Care and Risk Management (CARM) in Practice

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1. The Purpose of CARM

• To provide a consistent national framework for the assessment, management and evaluation of young people aged 12-18 years, who pose a serious risk of harm to others.

• Referrals to CARM will likely be young people involved in violent or harmful sexual behaviour, although referrals for other concerning behaviours may also be appropriate.

• The CARM process should run parallel and compliment the GIRFEC process and Childs Plan.

• Risk Management meetings should be multi-agency and local processes should be “signed off” by local child protection committees.
2. What should a CARM meeting consider?

- highlight to appropriate agencies those who present a risk of serious harm to others;
- ensure relevant risk assessments are undertaken;
- share information in a multi-agency forum about risk of harm;
- clarify the nature of the harm and to whom;
- undertake scenario planning;
- identify safety factors which can reduce risk;
- Ensure robust, but age and stage appropriate risk management plans are in place.
3. Referrals to CARM

• Referrals should be made to a central point of contact who has knowledge of legislative and policy frameworks and experience of relevant processes, such as child protection processes.

• Referrals may be made by a range of partners of agencies including; Police, receipt of the concern, lead professional or others aware of the concern e.g. EEI co-ordinator.
Referrals to CARM (cont)

• Where a child is thought to meet the criteria a referral discussion should take place with 24 hours and no more than 72 hours after the incident.

• A referral discussion should include information that allows the person co-ordinating referrals to make a decision on whether a CARM meeting should be convened and a summary of immediate actions required to ensure the safety of others.
4. Taking Immediate Action

• Immediate actions agreed to protect others should be noted on an outcome recording form and recorded in the local case management system (Frameworki, Swift etc)

• Immediate actions could include; Review living or education arrangements, consider actions to protect the community or consider arrangements to address interest from the media.
5. Initial CARM meetings

• Initial meeting within 21 calendar days of referral and will likely include, Social Work, Police, Education, CAHMS colleagues.

• Referrer should follow up discussion with a written referral form and include any current assessments or supporting documents e.g. IAF, CAHMS assessments.

• Consideration should then be given to whether the young person and parents are informed of the meeting.
6. Making Decisions

• Decision making should be grounded with evidence base practice and where a risk assessment has been undertaken the meeting should scrutinise this in terms of the content and if further information is required.

• The meeting should consider risks associated with the young person, their family and the community.

• Additionally, what levels of supervision or monitoring are required and whether community disclosure is required.
7. Managing Risk

• Where a Child's plan exists, the outcome and actions from the CARM meeting should be reflected in this by the lead professional.

• Where a plan is required, the lead professional should include these points when drafting the plan.

• In terms of defensible decision making, the meeting should agree a risk classification of Aware, attentive or Active and Alert.
8. Reviewing the Risk

• The Chair will ask attendees to consider;
  a. Further offences or relevant incidents
  b. Are further assessments required?
  c. Review progress within the Childs Plan
  d. Evaluate progress or deterioration
  e. Consider additional actions.
  f. Re assess risk classification
9. Transition and Exit Planning

- In accordance with minimum intervention a young person should not be involved in the process unless necessary to manage risk.
- Available systems, young person’s engagement, evidence of risk reduction and goal achievement will evidence progress.
- Interface will MAPPA is important in transition planning.
Case Example - Simon

• Offending History
• Age 14- Simon charged with 6 x lewd and libidinous practices against his younger brother and made subject to a Supervision Order including a condition that he engage in therapeutic work.
• Age 15, Simon charged with a sexual assault on a female neighbour, aged 12. Concerns reported that Simon would no longer leave the house due to harassment from peers and refusing to attend School.
• Simon’s mother reported that local people had been verbally threatening to her in the shop where she worked.
The CARM process and Simon

• Referred to CARM by Social Worker following 2\textsuperscript{nd} offence.

• Initial actions included Simon’s step father working from home due to backlash in the local community.

• Initial CARM meeting would have considered concerns re Simon’s sister age 11, given the nature of his second offence.
Questions?