responsibility of that service manager to invite the relevant staff from the involved agencies to the Risk Assessment and Risk Management Meeting and to request the necessary reports.
12. The purpose of the Risk Assessment and Risk Management Meeting is to ensure that the care plan for the young person takes sufficient account of the potential risk which he or she poses to other children. It will consider the completed risk assessment. In particular the meeting will:
 - Check that required action has been taken to assess the risk and that this is appropriate and up to date;
 - Ensure future management/risk management strategies are in place;
 - Clarify arrangements for liaison/joint work between the different services involved; and
 - Identify any resource issues and how these will be taken forward.
13. Whilst this protocol is primarily about risk management, it is recognised that many young people who present sexually harmful behaviour will have been victims themselves. Risk Assessment and Risk Management Meetings will not replace Looked After Child Meetings and will not review the Care Plan, which is primarily needs orientated. The Chair of the Risk Assessment and Risk Management Meeting will liaise with the appropriate Community Assessment and Review Officer so that the content of that meeting informs the next LAC review and the young person's Care Plan.
14. The Joint Assessment Group will be informed of any significant developments concerning the young person and of any significant changes in the Risk Assessment and Risk Management plan by the involved staff.
15. The Flowchart in Appendix 1 outlines the referral process.

Young People (14-18) who present a risk to others due to concerns of a sexual nature

Appendix 1

