



Multi-agency Care and Risk Management (CaRM) Arrangements for Children and Young People who Present a Serious Risk of Harm to Others

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1 Purpose

This guidance is for all agencies working with children and young people in Edinburgh who present a serious risk of harm to others, with the purpose of identifying appropriate Care and Risk Management (CaRM) strategies to reduce the risk of significant harm occurring.

This guidance applies to children and young people aged 12 – 17 who are alleged to have been involved in:

- Harmful sexual behaviour, and/or
- Serious violence

When considering Risk of Serious Harm (RoSH), harmful sexual behaviour means violent or sexually coercive behaviour which has caused or risks causing harm (whether physical or not) to another person. Serious violence means behaving in a violent or dangerous way which has caused, or risks causing, serious physical harm to another person. Consideration must be given not only to the impact of threat and physical or psychological trauma caused, but also to the level of intent, use of force or coercion and potential as well as actual harm.

This guidance may also be applied in exceptional circumstances (irrespective of the legal status of the incident) when children and young people present a serious risk to others. Such behaviours might include, but are not restricted to, fire raising and stalking. It may also be applied where a pattern of significant escalation of lesser behaviours suggest that an incident of a serious nature may be imminent. Assessment of intent and the potential for harm should be the key measures which influence recourse to formal Care and Risk Management (CaRM) processes.

Work with children and young people who display harmful behaviour must take place within a child protection context. Many children and young people who display such behaviours have complex needs, are highly vulnerable and may have experienced crime and trauma in their own lives. An assessment of their vulnerability as well as the risk of harm they may present to others must be considered. Work with children and young people who display harmful behaviour must consider and prioritise their protection as well as tackling behaviours that can have a negative impact on others. Whilst this can be complex and challenging, it is critical in terms of the wellbeing of the child or young person, the people they have (or may potentially have) harmed and the confidence the community has in relation to the support, welfare and protection of children and young people.

Governance and oversight for CaRM in Edinburgh is the responsibility of the Child Protection Committee with close links to the Offender Management Committee. The requirements which underpin this guidance are listed in Appendix 2.

2 Context

The National Guidance for Child Protection in Scotland (2021)¹ and the Getting it Right for Every Child (GIRFEC)² approach provide a national framework to promote the welfare and safety of

¹ <https://www.gov.scot/publications/national-guidance-child-protection-scotland-2021/>

² <https://www.gov.scot/policies/girfec/>

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children and young people. There are circumstances in which children and young people may present a risk of serious harm to others, these can include harmful sexual or violent behaviour and/or the commission of sexual or violent offences. This guidance provides a template for child centred practice in the risk assessment and management of the critical few children and young people who present a risk of serious harm to others.

The practice outlined in this document is underpinned by the Scottish Government Framework for Risk Assessment, Management and Evaluation (FRAME) with children aged 12 -17: Standards, Guidance and Operational Requirements for risk practice (2021)³, which includes guidance on Care and Risk Management (CaRM). This guidance is rooted in the principles of the United Nations Convention on the Rights of the Child (UNCRC), ensuring that the views of children and young people are listened to, responded to, and influence decisions which affect their lives.

In line with the revised Guidance for Child Protection in Scotland 2021⁴, for the purposes of this CaRM guidance children and young people are defined as those under the age of 18 years. Since the age of criminal responsibility in Scotland is now 12, no child under this age should be subject to the processes described in this guidance. Where concerns exist in relation to the behaviour of a child under 12 (which may include serious harmful behaviour) child protection procedures⁵ should be followed.

Where physical or sexual abuse of a child or young person is alleged to have been carried out by another child or young person, such behaviour should always be treated seriously. Child protection procedures must be followed, and consideration given to initiating an Inter-agency Referral Discussion (IRD), for all involved children and young people, either to protect the victim or to explore concerns about what has caused the child or young person who has caused harm to behave in such a way. An IRD is the start of the formal process of information sharing, assessment, analysis and decision making following reported concerns about abuse or neglect of a child or young person up to the age of 18 years, in relation to familial and non-familial concerns. It may be appropriate for the risks presented by the child or young person responsible to be managed within child protection processes exclusively if they are also at risk of harm.

It is imperative that children and young people who present a risk of serious harm to others have the support and opportunities to grow, develop and realise their potential. This must be aided by proportionate and effective care and risk management strategies which include interventions that minimise the risks presented and reduce the likelihood of further harm.

This guidance is not to be used for children and young people who present a risk of harm to themselves because of their own behaviour such as self-harm or substance use.

3 Definitions

Harmful Sexual Behaviour

The National Society for the Prevention of Cruelty to Children (NSPCC) defines Harmful Sexual Behaviour (HSB) as developmentally inappropriate sexual behaviour which is displayed by children

³ <https://www.gov.scot/publications/framework-risk-assessment-management-evaluation-guidance/pages/2/>

⁴ <https://www.gov.scot/publications/national-guidance-child-protection-scotland-2021/documents/>

⁵ <https://www.edinburgh.gov.uk/downloads/download/13089/child-protection-for-professionals>

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and young people and which may be harmful or abusive (Hackett, 2014). It can be displayed towards younger children, peers, older children or adults and is harmful to the children and young people who display it, as well as the people it is directed towards.

The NSPCC defines Technology Assisted Harmful Sexual Behaviour (TA-HSB) as sexualised behaviour which children or young people engage in using the internet or technology such as mobile phones. As with 'offline' HSB, TA-HSB encompasses a range of behaviours including:

- Viewing pornography (including extreme pornography or viewing indecent images of children)
- Sexting (Hollis and Belton, 2017)

Violence

Violence is a broad term that has proven difficult to define precisely with distinctions made between various types of violence – youth violence, gang violence, domestic violence, stalking and knife crime are some examples.

The World Health Organisation (WHO) defines violence as “the intentional use of physical force or power, threatened or actual, against oneself, another person, or against a group or community, that results in or has a high likelihood of resulting in injury, death, psychological harm, maldevelopment or deprivation”. Key elements to be considered when assessing the impact of violence include the level of intent, the use of coercion or force and the potential for harm to the person, whether this is realised or not.

4 Information Sharing

Sharing information between professionals is a core component of effective risk assessment and risk management. All agencies must be guided by the imperatives of community safety, public protection and the welfare of the child or young person in deciding what information is relevant and proportionate to share.

The underpinning legislation and guidance that informs information sharing in this context includes:

- Antisocial Behaviour (Scotland) Act 2004
- Children (Scotland) Act 1995
- Children and Young People (Scotland) Act 2014
- Police Fire and Reform (Scotland) Act 2012
- Criminal Justice (Scotland) Act 2016
- General Data Protection Regulation 2018
- Data Protection Act 2018
- Human Rights Act 1998
- Getting it Right for Every Child Guidance

When taken together, these laws and guidance mean that it will be permissible to share relevant personal data **when it is necessary** to do so in certain circumstances. Practitioners must comply with data protection legislation by ensuring that they have a lawful basis to share information, consideration is given to informing the data subject about the sharing and appropriate records are kept around what information is shared and why.

If practitioners are unclear about what information can or should be shared in certain circumstances, they should seek advice from their manager or information governance colleagues as required.

Where personal data is likely to be shared routinely between organisations for the same purpose, it is advisable to document the purpose and process for sharing in an Information Sharing Agreement.

Complying with Data Protection Law

Data protection legislation provides a number of lawful grounds upon which relevant personal data can be shared, and each organisation should identify what is appropriate to them in the circumstances.

In the context of this procedure, personal data will likely be required to be shared to manage risk in child or adult protection scenarios, missing person reports, or to tackle serious offending. In such cases, the following lawful basis (also known as conditions of processing) are likely to be relevant:

- Sharing is necessary for the performance of a task carried out in the public interest or in the exercise of official authority vested in the controller.

This is also known as processing under an organisation's "public task". This will likely apply, for example, when the council finds it necessary to share information in the circumstances in order to deliver effective social work services.

- Sharing is necessary to protect the vital interests of the data subject or another person.

This is likely to be relevant when information requires to be shared as part of a missing person enquiry or in the context of child or adult protection.

- Sharing is necessary for the prevention or detection of crime, or the apprehension and prosecution of offenders.

A person's data protection rights are restricted where it is necessary to share information to prevent and detect crime. When organisations do this, they will likely be operating under Schedule 2, Part 1, (2) of the Data Protection Act 2018.

Again, if practitioners are unsure about whether they have a lawful basis to enable them to share information, they should seek advice from their manager or Information Governance.

Informing the Data Subject

When sharing personal data about individuals, organisations should consider whether the data subjects will have a reasonable expectation that their information will be shared in the circumstances, and whether steps should be taken to tell them.

Telling someone that their information will be shared is not the same as asking their permission. Practitioners will not be seeking consent to share data in circumstances where there are significant risks which require CaRM procedures to be followed, however, informing the data subject ensures that they are aware of what is happening and can object if they wish.

Organisations should consider how best to inform data subjects that information may be shared for the purpose of risk management and in accordance with this procedure. It will not always be practical to inform the data subject at the time of sharing particularly, for example, if organisations

are responding to an ongoing incident. However, general information about the procedures can be provided in general privacy notices, and when practitioners are engaging with data subjects directly to ensure that they are aware that organisations are working together in this way. Where it has not been possible to tell the data subject in advance of information being shared, consideration should be given to informing them afterwards.

There will also be occasions when it is counter-productive and not necessary to inform the data subject. For example, organisations are not required to tell an individual that they have been asked to share personal data with the police in order for a crime to be investigated. Doing so would be likely to prejudice the police's ability to detect and prosecute offences which is why individual rights are restricted under Schedule 2, Part 1 (2) of the Data Protection Act 2018.

Keeping a Record

When decisions are taken about sharing, or not sharing, personal data about an individual, practitioners should record what they have done in accordance with their organisation's record keeping practices. These records should then be retained in accordance with the organisation's retention and disposal procedures. Keeping a record ensures that decisions can be revisited and understood if they are challenged either by the data subject or the regulator.

Complying with Human Rights Law

The Human Rights Act 1998, Schedule 1, Part 1, Article 8 states:

1. Everyone has the right to respect for private and family life, home and correspondence.
2. There shall be no interference by a public authority with the exercise of this right except such as is in accordance with the law and is necessary in a democratic society in the interests of national security, public safety or the economic wellbeing of the country, for the prevention of disorder or crime, for the protection of health or morals, or for the protection of the rights and freedoms of others.

In a similar way as complying with data protection legislation, public authorities must be satisfied that the sharing is permissible under human rights legislation because it is necessary in the pursuance of one of the elements noted in point 2. In the context of this procedure, sharing is likely to be necessary in the interests of public safety, the prevention of disorder or crime, the protection of health or morals, or the protection of the rights and freedoms of others. However, as above organisations should document their compliance with human rights in the same way as with data protection rights.

5 The Care and Risk Management (CaRM) Process – Actions for Professionals

Before Proceeding to the Referral

Referral to CaRM may be initiated by a range of professionals and agencies including police, social work, lead professional, named person, health, MAPPA co-ordinators, Children's Reporter and third sector agencies. Following the definitions outlined in this procedure, a referral should be considered where there are concerns about a child or young person's harmful behaviour, regardless of the legal context. The principles of GIRFEC must be followed therefore where there is a lead professional concerns regarding a child or young person's behaviour must be raised with them in the first

instance. Where concerns are identified via a child or young person's planning meeting or other multi-agency forum the lead professional or chair must initiate a referral as soon as possible.

Prior to making a CaRM referral professionals from education should follow the Managing and Reducing Risk Procedure for education⁶.

Referral Process and Timescales

When a practitioner is of the view that the behaviour of a child or young person meets the necessary threshold for CaRM, a referral discussion should take place between the practitioner and duty Team Leader at the Young People's Service (YPS). YPS has responsibility for the overview of CaRM processes. Good practice would be for this discussion to take place within one working day of the behaviour being highlighted and after no more than three working days.

The purpose of the referral discussion is to clarify the nature of the concerns. This will assist the duty Team Leader to assess whether a CaRM meeting is necessary or whether another forum, such as a Child or Young Person's Planning Meeting may meet the presenting needs and risks. Listed below are immediate and interim tasks which should be considered.

A record of the outcome of this referral discussion must be recorded on swift by the YPS duty Team Leader noting:

- Brief summary of the identified risks, needs and protective factors;
- Date of CaRM meeting (if required);
- Interim tasks, responsibilities and timescales.

Immediate tasks include:

- Consideration of whether an IRD needs to be initiated.
- Establish the views of the child or young person and their parent(s) or carer(s);
- Review of settings where risk might be present and agree interim strategies such as living arrangements and education including relevant out of school activities such as football, dance, swimming, employment or training placements etc;
- Measures in place to mediate a community response, including whether a marker is required on an address and any community impact assessment by Police Scotland;
- Agreement of communication strategy to manage any media attention;
- Agreement of strategies to manage a child or young person's increased risk to self;
- Record CaRM hazard on swift (if progressing to CaRM);
- Completion of a Significant Occurrence Notification (SON) form⁷ (where relevant) for senior managers within City of Edinburgh Council. Consideration must also be given to whether the Care Inspectorate needs to be notified, for example where a child or young person subject to a Community Payback Order has resulted in death or serious harm.

⁶ <https://orb.edinburgh.gov.uk/downloads/download/11683/managing-and-reducing-risk>

⁷ <https://orb.edinburgh.gov.uk/directory-record/254855/significant-occurrence-notification-procedure-for-serious-incidents>

Interim tasks may include:

- Development of safety plans in relation to settings (e.g. home, school etc) outlining interim care and risk management measures to be put in place. This needs to encompass a contextual safeguarding approach⁸;
- The need for a child or young person to be referred to the Children's Reporter;
- The need for a child or young person to be referred to specialist services (e.g. for completion of relevant risk assessments);
- The allocation of the child or young person to a lead professional, if required.

Outcomes

The outcome of a referral discussion may be that no further action is required or that current service provision via the child or young person's planning process is sufficient to manage the risks. Reasons for this decision must be recorded by the duty Team Leader, Young People's Service, on swift.

6 Decision to Convene a CaRM Meeting and Timescales

The initial CaRM meeting should take place within 21 calendar days of the referral discussion. A clear rationale for any meeting held after this timescale must be recorded in the note of the referral discussion recorded on swift.

If a CaRM meeting is necessary, the referrer must complete a referral form including relevant supplementary information pertinent to the referral. While recognising timescales may preclude comprehensive information gathering, the referral should encompass:

- An up to date Assessment of Need and Risk, Child's Plan or equivalent;
- Copies of any completed risk assessments, if not summarised within the Assessment of Need and Risk; and,
- Copies of any specialist assessments or assessments from other practitioners/agencies e.g. Child and Adolescent Mental Health Service (CAMHS) or Education.

In most cases children and young people who meet the threshold for a CaRM meeting will already have supports in place and a child or young person's plan which is monitored and reviewed at Child or Young Person's Planning meetings. Only in exceptional circumstances will it be appropriate to hold a CaRM meeting without an assessment.

The child or young person and parent(s)/carer(s) must be informed that a referral has been made and that a CaRM meeting is taking place. The duty Team Leader, Young People's Service, must consider with key partner agencies whether it is appropriate to invite the child or young person and their parent(s)/carer(s) to the meeting. Although participation of the child or young person and/or parents(s)/carer(s) can assist with information sharing, as well as sharing tasks in relation to risk management, this must be weighed against the stress and impact the meeting may have on

⁸ <https://www.iriss.org.uk/resources/insights/child-protection-21st-century-role-contextual-safeguarding>
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participants. Whether the child or young person or parent(s)/carer(s) are present or not, their views must be sought, shared and considered throughout the CaRM process.

In some situations, restricted access information will need to be shared at a CaRM meeting. This includes information that by its nature cannot be shared freely with the child or young person and/or parent(s)/carer(s). Such information may not be shared with any other person without the explicit permission of the provider. Restricted information includes:

- Sub-judice information that forms part of legal proceedings and which could compromise those proceedings;
- Information from a third party that could identify them if shared;
- Information about an individual that may not be known to others, even close family members, such as medical history and intelligence reports; and
- Information that, if shared, could place an individual(s) at risk.

If a child or young person is subject to ongoing Police investigation this should not delay convening a CaRM meeting. Assessment and intervention processes will need to be proportionate to the legal status of the case, balancing the child or young person's rights against identified issues in relation to public safety.

7 CaRM Meeting (Initial)

Whilst the standing membership of a CaRM meeting will vary according to circumstances, it is anticipated that the following agencies (in addition to the referrer, YPS CaRM chair and minute-taker) will be represented:

- Social Work (YPS, Practice Team, Children with disability, Residential, Secure Services)
- Police
- Health (e.g. CAMHS)
- Education

Consideration may also be given to the inclusion of:

- The child or young person who is the subject of the referral;
- The parent(s)/carer(s) of the referred child or young person;
- Children's Rights Officer or Advocacy Service;
- Housing;
- Family and Household Support (to consider community safety issues);
- Skills Development Scotland (SDS)
- Court, Bail and Diversion Service (if child or young person subject to supervised bail)
- Psychological Services;
- Multi Agency Public Protection Arrangements (MAPPA) representative;
- Third Sector Representatives, such as Barnardo's, Stop It Now!, Action for Children etc.

The purpose of a CaRM meeting is to allow representatives to share information, jointly assess that information (including the risks) and determine whether there is a likelihood of significant harm which needs to be addressed via a multi-agency CaRM plan.

At the outset, the CaRM meeting must consider if the child or young person is subject to any form of statutory order(s) e.g. Interim or Compulsory Supervision Order (CSO) and any related conditions, Community Payback Order (CPO) and any related conditions, bail conditions etc. Consideration must be given to the implications of related legal obligations and any open IRD.

In making decisions about the appropriateness of a child or young person's living arrangements, the CaRM meeting must consider:

- Strengths and protective factors;
- The nature and level of risk to others (particularly other children, young people and vulnerable adults) in the home environment;
- The impact of family dynamics in either sustaining or preventing further behaviour of a harmful nature;
- The nature and level of risk to others in the community
- The relationship between the referred child or young person and the victim(s);
- The views of the referred child or young person;
- The potential negative impact of a sudden change to a child or young person's living arrangements.

CaRM meeting attendees must consider the home circumstances, educational arrangements and community integration of the child or young person to identify any ongoing and potential protection issues. Specifically, the CaRM meeting should consider:

- What further action (if any) needs to be taken to keep the referred child or young person safe?
- What further action (if any) needs to be taken to keep the referred child or young person's family member(s)/carer(s) safe?
- What further action (if any) needs to be taken to keep other members of the community safe e.g. peers, teaching staff, victim(s), care staff etc?

In making decisions about the appropriateness of a child or young person's education, employment or training environment the CaRM meeting must consider:

- The safety of the child or young person's victim(s) if attending the same school, college or work environment;
- The safety of other students/colleagues both in the referred child or young person's classes/workplace and in the wider educational, training or employment setting;
- The safety of staff members at the institution/workplace;
- The potential risk to the referred child or young person of retribution in relation to the harmful behaviour;
- The safety of the referred child or young person when travelling to and from the institution/workplace;
- The nature of supervision and monitoring required to safely manage any identified risks;
- The internal disciplinary responses of the institution/workplace to the harmful behaviour e.g. exclusion;
- Strengths and protective factors.

If a full and detailed risk assessment has not been completed in advance of a CaRM meeting and is required, the chair must identify an appropriate agency to complete the necessary risk assessments.

It is the responsibility of the CaRM chair to ensure that any agency charged with completion of risk assessments is appropriately trained to do so.

In recommending the completion of risk assessments, the CaRM chair must be clear on those which are required, taking into consideration the age of the child or young person, behaviour, circumstances and capacity. The selection of risk assessments should be guided by the Risk Management Authority (RMA) Risk Assessment Tool Evaluation Directory (RATED)⁹.

If a risk assessment has been completed in advance of the CaRM meeting, the content of the assessment should be scrutinised by attendees and a decision made regarding whether any further information is required. *Managing risk of harm in the community: A guide for managers and practitioner* by CYCJ (2020)¹⁰ provides useful examples of risk assessment, formulation, scenario planning and victim safety planning. As a minimum, risk assessments must address the likelihood, patterns, nature, and seriousness of offending or harmful behaviour and implications for future risk. Ideally a risk assessment will provide a formulation of risk that offers an understanding of the interaction and respective role of risk and protective factors and will help identify triggers and early warning signs which may assist in recognising and responding to imminence of future harmful behaviour. Formulation is hypothetical and not predictive; any limitations and reasons must be recorded such as unavailable information. The risk assessment, informed by appropriate risk assessment tools, should assist robust scenario planning based on knowledge of how, why, where and when harmful behaviour has occurred in the past and the way it may present in the future. Consideration should also be given to improvement scenarios.

8 CaRM Plans

Risk management strategies should build on the strengths of the child or young person and promote pro-actively development opportunities that can be realised safely.

The CaRM chair must ensure that consideration is given to the following risk management strategies:

Supervision aims to decrease the likelihood of offending or harmful behaviour by restricting the child or young person's freedom but also provides an opportunity to build on strengths, create positive opportunities and encourage positive and meaningful relationships. This section should cover activities and associations that are restricted or can only take place with supervision and support. The level of supervision needs to be proportionate to the risks and what is required to prevent harm.

Monitoring requires regular assessment and aims to look for factors indicating changes in risk over time. These may be factors indicating imminence of offending or harmful behaviour, a change in the type of risk posed, or a decrease in risk or change in attitude. This section should cover: what is being monitored; why is it being monitored; how it will be monitored; who will monitor it; when it will be monitored; where it will be monitored as well as how and when changes will be communicated with the lead professional who has responsibility for the Child or Young Person's Plan. This should link to the contingency plan (see below).

⁹ <https://www.rma.scot/research/rated/>

¹⁰ <https://www.cycj.org.uk/wp-content/uploads/2020/06/Section-37b-final-paper.pdf>

Intervention covers all aspects of the Child or Young Person's Plan that are designed to reduce risk over time. This may cover offence related or offence specific work, family work or other therapeutic interventions. Interventions need to be targeted and measurable in terms of impact over time although it should be noted that it is increasingly recognised that programmes of work designed to focus exclusively on offending behaviours in children and young people are limited in value and should be supported by enhancing broader life skills, addressing social isolation, increasing access to appropriate opportunities in education, training and employment, addressing family problems and improving relationships etc.

Public Interest Disclosure involves sharing information with individuals, agencies or organisations to help them manage risk more effectively. This could involve sharing information with a college or employer, or with adults that are in the child or young person's life. Information sharing of this nature needs to be proportionate and justified in terms of safeguarding the protection of children and vulnerable individuals and there needs to be evidence of imminent risk. In all situations where this is deemed necessary, the justification for disclosure needs to be recorded in the CaRM minutes and a request submitted to the Police for a Public Interest Disclosure. Thought should be given to whether self-disclosure may be a more effective strategy. The child or young person and parents(s)/carer(s) should be informed of the decision of a request for a Public Interest Disclosure.

Victim Safety Planning aims to reduce the likelihood and impact of harm to known previous and future potential victims; this may be specific individuals or particular at-risk groups. Consideration should be given to what can improve safety and maximise resilience. When developing safety plans it will not always be possible or appropriate to do this with victims. Risk formulation, scenario and contingency planning will help inform victim safety plans.

Contingency Planning gives prominence to key factors which may indicate that risk of violence and/or harmful behaviour is escalating or imminent. It involves identifying the actions required to respond to key risks identified in scenario planning to prevent harm from occurring or reduce its impact. There will also be less concerning factors indicating initial instability, disinhibition or movement towards behaviour which will require an appropriate, but less urgent response. Those involved in the case, including where appropriate the child or young person, parent(s)/carer(s) and potential victim(s), should know what the key factors are to look out for and what the response to them should be. There should be a clear plan as to what action should be taken, by whom and how quickly on their identification. Emergency contacts should be identified for office hours and out of hours.

Where a child or young person already has a Child/Young Person's Plan in place, it will be the responsibility of the lead professional to update the Plan to reflect the care and risk management strategies agreed at the CaRM meeting. When a Plan has not yet been drafted or is in the process of being drafted, it will be the responsibility of the lead professional to incorporate and implement the strategies agreed.

9 Tier of Risk

In drawing the CaRM meeting to a conclusion, the chair should seek to establish attendee's views as to the tier of risk practice required to manage effectively the risks identified. Agreement should be sought on the risk management classification:

- Aware;
- Attentive; or,
- Active and Alert.

If the view of the CaRM meeting is that being **Aware** of the child or young person's behaviour is a defensible position to take in relation to ongoing risk management, a further scheduled CaRM meeting will not be required. In such cases, the named person or the lead professional will be required to address any further issues in relation to the child or young person's behaviour.

If the view of the CaRM meeting is that an **Attentive** response is required to support ongoing risk management, the chair will recommend the establishment of a CaRM core group. For children and young people who require this level of response a lead professional should already be in place and, if not, one identified. It will be the responsibility of the lead professional and the other members of the CaRM meeting to identify membership of the core group and to stipulate how frequently meetings should take place. The participation of the child or young person and their parent(s)/carer(s) is strongly encouraged. A date for the first core group should be agreed at the initial CaRM meeting and a review CaRM meeting arranged to take place within six months.

If the view of the CaRM meeting is that an **Active and Alert** response is required ongoing risk management and safety planning, the chair will make arrangement for a further CaRM meeting to review the child or young person's plan at three monthly intervals. In tandem with this arrangement, a CaRM core group should also be established to meet as regularly as appropriate in the intervening period between CaRM meetings. Classification as active and alert is likely to occur only in the "critical few" cases.

It is intended that decision making at a CaRM meeting will be consensual and, following thorough scrutiny of the available information, practitioners will reach a mutual agreement. However, where agreement cannot be reached, dissenting views must be recorded. In such cases it will be the responsibility of the chair to take a final decision about the most appropriate risk management classification and arrangements. Cases of this nature should be highlighted to the Team Manager of YPS and Senior Manager.

10 Minute of the CaRM Meeting

A minute of every CaRM meeting must be taken which captures key discussion points, decisions and actions, see Appendix 1 for the template. If the child or young person and their parent(s)/carer(s) are not present at the meeting, reasons for this must be recorded. The minute must be approved by the chair and circulated to all attendees within 15 calendar days. A note of any key actions must be recorded on swift by the chair on the same day, for the lead professionals to disseminate to those relevant, this will be crucial where immediate actions have been identified at the CaRM meeting. These actions will also be incorporated into the minute.

CaRM meeting minutes must be filed safely and securely in "Restricted Access" or each agency's equivalent and not shared with others without consent of the chair.

11 CaRM Review Meeting

The role of the chair at any CaRM review meeting will be to direct attendee's:

- To consider all the wellbeing indicators for the child or young person, including the risks they may pose to themselves and/or others;
- To consider any further offences, harmful behaviour or incidents of concern involving the child or young person in the intervening period since the previous CaRM meeting;
- To consider whether any further assessment is required to inform risk management and safety planning;
- To review the care and risk management and safety planning elements of the Child/Young Persons Plan to identify what progress has been made;
- To consider whether modifications or additions to the existing risk management and safety plan detailed in the Child/Young Person's Plan are necessary and to ensure the lead professional records any such changes;
- To evaluate progress in relation to risk reduction; and,
- To consider the views of the child or young person and their parent(s)/carer(s) and to assess their level of co-operation with the care, risk management and safety plan.

The final task of the chair at any CaRM review meeting will be to reassess the risk management classification to ensure clarity on the level of response required and whether further CaRM meetings are required. Where it is identified that it would be beneficial for there to be consistency of chair the reasons for this should be recorded in the minute and arrangements made to facilitate this.

12 CaRM Core Groups

The functions of a CaRM core group include:

- To ensure that the child or young person and parent(s)/carer(s) are active participants in the process of care and risk management, safety planning and risk reduction;
- To ensure ongoing assessment of the needs of, and risks to, the child or young person subject to the CaRM process;
- Implementing, monitoring and reviewing care and risk management and safety plans so that the focus remains on improving outcomes for the child or young person. This will include evaluating the impact of work done and/or changes within the family in order to decide whether risks have increased or decreased;
- Activating contingency plans promptly when progress is not made, or circumstances deteriorate;
- Reporting to CaRM review meetings on progress; and,
- Referring any significant changes to care and risk management and safety plans, including engagement difficulties experienced by the child, young person, family and/or professionals to the chair of the CaRM meetings.

It may be the case that the child or young person is already involved in another review process (e.g. Child Protection Case Conferences (CPCC), Looked After and Accommodated (LACC) reviews etc). To

avoid unnecessary duplication the lead professional may wish to consider scheduling CaRM core group meetings to coincide with other relevant reviews.

13 Links to Multi Agency Public Protection Arrangements (MAPPA)

When risk management strategies are in place for a child or young person charged but not yet convicted of an offence of a serious nature, it is possible that during the CaRM process their legal status will change. Due to a conviction in the criminal justice system, a child or young person under the age of 18 may become subject to Multi Agency Public Protection Arrangements (MAPPA). In these instances, the CaRM chair or Team Leader for the lead professional should make contact with the MAPPA co-ordinator to agree a plan for transition from CaRM to MAPPA.

14 Exit from CaRM

In accordance with the principle of minimum intervention, every effort should be made to ensure that a child or young person is retained within CaRM processes for no longer than is necessary. Preparation for a child or young person's exit from the CaRM process, as with any transition, should be calibrated and paced to meet identified needs and risks.

Measuring progress regarding a child or young person's engagement with care and risk management safety plans can be challenging. Progress should be assessed referring to the four phases outlined below:

Phase One – Risk reduction is largely via the systems and responsibility is owned by the systems around the child and not by the child or young person themselves. 'Systems' here are defined as the significant people in the child or young person's life who can have an impact on risk e.g. parents, carers, teachers, peers etc;

Phase Two – The child or young person is engaging in specific work on their harmful behaviour to allow a more meaningful discussion to take place about risk. In this phase individual care and risk management and safety plans are introduced and rehearsed by the child or young person and the systems. The systems move from a learning stage to proactively working with the child or young person to meet their needs and assist them in skills development;

Phase Three – Risk is now being reduced by the ongoing work with the child or young person. Responsibility for managing the risk is now a shared ownership between the child or young person and the systems; and,

Phase Four – In this phase it is important to use the identified individual goals to determine if a child or young person can take responsibility for managing their risk. It would be expected that the achievement of these goals (skills and insights) would be evidenced in different settings. Where this is the case, risk is now reduced, and the child or young person has the ability and increased awareness to manage their own risk here as developmentally appropriate.

The wellbeing indicators (safe, healthy, achieving, nurtured, active, respectful, responsible, included) which underpin the GIRFEC practice model must be considered to support a holistic assessment of a

child or young person's progress. The indicators need to be at the core of any Child/Young Person's Plan and related care and risk management and safety plans. A further consideration will be the extent to which dynamic risk factors have reduced over time with an associated increase in protective factors and attainment of any other desired outcomes.

The overriding objective in managing a child or young person's transition out of the CaRM process to an environment with reduced supervision and monitoring must be to ensure that there is continuity in the provision of support, advice and guidance to the child or young person and their parent(s)/carer(s).

It is recognised that in some instances a child or young person's exit from the CaRM process will not be triggered by progress made but simply because of the passage of time, often the culmination of an extended period of engagement difficulties. In such instances, appropriate arrangements and continuity of service provision will be necessary owing to the ongoing unacceptable level of assessed risk.

Swift hazards reflecting the child or young person being supported via CaRM processes must be updated with an end date. If risks remain, which require a hazard to be recorded, an alternative category should be used.

15 Transfer of Children and Young People Subject to CaRM Arrangements

It is not uncommon for children or young people who present a risk of serious harm to lead relatively transient lives. This may involve frequent changes of address within one local authority area, movement across different local authority boundaries or movement out of Scotland to other jurisdictions.

When a child or young person who is being actively supported through CaRM processes moves to a different local authority within Scotland, the lead professional must notify the CaRM chair who will contact their counterpart in the receiving local authority. The purpose of this is to advise of the child or young person living in the area and of relevant information to support effective care and risk management, safety planning and public protection.

If it appears to be the case that the child or young person intends to reside in the receiving local authority on a permanent basis and this is a viable move, arrangements should be made for responsibility for CaRM meetings to transfer. This will be managed through direct liaison between both CaRM chairs, including the lead professional, the exchange of relevant information including the Child/Young Person's Plan, care and risk management and safety plan and any relevant risk assessments. If appropriate, the CaRM chair and lead professional from the originating local authority may attend the first CaRM meeting to be held in the receiving local authority.

Formal case transfers are the responsibility of the lead professional and their Team Leader and the City of Edinburgh Council Case transfer policy and procedure must be followed. Where necessary CaRM chairs will support case transfer negotiations to ensure seamless transitions which meet the needs of the child or young person as well as managing any potential risks to others.

When a CaRM chair becomes aware of the planned or actual move of a child or young person involved in CaRM processes to a location outwith Scotland, all reasonable efforts must be made, in partnership with the lead professional, to alert the appropriate authorities in the relevant area.

Should a child or young person's living arrangements change due to the decision of a Children's Hearing (e.g. imposition of an out of authority secure or residential placement) or the Court (e.g. remand or custodial sentence), this change will not automatically trigger the CaRM processes to transfer or end. The implications of any change in care arrangements and/or legal status should be considered at a CaRM meeting with the expectation that the CaRM process remains active for as long as is deemed necessary to manage the risks presented by the child or young person. The originating local authority will retain responsibility for CaRM whilst the child or young person is in an out of authority placement, but certain functions may, through negotiation, be devolved to the host local authority. CaRM processes are likely to have value at the point of a child or young person's reintegration to the local community following an extended period accommodated outwith the area.

16 Relevant Legislation and Guidance

Legislation

Age of Criminal Responsibility (Scotland) Act 2019

Antisocial Behaviour (Scotland) Act 2004

Children (Scotland) Act 1995

Children's Hearings (Scotland) Act 2011

Children and Young People (Scotland) Act 2014

Criminal Justice (Scotland) Act 2016

Criminal Procedure (Scotland) Act 1995

Management of Offenders (Scotland) Act 2019

Police Fire and Reform (Scotland) act 2012

Rehabilitation of Offenders Act 1974

General Data Protection Regulation 2018

Equality Act 2010

Data Protection Act 2018

Human Rights Act 1998

Guidance & Publications

[National Guidance for Child Protection in Scotland, September 2021](#)

[Framework for Risk Assessment Management and Evaluation \(FRAME\) with children aged 12-17 Standards, Guidance and Operational Requirements for risk practice, June 2021](#)

[Getting It Right for Every Child: Policy Update, 2017](#)

[A Guide to Youth Justice in Scotland: Policy, Practice and Legislation, June 2021](#)

[Standards for those working with children in conflict with the law, June 2021](#)

[Multi-Agency Public Protection Arrangements \(MAPPA\): national guidance 2016](#)

[Risk Management Authority \(RMA\) - Risk Assessment Tools Evaluation Directory \(RATED\)](#)

[Managing risk of harm in the community: A guide for practitioners and managers working with children, June 2020](#)

[Guidance on the Use of Movement Restriction Conditions \(MRC's\) in the Children's Hearings System: Revised Guidance October 2014](#)

[The Child's Journey: A Guide to the Scottish Justice System](#)

Associated City of Edinburgh Council Protocols

[Managing and Reducing Risk: Education Procedure](#)

[Criminal Justice: Assessment and Management of Risk](#)

Appendix 1 Care and Risk Management (CaRM) Minute & Plan

Care and Risk Management (CaRM) Minute & Plan	
Date of CaRM Meeting/Review:	
Child/Young Person's Name:	
Date of Birth:	
Swift No:	
Address:	
Legal Status:	
Attendees (if the child/young person or parent/carers is not in attendance record reasons for this)	Apologies
What are we worried about and what is the risk? (Formulation – what factors affect the child/young person and the relevance to the harmful behaviours displayed. Be specific about the type of harm there are concerns about, who is at risk, when and why. What is driving the behaviour, what is maintaining it and what situations may trigger the behaviours.)	

What is working well? (Strengths and protective factors)	What needs to happen? (Supervision, monitoring, intervention, victim safety plan)
Child/Young Person's View of the concerns and what will keep them safe	Parent/carers view of the concerns and what will help keep them safe
Tier of Risk & Public Interest Disclosure	
<p>Agreed Tier of Risk</p> <ul style="list-style-type: none"> <input type="checkbox"/> Aware – further CaRM not required <input type="checkbox"/> Attentive – CaRM Core Group established. CaRM review within 6 months. <input type="checkbox"/> Active and Alert – CaRM Core Group established and CaRM review within 3 months. <p>If appropriate date of CaRM review:</p> <p>Is a request for Public Interest Disclosure required (if yes, detail reasons, person responsible and timescales):</p>	

Contingency Planning: Consider what the signs will be that the preventative planning is starting to break down, what are the early warning signs? what actions will be taken? (e.g. who is first to call? what requires immediate action? what should be discussed at the next meeting?).

Immediacy/degree of alert	Behaviours/events to monitor and Early warning signs	Agreed actions	Responsible person(s) and timescales
Be Aware			
Be prepared			
Take immediate action			
Other Actions (referrals to other services, completion of assessments, updating child/young person's plan etc)			
Action	Person Responsible	Timescale	

Key Contacts			
Name	Role	Organisation	Contacts Numbers (including out of hours, where appropriate)

Appendix 2 CaRM Requirements

- Requirement 1 - Referrals to CaRM must be made within one day of the behaviour becoming known.
- Requirement 2 - The initial CaRM meeting should take place as soon as possible and no later than 21 calendar days after the referral discussion.
- Requirement 3 - The CaRM chair must identify an appropriate practitioner to complete any required risk assessments.
- Requirement 4 - Where a risk assessment has been completed in advance this should be provided five working days in advance to the chair.
- Requirement 5 - The lead professional is responsible for updating the child Child/Young Person's Plan to incorporate the CaRM strategies.
- Requirement 6 - The CaRM chair will establish attendees' views as to whether the child requires ongoing care and risk management through the CaRM process or not and the reasons why.
- Requirement 7 - Decisions of CaRM meeting should be reached by consensus, where this is not, it should be recorded and the chair will make the final decision whether the CaRM process is required or not.
- Requirement 8 - A minute approved by the chair of the CaRM meeting will be circulated to attendees within 15 calendar days.
- Requirement 9 - The lead professional must communicate key decisions of the CaRM meeting to the child or young person and their parent(s)/carer the same day.