

Document Type:	Standard Operating Procedure	
Reference Number : 1985	Version Number: 5	Next Review Date: 3 August 2023
Title:	Management of Child at Risk Alerts (CARA)	
Document Author:	Named Nurse Safeguarding Children Safeguarding Nurse Practitioner	
Applicability:	As defined in document	

This policy is to be considered in conjunction with the South West Child Protection procedures: www.swcpp.org.uk

1. Purpose of this document

This standard operating procedure has been developed to inform Torbay and South Devon NHS Foundation Trust staff on the management of Police CARA Reports. These reports are routinely shared to:

- Torbay Specialist Community Public Health Nursing Teams
- Torbay CAMHS
- Substance Misuse
- Acute health services,

to facilitate support and guidance to victims, signposting them to the appropriate agencies. Staff who receive the reports are expected to manage this information in accordance with this policy / guidance.

For the purpose of this standard operating procedure:

- **Central Safeguarding Team** will be referred to as CST.
- **Specialist Community Public Health Nurse** teams will be referred to as SCPHN team
- **Health Visitors** and **School Nurses**, may be referred to as HV and SN respectively.
- **Child and Adolescent Mental Health Service** will be referred to as CAMHS.

Police Reports can be defined as:

- **CARA** (child at risk alert)
- **ViST** extract (vulnerability screening tool)
- **UNIFI** (police data base)

Police CARA notifications will be shared with appropriate partner agencies in accordance with Data Protection and GDPR policies and Guidelines. Professionals are to be aware of support services available for management of their emotional well-being.

2. Scope of this SOP

All Torbay and South Devon NHS Foundation Trust staff.

3. Competencies required

- All staff employed by the trust will have been trained to the appropriate level of Child Protection for their role.
- Torbay and South Devon NHS Foundation Trust staff will be aware of the South West Child Protection Procedures– <https://www.proceduresonline.com/swcpp/>
- Torbay and South Devon NHS Foundation Trust staff will know how to access support and supervision from the Safeguarding Children Team and be familiar with the Safeguarding page via the safeguarding lozenge on the Trust's Icon.
- All staff employed by the Trust are to have awareness of support services locally and nationally.

4. Procedure / Steps: Management of Child At Risk Alert Police Reports by Community Health Teams

- The CST are notified of all incidents that are attended by a police officer where there are children present or in the household.
- A report is then generated by the CST, and sent by secure email to the Trust Safeguarding Children Team for dissemination with consent.
- CARA notifications are graded as Green, Amber or Red.
- CARA notifications are additionally shared with partner agencies and actioned as per their organisation process.
- CARA reports without consent can be shared / disseminated to appropriate partners as consent has been overridden by the police.
- The TSDFT childrens safeguarding team receive the CARA notification which will be reviewed by Safeguarding Nurse Practitioners who then disseminate to relevant staff.
- For SCPHN 0-19 service information will be uploaded to the child's electronic PARIS records and electronic notification sent to appropriate team / Team Lead for attention.
- For other relevant health practitioners working with the child and/or adult of concern, information will be shared by NHS secure email.
- Once in receipt of CARA notifications, practitioners should consider the information contained and refer to the relevant Pathway – Management of CARA notifications (Appendix 1,2,3 or 4) to support their decision making.

-
- Responding to low level incidents can prevent escalation and should be actioned where possible and appropriate.
 - If necessary, practitioners should seek advice from the Safeguarding Children's Team 01803 208659 or safeguardingchildren.tct@nhs.net

References:

South West Child Protection Procedures
www.swcpp.org.uk

Appendices

[Appendix 1 - Health Visitor Pathway – Management of CARA notifications](#)

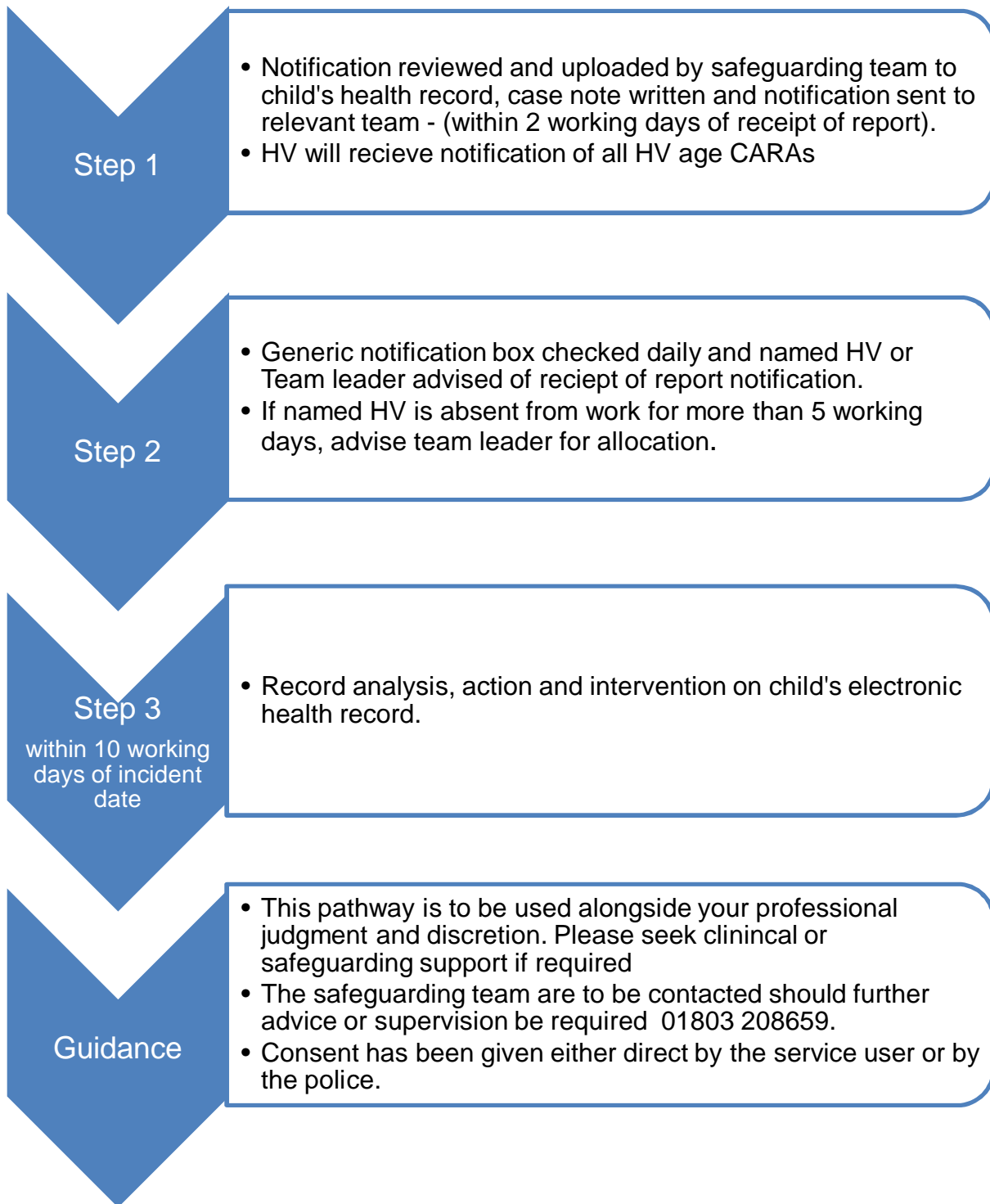
[Appendix 2 - School Nurse Pathway – Management of Police Reports](#)

[Appendix 3 - CAMHS Pathway – Management of Police Reports](#)

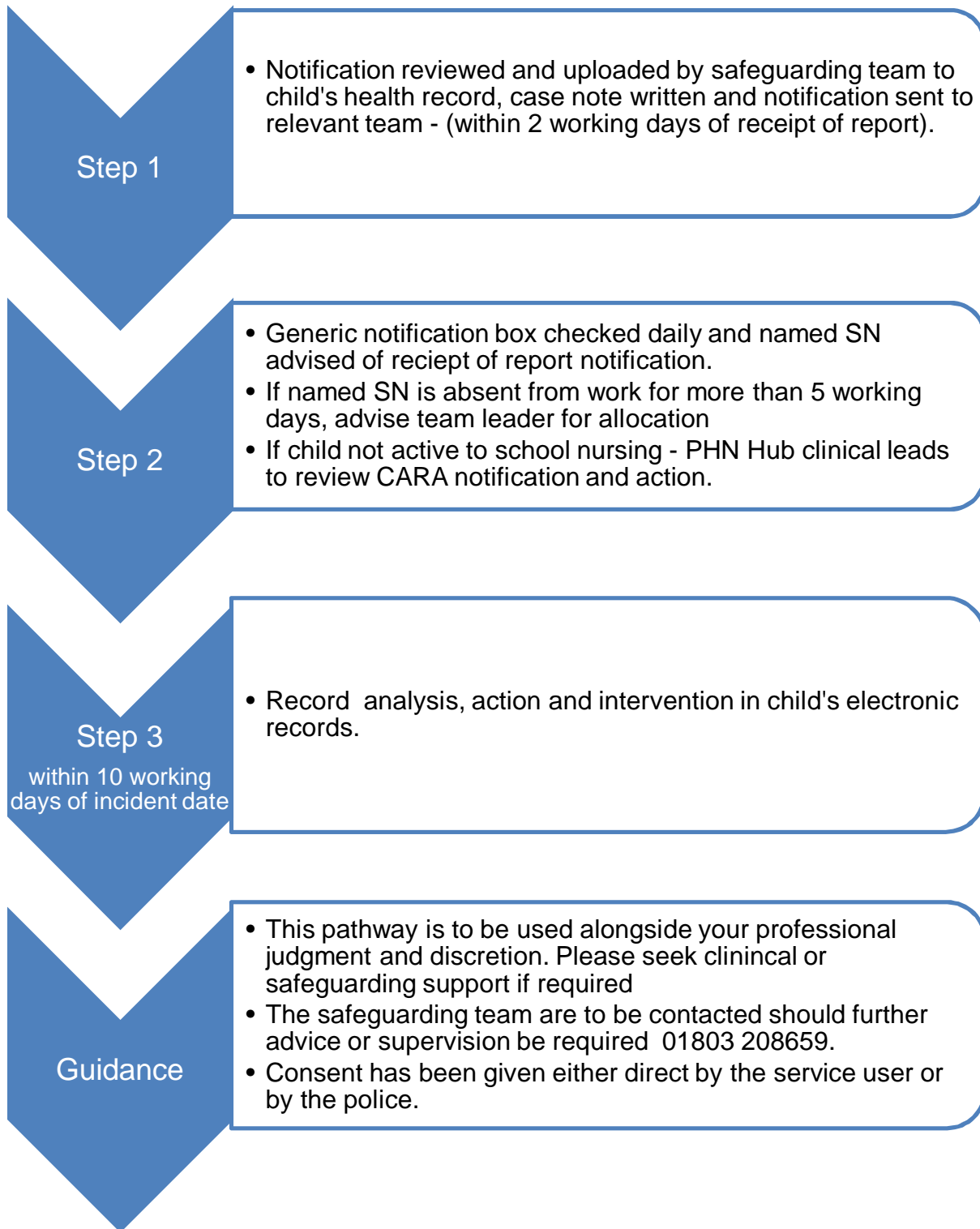
[Appendix 4 - Substance Misuse Pathway – Management of Police Reports](#)

Appendix 1

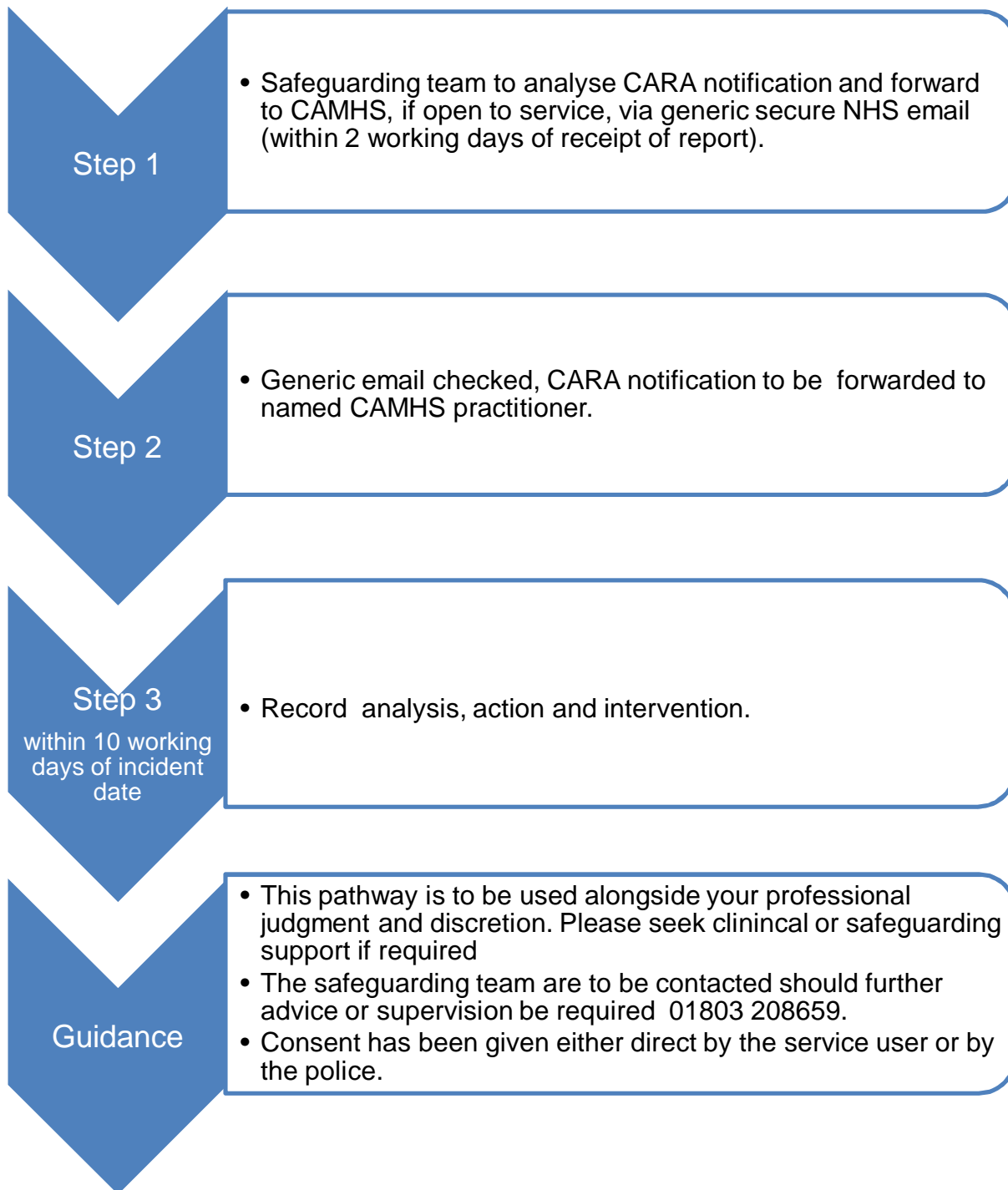
Health Visitor Pathway – Management of CARA notifications-



School Nurse Pathway – Management of Police Reports

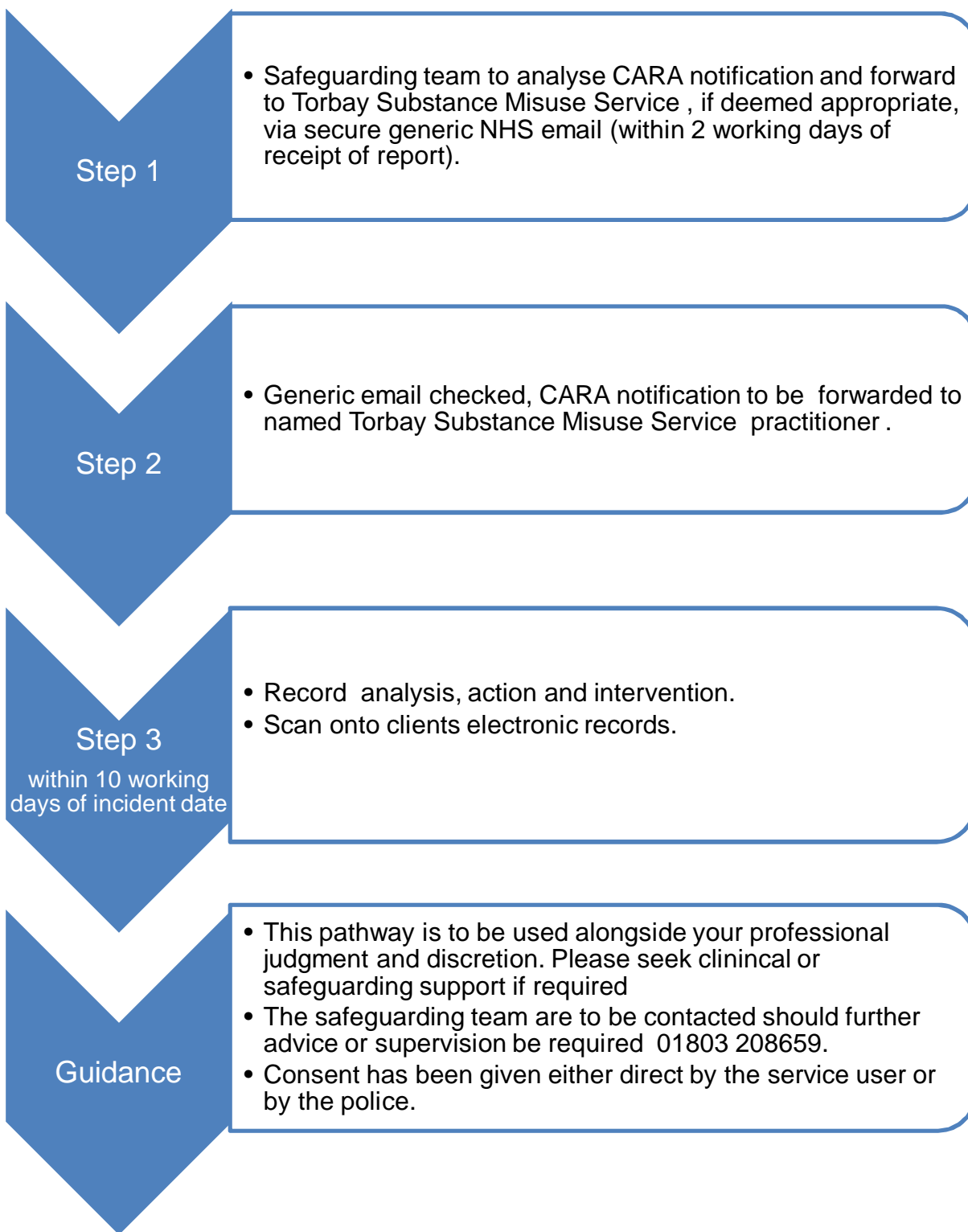


CAMHS Pathway – Management of Police Reports



Appendix 4

Substance Misuse Pathway – Management of Police Reports



Document Control Information

This is a controlled document and should not be altered in any way without the express permission of the author or their representative.

Please note this document is only valid from the date approved below, and checks should be made that it is the most up to date version available.

If printed, this document is only valid for the day of printing.

This guidance has been registered with the Trust. The interpretation and application of guidance will remain the responsibility of the individual clinician. If in doubt contact a senior colleague or expert. Caution is advised when using clinical guidance after the review date, or outside of the Trust.

Ref No:	1985		
Document title:	Management of Child at Risk Alerts (CARA)		
Purpose of document:	This standard operating procedure has been developed to inform Torbay and South Devon NHS Foundation Trust staff on the management of Police CARA Reports		
Date of issue:	3 August 2020	Next review date:	3 August 2023
Version:	6	Last review date:	June 2020
Author:	Named Nurse Safeguarding Children Safeguarding Nurse Practitioner		
Directorate:	Paediatrics		
Equality Impact:	The guidance contained in this document is intended to be inclusive for all patients within the clinical group specified, regardless of age, disability, gender, gender identity, sexual orientation, race and ethnicity & religion or belief		
Committee(s) approving the document:	Safeguarding Children Operational Group		
Date approved:	24 June 2020		
Links or overlaps with other policies:	South West Child Protection Procedures https://www.proceduresonline.com/swcpp/ Child Protection Policy - G2075 Violence and aggression policy Domestic/Sexual Abuse and Violence Policy (WB3) Domestic Abuse Guideline for Routine Enquiry Ref 1339		

Have you identified any issues on the Rapid (E)quality Impact Assessment. If so please detail on Rapid (E)QIA form.	Yes <input type="checkbox"/>	
	Please select Yes No	
Does this document have implications regarding the Care Act? <i>If yes please state:</i>	<input type="checkbox"/>	<input type="checkbox"/>

Does this document have training implications? <i>If yes please state:</i>	<input type="checkbox"/>	<input type="checkbox"/>
Does this document have financial implications? <i>If yes please state:</i>	<input type="checkbox"/>	<input type="checkbox"/>
Is this document a direct replacement for another? <i>If yes please state which documents are being replaced:</i>	<input type="checkbox"/>	<input type="checkbox"/>

Document Amendment History

Date	Version no.	Amendment summary	Ratified by:
28 January 2016	3	Revised	
12 January 2018	4	Revised	Care and Clinical Policies Group
12 February 2018	4	Review date extended from 2 to 3 years	
3 August 2020	5	Revised	Safeguarding Children Operational Group

The Mental Capacity Act 2005

The Mental Capacity Act provides a statutory framework for people who lack capacity to make decisions for themselves, or who have capacity and want to make preparations for a time when they lack capacity in the future. It sets out who can take decisions, in which situations, and how they should go about this. It covers a wide range of decision making from health and welfare decisions to finance and property decisions

Enshrined in the Mental Capacity Act is the principle that people must be assumed to have capacity unless it is established that they do not. This is an important aspect of law that all health and social care practitioners must implement when proposing to undertake any act in connection with care and treatment that requires consent. In circumstances where there is an element of doubt about a person's ability to make a decision due to 'an impairment of or disturbance in the functioning of the mind or brain' the practitioner must implement the Mental Capacity Act.

The legal framework provided by the Mental Capacity Act 2005 is supported by a Code of Practice, which provides guidance and information about how the Act works in practice. The Code of Practice has statutory force which means that health and social care practitioners have a legal duty to have regard to it when working with or caring for adults who may lack capacity to make decisions for themselves.

“The Act is intended to assist and support people who may lack capacity and to discourage anyone who is involved in caring for someone who lacks capacity from being overly restrictive or controlling. It aims to balance an individual's right to make decisions for themselves with their right to be protected from harm if they lack the capacity to make decisions to protect themselves”. (3)

All Trust workers can access the Code of Practice, Mental Capacity Act 2005 Policy, Mental Capacity Act 2005 Practice Guidance, information booklets and all assessment, checklists and Independent Mental Capacity Advocate referral forms on iCare

<https://icon.torbayandsouthdevon.nhs.uk/areas/mental-capacity-act/Pages/default.aspx>

Infection Control

All staff will have access to Infection Control Policies and comply with the standards within them in the work place. All staff will attend Infection Control Training annually as part of their mandatory training programme.

Rapid (E)quality Impact Assessment (EqIA) (for use when writing policies)

Policy Title (and number)	Management of Child at Risk Alert	Version and Date	5 June 2020
Policy Author	Named Nurse for Safeguarding Children		
An (e)quality impact assessment is a process designed to ensure that policies do not discriminate or disadvantage people whilst advancing equality. Consider the nature and extent of the impact, not the number of people affected.			
Who may be affected by this document?			
Patients/ Service Users <input type="checkbox"/>	Staff <input checked="" type="checkbox"/>	Other, please state...	<input type="checkbox"/>
Could the policy treat people from protected groups less favourably than the general population? PLEASE NOTE: Any 'Yes' answers may trigger a full EIA and must be referred to the equality leads below			
Age	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Gender Reassignment	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
Race	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Disability	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
Gender	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Pregnancy/Maternity	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
Sexual Orientation			Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
Religion/Belief (non)			Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
Marriage/ Civil Partnership			Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
Is it likely that the policy could affect particular 'Inclusion Health' groups less favourably than the general population? (substance misuse; teenage mums; carers ¹ ; travellers ² ; homeless ³ ; convictions; social isolation ⁴ ; refugees)			Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
Please provide details for each protected group where you have indicated 'Yes'.			
VISION AND VALUES: Policies must aim to remove unintentional barriers and promote inclusion			
Is inclusive language ⁵ used throughout?			Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA <input type="checkbox"/>
Are the services outlined in the policy fully accessible ⁶ ?			Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA <input type="checkbox"/>
Does the policy encourage individualised and person-centred care?			Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA <input type="checkbox"/>
Could there be an adverse impact on an individual's independence or autonomy ⁷ ?			Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA <input type="checkbox"/>
EXTERNAL FACTORS			
Is the policy a result of national legislation which cannot be modified in any way?			Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
What is the reason for writing this policy? (Is it a result in a change of legislation/ national research?)			
Who was consulted when drafting this policy?			
Patients/ Service Users <input type="checkbox"/>	Trade Unions <input type="checkbox"/>	Protected Groups (including Trust Equality Groups)	<input type="checkbox"/>
Staff <input checked="" type="checkbox"/>	General Public <input type="checkbox"/>	Other, please state...	<input type="checkbox"/>
What were the recommendations/suggestions?			
Does this document require a service redesign or substantial amendments to an existing process? PLEASE NOTE: 'Yes' may trigger a full EIA, please refer to the equality leads below			Yes <input type="checkbox"/> No <input type="checkbox"/>
ACTION PLAN: Please list all actions identified to address any impacts			
Action	Person responsible	Completion date	
AUTHORISATION:			
By signing below, I confirm that the named person responsible above is aware of the actions assigned to them			

Name of person completing the form	Named Nurse for Safeguarding Children	Signature	
Validated by (line manager)		Signature	

Please contact the Equalities team for guidance:

For South Devon & Torbay CCG, please call 01803 652476 or email marisa.cockfield@nhs.net

For Torbay and South Devon NHS Trusts, please call 01803 656676 or email pf.d.sdhct@nhs.net

This form should be published with the policy and a signed copy sent to your relevant organisation

Consider any additional needs of carers/ parents/ advocates etc, in addition to the service user

² Travelers may not be registered with a GP - consider how they may access/ be aware of services available to them

³ Consider any provisions for those with no fixed abode, particularly relating to impact on discharge

⁴ Consider how someone will be aware of (or access) a service if socially or geographically isolated

⁵ Language must be relevant and appropriate, for example referring to partners, not husbands or wives

⁶ Consider both physical access to services and how information/ communication is available in an accessible format

⁷ Example: a telephone-based service may discriminate against people who are d/Deaf. Whilst someone may be able to act on their behalf, this does not promote independence or autonomy

Clinical and Non-Clinical Policies – Data Protection

Torbay and South Devon NHS Foundation Trust (TSDFT) has a commitment to ensure that all policies and procedures developed act in accordance with all relevant data protection regulations and guidance. This policy has been designed with the EU General Data Protection Regulation (GDPR) and Data Protection Act 2018 (DPA 18) in mind, and therefore provides the reader with assurance of effective information governance practice.

The UK data protection regime intends to strengthen and unify data protection for all persons; consequently, the rights of individuals have changed. It is assured that these rights have been considered throughout the development of this policy. Furthermore, data protection legislation requires that the Trust is open and transparent with its personal identifiable processing activities and this has a considerable effect on the way TSDFT holds, uses, and shares personal identifiable data.

Does this policy impact on how personal data is used, stored, shared or processed in your department? Yes No

If yes has been ticked above it is assured that you must complete a data mapping exercise and possibly a Data Protection Impact Assessment (DPIA). You can find more information on our [GDPR](#) page on ICON (intranet)

For more information:

- Contact the Data Access and Disclosure Office on dataprotection.tsdf@nhs.net,
- See TSDFT's [Data Protection & Access Policy](#),
- Visit our [Data Protection](#) site on the public internet.