

ELFT Phase 2 Child Protection Information Sharing - Standard Operating Procedure (SOP)

Document Control

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Applies to	All ELFT staff who access CP-IS across the Trust’s six local authority areas

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1. Introduction

Purpose

This SOP has been designed for East London NHS Foundation Trust (ELFT) staff who will be accessing the Phase 2 Child Protection Information Sharing (CP-IS) from June 2026.

Scope

Phase 2 CP-IS is the NHS England programme expansion enabling scheduled healthcare services to access child protection status information, widening safeguarding information-sharing beyond emergency care into routine clinical settings.

Phase 1 (original implementation):

- Focused on unscheduled care settings (e.g. Emergency Departments, ambulance, urgent care)
- Generated alerts when a child on a Child Protection Plan or a Child Looked After attended services

Phase 2 (current expansion):

- Extends CP-IS into scheduled / planned care

The information that CP-IS provides comes from, and is managed by, Local Authorities that have a statutory responsibility for children's services. The system is updated by the Local Authority with the use of a child's/mother's NHS number.

CP-IS highlights that a child has a specific vulnerability and is known to the Local Authority. Where this is identified, practitioners are encouraged to contact the allocated Social Worker to gain a fuller understanding of the identified risks, the support being provided, and the details of the Child Protection and Looked After Child statutory plans to support more informed assessment, care planning, and appropriate information sharing.

Please note that CP-IS does not include information on Children in Need (CIN) or Early Help services. It is therefore important to continue to establish during the assessment of a child,/ or parent/carer, which other services, including the Local Authority, are supporting the child to ensure the child's needs are fully understood.

Background

Launched in 2015 (Phase 1 of the CP-IS), it provides a secure, national solution enabling basic child protection status information (e.g. Child Protection Plans and Looked After status) to be shared between local authorities and NHS services. CP-IS was designed to support earlier identification of risk, improved decision-making, and stronger collaboration between health and social care.

The development of Phase 2 of the CP-IS aligns with the wider NHS England safeguarding strategy, drawing on national learning which has consistently highlighted the need for timely, proportionate information sharing across agencies to reduce risk and improve outcomes for children.

- Reviews consistently identify that different agencies (health, social care, police) held pieces of risk information but failed to share them effectively, leading to missed opportunities to protect children.
- Improving timely, proportionate information sharing is therefore a central policy priority in safeguarding practice and guidance (e.g. Working Together to Safeguard Children 2026)

At its core, CP-IS is a national safeguarding information-sharing system that connects children's social care and NHS systems, enabling health professionals to identify vulnerable children promptly at the point of care. As a national system operating in real time, it ensures that a child's safeguarding status can be accessed wherever they present, including outside their home borough, supporting continuity of protection across geographical boundaries. It provides key status information and facilitates immediate contact with the responsible local authority, thereby strengthening multi-agency communication, collaboration, and response. The system focuses on children who are subject to a Child Protection Plan, those who are Looked After, and unborn children where there are pre-birth safeguarding plans in place.

CP-IS enables a limited amount of essential read only information to be shared between organisations. It carries information about children who are one or more of the following:

- Children Looked After (CLA)
- Children subject to a Child Protection Plan (CPP)
- Children who have been CLA or on a CPP within the previous 12 months
- Unborn children subject to a CPP
- Unborn alert visible until 28 days after expected delivery date

The only information that can be accessed by healthcare practitioners via CP-IS is:

- NHS Number.
- Child's safeguarding status (i.e. CPP, CLA).
- Start and end dates of that plan.
- Responsible Local Authority (LA).
- LA contact details.
- Access history/audit trail of the 25 most recent CPIS information accesses from approved care settings in England.

The following principles apply:

CP-IS shares only a minimal, role-appropriate safeguarding dataset for direct care purposes.

The following is **NOT SHARED**:

- Full social care records/file.
- CPP category (e.g. neglect, abuse).
- Parents/carers details.
- Clinical or presentation history.
- Detailed safeguarding concerns or rationale.

This reflects the CP-IS principle of sharing only proportionate, need-to-know information to support safeguarding decision-making. In Phase 2, this same dataset is made available across a wider range of

healthcare settings, including scheduled care services.

Responsibilities

While access to CP-IS is restricted to authorised practitioners with appropriate role-based permissions, there is a collective organisational responsibility to ensure that all staff understand the purpose, function and appropriate use of CP-IS within safeguarding practice.

All staff are expected to:

- Comply with this Standard Operating Procedure and use CP-IS appropriately to support safeguarding decision-making.
- Maintain awareness of safeguarding escalation pathways, including seeking advice from senior colleagues, line managers, safeguarding leads, or the Trust safeguarding team, and engaging with local authority children's social care where required.
- Remain vigilant to indicators of abuse, neglect, and risk of significant harm, and act promptly where concerns are identified.
- Consider the wider context of the child, including the impact of parental or carer health, behaviour, or vulnerability on parenting capacity and child wellbeing.
- Adhere to local and national safeguarding procedures, ensuring that concerns are managed in line with statutory guidance (e.g. Working Together to Safeguard Children 2026 and the Children Act 2004).
- Engage with safeguarding supervision and training requirements, ensuring appropriate support, reflection, and professional oversight in cases involving safeguarding concerns.

2. Benefits of CP-IS

CP-IS provides assurance that safeguarding information is available in a timely, consistent and proportionate manner to support clinical decision-making and multi-agency safeguarding responses.

The implementation of CP-IS supports the following outcomes:

- **Early identification and intervention:**
CP-IS enables practitioners to access key safeguarding information at the point of care, supporting the early recognition of risk and facilitating timely action to prevent or reduce the likelihood of harm to children.
- **Timely information sharing and communication:**
The system enables prompt contact with the responsible Local Authority, ensuring that safeguarding concerns can be escalated without delay and that relevant information is shared appropriately.
- **Improved multi-agency working:**
CP-IS strengthens coordination between healthcare services and children's social care, supporting a joined-up and proportionate safeguarding response in line with statutory guidance.
- **Continuity of safeguarding oversight:**
As a national system, CP-IS ensures that children remain visible to professionals when accessing healthcare services outside their home area, reducing the risk of fragmented information and supporting consistent safeguarding decision-making.

- **Enhanced support to children’s social care:**
CP-IS provides timely notification of healthcare presentations, enabling social workers to use their knowledge of the child and family to assess risk, determine whether further intervention is required, and support improved outcomes.
- **Improved workforce efficiency and effectiveness:**
CP-IS replaces previously manual, time-intensive processes with an automated, standardised information-sharing system. This provides assurance that safeguarding information is transferred securely and consistently via the NHS Spine, supporting data that is current and routinely updated. As a result, staff time is utilised more effectively, enabling practitioners to focus on direct care and safeguarding activity.
- **Reduction in administrative burden and duplication:**
CP-IS removes the requirement for Local Authorities and health partners to manually compile, share and reconcile child protection or children looked after lists. Practitioners are no longer required to cross-reference multiple local systems when a child presents for care. This supports a more streamlined process, reduces the risk of error, and ensures that safeguarding information is accessible at the point of care in a timely and reliable manner.

3. Process

CP-IS information is accessed via the National Care Records Service (NCRS) or integrated clinical systems, which retrieve safeguarding data from the NHS Spine.

Access and Use of CP-IS

Services should check for the CP-IS notification when any child under 18 years or female service user who may be pregnant presents for care, in line with service workflows and clinical judgement. Access to CP-IS via the NHS Spine is available to ELFT staff with a valid smartcard, in line with their role and responsibilities.

Information Sharing and Consent

Should any child/unborn child be identified from CP-IS as being subject to a Child Protection Plan or Children Looked After, ELFT staff will be required to share relevant information with the allocated Local Authority social worker and professional network to support effective multi-agency working.

Best practice would be to seek consent to share information from either the service user or the parent/carer with parental responsibility. When required, information can be shared without consent for the above cases as there is a lawful basis and a clear safeguarding rationale, in line with the Data Protection Act 2018 and UK GDPR; however, any information must be proportionate and relevant in line with statutory safeguarding duties and information-sharing legislation.

To ensure records demonstrate proportionate and defensible decision-making, practitioners must clearly document:

- Decision to share or withhold information
- What information was shared
- With whom
- The rationale for the decision

Data Protection and Safeguarding Processing Conditions

All practitioners must:

- Understand that safeguarding information is classified as special category personal data
- Be confident in applying the Data Protection Act 2018 safeguarding condition, which permits information sharing where necessary to protect a child or individual at risk
- Ensure that information is processed in a lawful, proportionate and secure manner

Contingency Arrangements

Should for any reason the National Care Record System be unavailable:

- Practitioners should review alternative systems, such as the East London Clinical Portal or Bedfordshire Luton Milton Keynes Clinical Portal, to identify recent healthcare contacts and any safeguarding indicators
- CP-IS should be checked retrospectively once access is restored

All system outages must be:

- Reported via the ICT service portal. ICT will escalate in line with organisational incident processes and NHS England requirements where appropriate

CP-IS Management Procedure

1. For all children, unborn children, and relevant female service users new to ELFT, the local service should check CP-IS at the point of first contact (usually when the initial referral is received) to determine whether the child/unborn child is known to any Local Authority as being on a Child Protection Plan (CPP), Unborn CPP or is a Child Looked After (CLA). On CP-IS, this will appear as an orange alert (see below).
2. The outcome of any CP-IS check should be documented in the patient's electronic record.



3. Where a child or unborn child and relevant female service users are already open to local services, the responsible team should continue to review the CP-IS status as part of any risk assessment updates.
4. The service should flag on the patient's electronic record (e.g. alert or equivalent) that the child is subject to a CPP or is a CLA.
5. For services using RiO a Safeguarding Child Client page should be completed, indicating whether the child is subject to a CPP or is a CLA.

Client Actions

Quick Links

- [Progress Notes](#)
- [Document List View](#)
- [Document Upload](#)
- [Client Diary](#)
- [Summary Care Record](#)
- [Clustering Assessment & Allocation](#)
- [Recovery CPA Documentation](#)
- [Referrals / Entry / Exit](#)
- [Mental Capacity - Best Interests Decision](#)
- [Gillick Competence Assessment](#)
- [CHN Care Planning](#)
- [River View](#)

Case Record Menu

- Conditions (SNOMED)/Diagnosis (ICD10)
- Risk Information
- Physical Health
- Recovery Care Pathway Documentation
- Safeguarding**
 - Current Forms
 - Archived Forms
- Mental Health Act & Mental Capacity Act
- Clustering
- Client Referrals
- Inpatient Management
- Client Related Data-Views
- CAMHS
- Intellectual Disability

RiO's Alert

Safeguarding Form, click on the current form to access the Safeguarding Child Client Form

Safeguarding Child Clients Form

Current Forms - Safeguarding Child Clients

Safeguarding Child Clients

Client ID: ZZTEST_Dummy Three (Mx) - 219591517

Date of Assessment: 17 February 2020 10:59

WARNING: This form has been modified. Previous information may be available in the 'Safeguarding Archive' case record menu.

Responsible Local Authority: (no data) Additional Personal Information

Safeguarding Process Including Social Services Involvement

Status / Subject to	Further Details/Categories	Start Date
Child Protection Plan (CPP)	V	17 February 2020

SNOMED: Injury Reference List Core Assessment Risk Summary Care Planning Process Note

Updated by: Alison (CS) Neighton

Last updated: 17 February 2020 10:59

Add

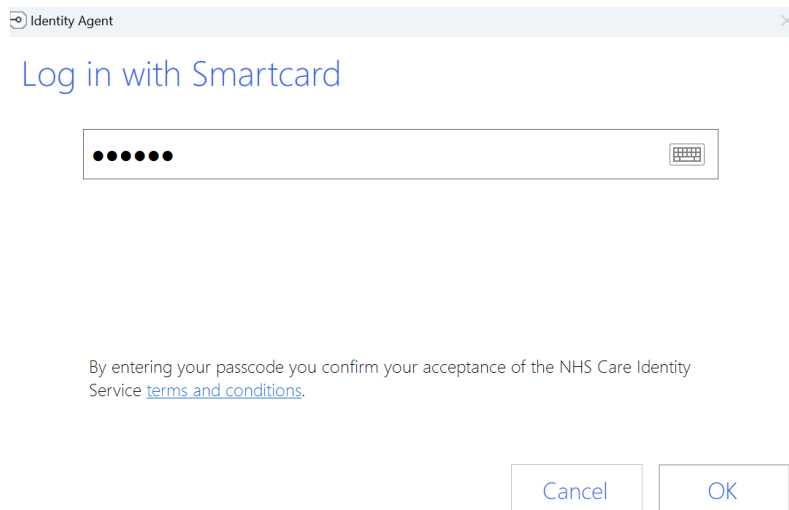
Click Add to record the CPP/CLA CP-IS information

The screenshot shows a web-based form for 'Safeguarding Child Clients'. The client ID is 'ZZTEST, Dummy Three (M) - 21001517'. The form includes sections for 'Responsible Local Authority' (currently '(no data)'), 'Safeguarding Process Including Social Services Involvement', and a table for 'Status / Subject to'. The table has columns for 'Status / Subject to', 'Further Details/Categories', 'Start Date', and 'Close Date'. The first row shows 'Child Protection Plan (CPP)' with a start date of '17 February 2020'. A red arrow points to the 'Child Protection Plan (CPP)' dropdown menu. A text box on the left says 'To update the LA Involvement Status'.

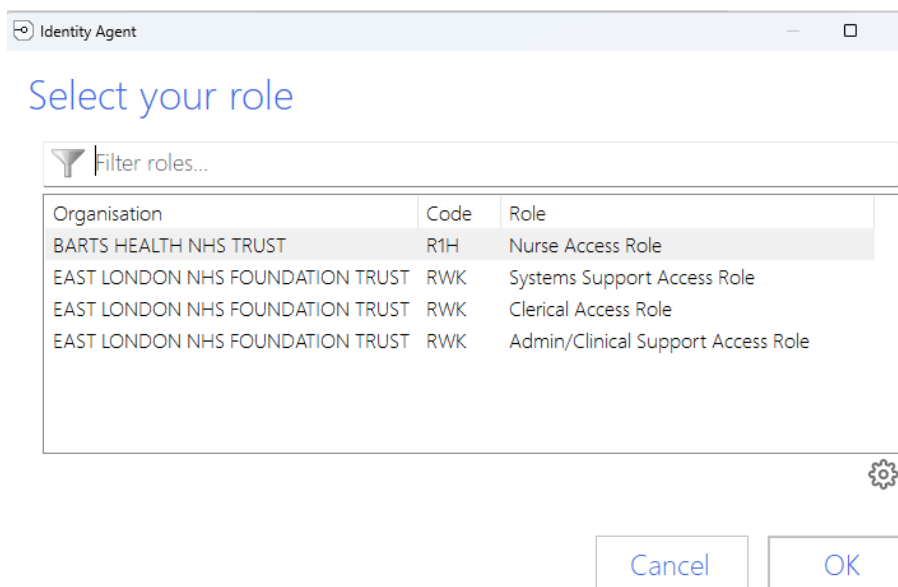
6. Services must review and update the care plan and risk assessment for all children/unborn subject to Child Protection Plans (CPP) and all Children Looked After (CLA) through their local Multi-Disciplinary Team (MDT) meetings, in consultation with the local Named Professional for Safeguarding Children.
7. If a child/unborn is subject to a CPP or is a CLA, the responsible team must liaise with the relevant Local Authority.
8. The responsible team must ensure appropriate engagement with the relevant Local Authority.
9. All communication, including ELFT-agreed actions, must be clearly documented within the patient's electronic records.
10. Should any child/unborn child known to be subjected to a Child Protection Plan or be a Child Looked After and not have a CP-IS alert, or have a CP-IS alert which does not reflect their current step down status, please inform the ELFT Safeguarding Children Team (elft.safeguardingchildrenteam@nhs.net).

How to Log On to CP-IS using NHS Spine

- a. Put your smartcard in the reader.
- b. Enter your passcode.

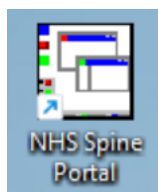


- c. Select the required role from the list (this will only appear if there is more than one role on the card). Please only select an ELFT-specific relevant role.



Launch: National Care Records Service (NCRS)

- 1. Launch NCRS and login via the link the NHS Spine desktop app



- 2. Select the National Care Records Service (NCRS) link

NHS applications

- [Apply for Care ID](#)
- [Bowel Cancer Screening Service \(BCSS\)](#)
- [Care Identity Management \(CIM\)](#)
- [Cervical Screening Management System \(CSMS\)](#)
- [Demographic Spine Application](#)
- [End Point Registration Service](#)
- [EPS Prescription tracker](#)
- [e-Referral Service \(e-RS\)](#)
- [MESH Online Enquiry Service \(MOLES\)](#)
- [MESH user interface](#)
- [National Care Records Service \(NCRS\)](#)
- [National Document Repository \(NDR\)](#)
- [Send an SR1 form online \(new service\)](#)
- [Spine Reporting Service](#)
- [TES Alert Viewer](#)
- [NHS.net Connect](#) (formerly NHSmail)
- [Link My NHS accounts](#) (connect your NHS.net Connect account to your smartcard)

The following page will appear. Click Continue to Find patient.

3. Enter the NHS number of the patient. You can also click on the Basic and advanced tabs if you do not have the NHS number but have other details of the child.

Find patient

NHS Number Basic Advanced

NHS Number
For example: 943 476 5919

Find a patient

Bulletins
[Search tips and guidance \(opens in new tab\)](#)

4. This will be the initial page you will see, where you can then click on to retrieve the information.

NHS National Care Records Service Find patient Change role What's new Give feedback

Nic-Qtp-Donotuse XXTESTPATIENTRDTK 15 years old Male DoB: 20-Oct-2010 NHS number: 999 027 6579
 Address: 122 The Drift, Harlaxton, GRANTHAM, Lincolnshire, NG32 1AE

Overview Patient details Clinical

Child protection alert present Reasonable Adjustments present

Patient details Clinical

Demographics Reasonable Adjustments Child protection information

No Summary Care Record exists for this patient.

5. The following are what you can see when clicking on the various options.

NHS National Care Records Service Find patient Change role What's new Give feedback Settings Log out

Nic-Qtp-Donotuse XXTESTPATIENTRDTK 15 years old Male DoB: 20-Oct-2010 NHS number: 999 027 6579
 Address: 122 The Drift, Harlaxton, GRANTHAM, Lincolnshire, NG32 1AE

Overview Patient details Clinical

Demographic Information GP and care providers Contacts and next of kin Flags / Alerts Historical information Tablet view Print

Name View history
 Usual Name Mr Nic-Qtp-Donotuse Xxtestpatientrdtk
 From 25-Jun-2025
 Other previous name Mr Nic-Qtp-Donotuse Xxtestpatientrdtk
 From 10-Dec-2025 to 10-Dec-2025
 Other previous name Mr Nic-Qtp-Donotuse Xxtestpatientrdtk
 From 17-Oct-2025 to 08-Jan-2026

Addresses View history
 Usual Address 122 The Drift Harlaxton GRANTHAM Lincolnshire NG32 1AE (collapse)
 From 25-Nov-2025

Key Details
 NHS Number 999 027 6579
 Date of Birth 20-Oct-2010
 Gender Male
 GP Practice WATERINGBURY (G82200)
 From 03-Feb-2026
 See full GP details
 GP Address 14 PELICAN COURT, WATERINGBURY (expand)
 Commissioning Organisation NHS KENT AND MEDWAY ICB - 91Q (91Q)

Contact Details View history
 Email Main Home dummy.patient@yahoo.com
 From 08-Mar-2022

Return to Top

NHS National Care Records Service Find patient Change role What's new Give feedback Settings

Nic-Qtp-Donotuse XXTESTPATIENTRDTK 15 years old Male DoB: 20-Oct-2010 NHS number: 999 027 6579
 Address: 122 The Drift, Harlaxton, GRANTHAM, Lincolnshire, NG32 1AE

Overview Patient details Clinical

Child protection alert

Print

This child has [2 active plans](#).

Active child protection information

Child Protection Plan

NHS National Care Records Service Find patient Change role What's new Give feedback

Nic-Qtp-Donotuse XXTESTPATIENTRDTK 15 years old Male DoB: 20-Oct-2010 NHS number: 999 027 6579
 Address: 122 The Drift, Harlaxton, GRANTHAM, Lincolnshire, NG32 1AE

Active child protection information

Child Protection Plan

A plan designed to keep a child safe, setting out how things can be made better for the family and what support they will need. For more information contact the local authority.

Start date	03-Dec-2025
End date	03-Dec-2027
Responsible local authority	XXX DO NOT USE XXX BTSPINE SHA QZ0 (QZ0)
Emergency duty number	02073333333
Office hours number	02073333333

NHS National Care Records Service Find patient Change role What's new Give feedback

Nic-Qtp-Donotuse XXTESTPATIENTRDTK 15 years old Male DoB: 20-Oct-2010 NHS number: 999 027 6579
 Address: 122 The Drift, Harlaxton, GRANTHAM, Lincolnshire, NG32 1AE

Unborn Child Protection Plan

A plan designed to enable practitioners to work together with families to safeguard unborn babies where vulnerability and risk indicators are identified. Since unborn children do not have NHS numbers, this plan will form part of the mother's record where it will stay for up to 28 days after the expected date of delivery.

Start date	27-Nov-2025
End date	27-Nov-2027
Responsible local authority	XXX DO NOT USE XXX BTSPINE SHA QZ0 (QZ0)
Emergency duty number	02073333333
Office hours number	02073333333

Viewing Child Protection Information

When a user clicks the Child Protection Alert present tab, it will display:

1. The 'Current Child Protection Information'; and
2. A list of previous practitioners who have accessed the records under the heading 'Child Protection Information Previously Viewed By'.

The CPP/ CLA information that is shared will only be Start Date/ End Date information to indicate that a CPP exists, and/ or, that the child is a CLA, and not the full details of either of these pieces of information.

The child protection information displayed will include:

Type of Plan

1. Child Protection Plan (CPP)
2. Child Looked After (CLA)
3. Unborn Child Protection Plan (UCPP)

Note: It is possible for multiple plans to be associated with a single NHS Number. An example of this is shown above.

Start Date

A Start Date will always be displayed.

End Date

An End Date will always be displayed. CPPs and CLAs are displayed for 364 days after the End Date. UCPP's are displayed for 28 days after the End Date. The latest End Date for a CPP/CLA is the child's 18th birthday. The End Date for a UCPP is the due date of the baby.

Responsible Local Authority

This is the LA that initially uploaded the plan information to Spine.

Emergency Duty Telephone Number

LA contact number. It is mandatory for this to be provided by the LA.

Office Hours Telephone Number

This is an optional second telephone number for the LA.

4. Access Notifications (Phase 2)

In Phase 2 CP-IS (scheduled care), viewing Child Protection Information does not trigger an Access to Service Notification (ASN).

When staff access the Child Protection Alert tab in NCRS, the access is recorded for audit purposes only.

The following details are logged:

- Date and time of access
- Name of the healthcare professional (via smartcard)
- Job role selected at login
- NHS organisation code and name

This information appears in the 'Child Protection Information Previously Viewed By' section within NCRS and other NHS systems.

No information is sent to local authorities, regardless of how many times the record is accessed within a 24-hour period.

All access remains subject to information governance requirements and routine audit.

5. Audit

All access to CP-IS is auditable at both the national and local levels. Each time a record is accessed, the

NHS Spine logs the date and time of access, the practitioner (via smartcard), the role selected at login, and the NHS organisation. This information is visible to other authorised professionals and to the responsible local authority through the 'Child Protection Information Previously Viewed By' record.

- CP-IS must only be accessed where there is a legitimate care relationship and a safeguarding or direct care purpose. Accessing a record without such a purpose is an information governance breach.
- The Trust undertakes a periodic audit of CP-IS access to provide assurance that use is appropriate, proportionate and consistent with this SOP. Audit outcomes are reported to the Trust Safeguarding Committee.
- Any concern about inappropriate access is managed under the Trust's Information Governance and, where relevant, disciplinary procedures.
- Local audit and assurance arrangements differ across the six local authority areas in which the Trust operates. Services should also comply with any audit requirements agreed locally with the responsible local authority and integrated care board.
- The outcome of any CP-IS check, and any resulting action, must be recorded in the patient's electronic record to support a clear audit trail.

6. Consent

In line with Working Together to Safeguard Children:

- Consent is not required to share or access CPP or CLA status via CP-IS, as this is permitted under statutory safeguarding duties.
- CP-IS provides indicator information only (CPP/CLA status) and does not include detailed case information.
- In line with the principles of transparency, families should be informed, wherever appropriate, that this safeguarding status will be visible to authorised healthcare professionals.
- CP-IS information must be used alongside existing safeguarding processes and professional judgement.

7. Follow-Up Queries by Local Authority

CP-IS shares only indicator information: the child's safeguarding status, the plan start and end dates, the responsible local authority and its contact details. To understand the nature of the plan and any associated risks, practitioners must contact the responsible local authority directly, using the contact details displayed on the CP-IS record.

ELFT works across six local authorities spanning two integrated care board areas (NHS North East London and NHS Central East (Bedford, Central Bedfordshire and Luton). Each local authority has its own referral routes, contact arrangements and information-sharing processes, and these operate differently. Practitioners should follow the process for the responsible local authority shown on the CP-IS record, rather than assuming a single Trust-wide route.

- Use the Emergency Duty telephone number for urgent contact outside office hours, and the office-hours number for routine follow-up. Both, where provided, are displayed on the CP-IS record.
- Where the responsible local authority is outside the Trust's six areas (an out-of-area child), make contact using the local authority details shown on CP-IS.
- Record the date of contact, who was spoken to, the information shared or requested, and the

outcome, in the patient's electronic record.

- Where the local authority's process is unclear, or there is any uncertainty about whether a referral is required, seek advice from the local Named Professional for Safeguarding Children or the Trust safeguarding team.
- Information may be shared with, or requested from, the local authority without consent where this is necessary to safeguard or promote the welfare of a child, in line with statutory duties and the Data Protection Act 2018.

[A directory of contact details for the Trust's six local authority areas is maintained locally and should be read alongside this SOP.]