

# Brighton & Hove Local Safeguarding Children Board: A Guide to Information Sharing

November 2015

**Keeping  
Children Safe  
is Everyone's  
Responsibility**



Brighton & Hove  
**LSCB**  
local safeguarding  
children board



## The 7 Golden Rules to Sharing Information

1. The Data Protection Act 1998 and human rights law are **not barriers** to justified information sharing. They provide a framework to ensure that personal information about living individuals is shared appropriately.
2. Be **open and honest** with the individual (and/or their family where appropriate) from the outset about why, what, how and with whom information will, or could be shared, and seek their agreement, unless it is unsafe or inappropriate to do so.
3. **Seek advice** from other practitioners if you are in any **doubt** about sharing the information concerned, without disclosing the identity of the individual where possible.
4. Share with **informed consent** where appropriate and, where possible, respect the wishes of those who do not consent to share confidential information. **You may still share information without consent** if, in your judgement, there is good reason to do so, such as where **safety may be at risk**. Base your judgement on the facts.
5. Consider safety and well-being: **Base your information sharing decisions on considerations of the safety and well-being** of the individual and others who may be affected by their actions.
6. **Necessary, proportionate, relevant, adequate, accurate, timely and secure**: Ensure that the information you share is necessary for the purpose for which you are sharing it, shared only with those individuals who need to have it, is accurate and up-to-date, shared in a timely fashion, and shared securely.
7. **Keep a record of your decision** and the reasons for it – whether it is to share information or not. If you decide to share, then record what you have shared, with whom and for what purpose.

## The 7 Caldicott Principals:

1. **Justify the purpose(s)** Every proposed use or transfer of personal confidential data within or from an organisation should be clearly defined, scrutinised and documented, with continuing uses regularly reviewed, by an appropriate guardian.
2. **Don't use personal confidential data unless it is absolutely necessary** Personal confidential data should not be included unless it is essential for the specified purpose(s) of that flow. The need for patients to be identified should be considered at each stage of satisfying the purpose(s)
3. **Use the minimum necessary personal confidential data** Where use of personal confidential data is considered to be essential, the inclusion of each individual item of data should be considered and justified so that the minimum amount of personal confidential data transferred or accessible as is necessary for a given function to be carried out
4. **Access to personal confidential data should be on a strict need-to-know basis** Only those individuals who need access to personal confidential data should have access to it, and they should only have access to the data items that they need to see. This may mean introducing access controls or splitting data flows where one data flow is used for several purposes
5. **Everyone with access to personal confidential data should be aware of their responsibilities** Action should be taken to ensure that those handling personal confidential data – both clinical and non-clinical staff – are made fully aware of their responsibilities and obligations to respect patient confidentiality.
6. **Comply with the law** Every use of personal confidential data must be lawful. Someone in each organisation handling personal confidential data should be responsible for ensuring that the organisation complies with legal requirements.
7. **The duty to share information can be as important as the duty to protect patient confidentiality** Health and social care professionals should have the confidence to share information in the best interests of their patients within the framework set out by these principles. They should be supported by the policies of their employers, regulators and professional bodies

# Contents

<b>The Seven Golden Rules to Sharing Information</b>	<b>Page 2</b>
<b>Caldicott Principals</b>	<b>Page 2</b>
<b>Brighton &amp; Hove Local Safeguarding Children Board's commitment to good practice information sharing</b>	<b>Page 4</b>
<b>Limits of this Guidance</b>	<b>Page 4</b>
<b>Learning from Local Case Reviews</b>	<b>Page 5</b>
<b>The Legal Basis for Information Sharing</b>	<b>Page 6</b>
<b>Deciding to share personal information</b>	<b>Page 7</b>
<b>Child Protection and sharing information</b>	<b>Page 8</b>
<b>Confidentiality</b>	<b>Page 9</b>
<b>Consent:</b>	<b>Page 10</b>
Whose consent should be sought?	
Parental Responsibility & Consent	
Mental Capacity Act	
Sharing information without consent	
Public Interest	
<b>Quick Guide: When to share information</b>	<b>Page 14</b>
<b>Principles of Information Sharing</b>	<b>Page 15</b>
Necessary and proportionate	
Relevant	
Adequate	
Accurate	
Timely	
Secure	
Record	
<b>Information Standards</b>	<b>Page 16</b>
<b>Information Sharing and IT</b>	<b>Page 16</b>
<b>Recording Information Sharing Decisions</b>	<b>Page 16</b>
<b>Unplanned Conversations</b>	<b>Page 17</b>
<b>Security of shared information</b>	<b>Page 17</b>
<b>Retention of shared information</b>	<b>Page 18</b>
<b>Access to personal information &amp; Freedom of Information Act</b>	<b>Page 18</b>
<b>Guidance related to Information Sharing</b>	<b>Page 19</b>

# Brighton & Hove Local Safeguarding Children Board's commitment to good practice information sharing

Brighton & Hove LSCB is made up of statutory and voluntary partners, representatives from Health, Children's Services, Police, Probation, the Community and Voluntary Sector as well as Lay Members. Our main role is to coordinate what is done locally to protect and promote the welfare of children and young people in the city and to monitor the effectiveness of those arrangements to ensure better outcomes for children and young people.

The best outcomes for children and young people, including keeping them safe, comes from good multi-agency working and communication.

This guidance draws upon the guidance issued by the Department for Education, Pan Sussex Procedures: Further Information to Inform Decision Making and the Information Commissioner's Office and has been developed following Case Reviews commissioned by the Board which have highlighted a number of challenges for practitioners when it comes to sharing information, see **Learning from Local Case Reviews**.

It is important for professionals to trust their feelings when they perceive children to be suffering, and not make assumptions that others have also perceived it and are better placed to act. It is simpler to lift the telephone than to live with the regret of not having done so.

**Serious Case Review:  
Baby Peter, Haringey 2009**

**Professor Munro's review of child protection concluded the need to move towards a child protection system where we place greater trust in, and responsibility on, skilled practitioners at the frontline**

Brighton & Hove LSCB needs all professionals to both understand and feel confident to strike the delicate balance between preserving confidentiality and the imperative to share information when this may help to keep children safe from harm.

**This guidance is written primarily to support professionals understand responsibilities for legal and good information sharing.**

## Limits of this Information Sharing Guidance

This Protocol does not apply to actions taken within the Multi-Agency Safeguarding Hub (MASH). The MASH has its own Information Sharing Protocol covering its internal business.

With regard to fabricated and induced illness professionals need to follow local procedures and information sharing will need to be discussed on a case by case basis.

Operation Kite is a Sussex Police initiative around the reporting and identification of children and young people who may be at risk of Child Sexual Exploitation. Red Operation Kite cases are those children which have been assessed as at high risk of CSE within the City. This protocol does not apply to the actions taken by this multiagency group.

# Learning from Local Case Reviews

A key factor identified in many serious case reviews (SCRs) has been a failure by practitioners to record information, to share it, to understand its significance and to take appropriate action. ([Information sharing Advice for practitioners providing safeguarding services to children, young people, parents and carers](#) March 2015)

## Child J

Child J was 18 years old at time of death but had contact with a number of services over a couple of years, and did not want information about his drug use shared with family and other professionals as he was worried about the impact on his career plans. J's review encouraged professionals to be more assertive in their challenges to young people about what information needs to be shared with parents & other professionals when planning support or interventions for the child.

**A safe multi-agency child protection system is one where professionals are able to share information in order to work together to achieve the best outcomes for young people.**

## Baby Liam

Baby Liam's review showed us that whilst there are benefits of casual sharing of information between professionals in Brighton & Hove who are co-located it can bring associated risks if they do not share all the relevant information nor regularly record the information in the appropriate case records.

**A safe multi-agency child protection system requires that all information which impacts upon the care plan for children & families is recorded in appropriate records so it is explicit to any professional who picks up the notes how decisions were made and what action was taken.**

## Ben

In the course of Ben's review it became evident that when completing routine assessments, agencies relied almost entirely on information supplied by the young person and their family, (Ben was not a Child in Need of Protection). Consent to obtain information from other agencies was rarely sought.

As a consequence, professionals were working with Ben without knowing the full picture. Without knowledge of all the information available we can predict that there's a high chance significant information held by other agencies will be overlooked.

In addition, the assessment will not fully assess the strengths and risks when planning support or interventions for the child

**A safe system for assessment requires the bringing together and sharing of all the information available, in order that decision making can be based on the most accurate picture possible of the needs and preferences of the child or young person.**

**When working with teenagers like Ben, professionals have the extra challenge of balancing the wishes of the young person and their right to confidentiality with the need for parents have some information, so that they can be a protective factor.**

## Legal basis for information sharing within this guidance

If you are asked to or wish to share information about a child, you need to have a good reason or legitimate purpose to share information. This will be relevant to whether the sharing is lawful in a number of ways.

All organisations are subject to a variety of legal, statutory and other guidance in relation to the sharing of person-identifiable or anonymised data. Whether you work for a statutory service or within the private or voluntary sector, any sharing of information must comply with the law relating to confidentiality, data protection and human rights. Establishing a legitimate purpose for sharing information is an important part of meeting those requirements.

Some key organisations have a duty under [section 11 of the Children Act 2004](#) to have arrangements in place to safeguard and promote the welfare of children. These include the local authority, NHS England, clinical commissioning groups, NHS Trusts, the local policing body, National Probation Service and Community Rehabilitation Companies<sup>1</sup>, youth offending team and bodies within the education and /or voluntary sectors, and any individual to the extent that they are providing services in pursuance of [section 74 of the Education and Skills Act 2008](#).

There are also a number of other similar duties which apply to other organisations. For example, [section 175 of the Education Act 2002](#) which applies to local authority education functions and to governing bodies of maintained schools and further education institutions.

The key legislation affecting the sharing and disclosure of data includes (this is not necessarily an exhaustive list):

- The [Mental Health Act 1983](#)
- The [Access to Health Records Act 1990](#)
- The [Data Protection Act 1998](#)
- The [Human Rights Act 1998](#)
- The [Local Government Act 2000](#)
- The [Education Act 2002](#)
- The [Freedom of Information Act 2000](#)
- The [Criminal Justice Act 2003](#)
- The [Children Act 2004](#)
- The [Mental Capacity Act 2005](#)
- The [Health and Social Care Act 2012](#)
- The Common Law Duty of Confidentiality

Different agencies may have different standards for sharing information. You will need to be guided by your agency's policies and procedures, any local information sharing protocols, and - where applicable - by your professional code



Brighton & Hove LSCB play a role in supporting information sharing between and within organisations and addressing any barriers to information sharing. This includes ensuring that a culture of appropriate information sharing is developed and supported as necessary by [multi-agency training](#).

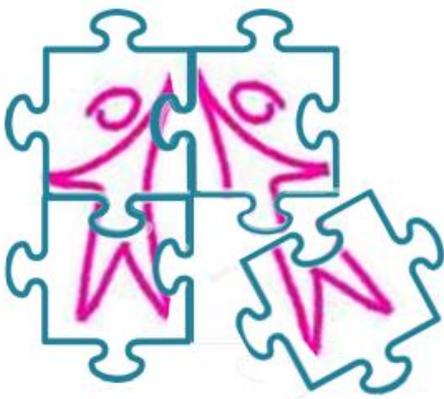
<sup>1</sup> The duty under section 11 of the Children Act 2004 will apply to Community Rehabilitation Companies via contractual arrangements entered into by these bodies with the Secretary of State under Section 3 of the Offender Management Act 2007

## Deciding to share personal information

Sharing information is an intrinsic part of any frontline practitioners' job when working with children and young people. A decision by a practitioner to share sensitive, personal information about an individual service user with colleagues needs to be made in full awareness of the implications.

Remember, you are **not alone** in making a decision to share information; your line manager and/or Safeguarding Children Advisor/lead should always be available to support you. Brighton & Hove LSCB has a solid commitment to information sharing and you should have confidence in the continued support of your organisation where you have used your professional judgement and shared information professionally.

There may be cases where you will be justified in sharing limited confidential information in order to make decisions on sharing further information or taking action – the information shared should be **necessary** for the purpose and be **proportionate** (see **Principals**) .



Think of the piece of information you hold as representing part of a jigsaw puzzle; the degree of its significance may only be clear to another worker with a fuller picture of the background and concerns for this child.

Your organisation will support you if you can demonstrate your approach was **proportionate** in the circumstances.

**If you are in any doubt about whether to share information seek advice.**

**No review into multi- agency working has ever criticised practitioners for sharing too much information regarding child protection concerns. The reverse is the case, often with potentially devastating consequences for the child, but also for the practitioner.**

**Don't assume that someone else will pass on information which may be critical to keeping a child safe.**

Peter was seen with Ms A by his GP on 26<sup>th</sup> July 2007\*. The GP has said subsequently that he had considerable misgivings about Peter's appearance and demeanour at that appointment. He felt Peter was in "a sorry state". However, he did not take any action to alert others to his concern. He assumed that others would have similar concerns and would be in a better position to take action...

**Serious Case Review: Baby Peter, Haringey 2009**  
(\*this is a week before his death, three days before legal advice concluded there were insufficient grounds for care proceedings at that time)

## Child Protection & sharing information

The support and protection of children cannot be achieved by a single agency. Every service has to play its part. All staff must have placed upon them the clear expectation that their primary responsibility is to the child and his or her family. **Lord Laming in the Victoria Climbié Inquiry Report, January 2003**

Whilst the **Data Protection Act 1998** places duties on organisations and individuals to process personal information fairly and lawfully, it is **not a barrier to sharing information** where the failure to do so would result in a child or vulnerable adult being placed at risk of harm.

Similarly, human rights concerns, such as respecting the right to a private and family life would not prevent sharing where there are real safeguarding concerns.

You should be alert to the signs and triggers of child abuse and neglect.<sup>2</sup> Abuse (emotional, physical and sexual) and neglect can present in many different forms. Indicators of abuse and neglect may be difficult to spot<sup>3</sup>

If you have concerns about a child's welfare, or believe they are at risk of harm, you should share the information with Children's Services via the Multi-agency Safeguarding Children's Hub, NSPCC and/or the police, in line with local procedures. Security of information sharing must always be considered and should be **proportionate** to the sensitivity of the information and the circumstances. If it is thought that a crime has been committed and/or a child is at immediate risk, you should notify the police without delay.

A finding from a Brighton & Hove LSCB Serious Case Review (Baby Liam) involving a 7 week old baby who sustained serious head concerned the need for professionals to consistently share information with midwifery and health visiting colleagues to enable them to make effective risk assessments. Clearly where there are child protection concerns this should be done as a matter of course under child protection procedures, with consent where possible. Where families are known to us on a child in need or early help basis, information should be shared with parental consent. If families refuse consent we should be questioning why this is and incorporating this into our own risk assessment.  
**Head of Safeguarding, Children's Services.**

This SCR (Daniel Pelka) has identified concerns relating to information sharing and communications between professionals working across a range of agencies – teachers, social workers, health professionals, police. One consequence of not sharing information was that nobody had a complete picture of Daniel's life, but nobody knew the extent of the physical abuse Daniel had suffered until after his death.  
**Daniel Pelka, Coventry Safeguarding Children Board**

**Where information being considered relates to clear child protection concerns you should be in no doubt that there are no insurmountable legal barriers to sharing information appropriately, and a demonstrably proportionate sharing of information can be justified as being in the public interest.**

<sup>2</sup> [What to do if you're worried a child is being abused?](#) March 2015

<sup>3</sup> For a summary of potential signs and symptoms of abuse visit the LSCB website:  
[www.brightonandhovelscb.org.uk/professionals/prof\\_signs/](http://www.brightonandhovelscb.org.uk/professionals/prof_signs/)

# Confidentiality

The law says: Personal information shall be processed fairly. The processing won't be fair unless the person has, is provided with, or has readily available:

- information about your identity and that of the organisation that will process the information
- information about the purpose the information will be processed for, and
- any other information necessary to enable the processing to be fair.

Confidential information is:

- Personal information of a private or sensitive nature; and
- Information that is not already lawfully in the public domain or readily available from another public source; and
- Information that has been shared in circumstances where the person giving information could reasonably expect that it would not be shared with others.

## Circumstances that are relevant to confidentiality

1. **a formal confidential relationship exists**, as between a doctor and patient, or between a social worker, counsellor or lawyer and their client. It is generally accepted that information shared in this case is provided in confidence. In these circumstances, all information provided by the individual needs to be treated as confidential. This is regardless of whether or not the information is directly relevant to the medical, social care or personal matter that is the main reason for the relationship.
2. **an informal conversation**, where a pupil may tell a teacher a whole range of information but only asks the teacher to treat some specific information as confidential. In this circumstance, only the information specific to the pupil's request would be considered to be confidential
3. **circumstances where information not generally regarded as confidential** (such as name and address) may be provided in the expectation of confidentiality and therefore should be considered to be confidential information

People may not specifically ask you to keep information confidential when they discuss their own issues or pass on information about others, but may assume that personal information will be treated as confidential. In these situations you should check with the individual whether the information is or is not confidential, the limits around confidentiality and under what circumstances information may or may not be shared with others.



Confidence is only breached where the sharing of confidential information is not authorised by the person who provided it or, if about another person, by the person to whom it relates



If the information was provided on the understanding that it would be shared with a limited range of people or for limited purposes, then sharing in accordance with that understanding will not be a breach of confidence.

### Talking about confidentiality with service users

Service users will have questions about how information about them is being managed, or may object to information being shared. You should always engage with such matters head on, always discuss them any concerns in supervision, seek guidance from your manager and, where it is appropriate, offer specific meetings to seek to resolve the issue. Where the issue becomes a formal complaint your agency will have processes to follow.

## Consent:

Obtaining **explicit consent** for information sharing is best practice and ideally should be obtained at the start of the involvement, when working with the individual or family to agree what support is required. It can be expressed either verbally or in writing, although written consent is preferable since that reduces the scope for subsequent dispute.

**Individuals have the right to withdraw consent at any time**

Consent must be **'informed'** - this means that the person giving consent needs to understand why information needs to be shared, what will be shared, who will see their information, the purpose to which it will be put and the implications of sharing that information.

**Consent must not be secured through coercion,** or inferred from a lack of response to a request for consent

**Setting out clearly your agency's policy on sharing information to children and families, when they first access the service is good practice**

**Implicit consent** can also be valid in many circumstances. Consent can legitimately be implied if the context is such that information sharing is intrinsic to the activity or service, and especially if that has been explained or agreed at the outset. e.g. GP refers a patient to a hospital specialist, patient agrees to referral; in this situation GP can assume patient has given implicit consent to share information with hospital specialist.

If there is a **significant change** in the use to which the information will be put compared to that which has previously been explained, or a **change in the relationship** between the agency and the individual, consent should be sought again.

## Whose consent should be sought?

Where there is a duty of confidence it is owed to a person who has provided the information on the understanding it is to be kept confidential. It is also owed to the person to whom the information relates, if different from the information provider.

It may be that information about a service user or their family is shared by a family friend or close relative and they may not have consent share this. It will be important to ensure that all parties are aware of the limits around confidentiality and under what circumstances information may or may not be shared with others. That said, information of this nature may support effective safeguarding.

## Children / Young People & Consent

A child or young person who has the capacity to understand and make their own decisions may give (or refuse) consent to sharing. Children aged 12 or over may generally be expected to have sufficient understanding. (This is presumed in law for young people aged 16 or 17.) Younger children may also have sufficient understanding. Where applicable, you should use their preferred mode of communication.

### Some helpful criteria.....

..... When assessing whether a particular child on a particular occasion has sufficient understanding to consent, or refuse consent, to sharing of information about them, consider:



- Can the child understand the question being asked of them?
- Does the child have a reasonable understanding of:
- What information might be shared?
- The main reason or reasons for sharing the information?
- The implications of sharing that information, and of not sharing it?



### Can the child:



- Appreciate and consider the alternative courses of action open to them?
- Weigh up one aspect of the situation against another?
- Express a clear personal view on the matter, as distinct from repeating what someone else thinks they should do?
- Be reasonably consistent in their view on the matter, or are they constantly changing their mind?

**If the child / young person does choose to share information with you, be sure to act on it.**

If professionals do not appreciate that young people do not easily choose to share information with them, they may fail to give sufficient credence to those occasions when information is shared and risk missing opportunities to explore what other information may be held within the peer group. Furthermore, professionals may be in danger of sending out mixed messages to young people, on the one hand asking young people to share concerns but then seemingly not acting upon such intelligence

**Ben: Learning Review**

## Parental Responsibility & Consent

In most cases, where a child cannot consent or where you have judged that they are not competent to consent, a person with [Parental Responsibility](#) should be asked to consent on behalf of the child. **If a child is judged not to have the capacity to make decisions, their views should still be sought as far as possible**

Where parental consent is required, the consent of one such person is sufficient.

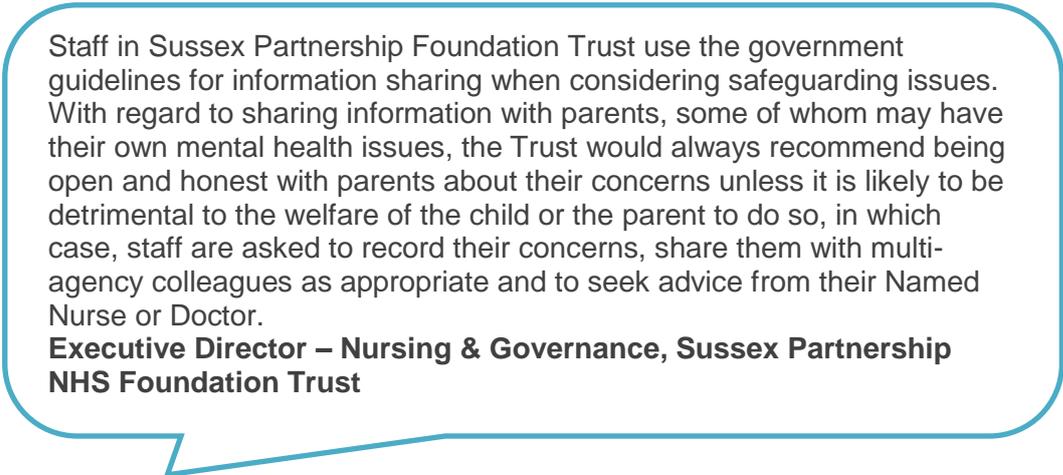
In situations where family members are in conflict you will need to consider carefully whose consent should be sought. If the parents are separated, **the consent of the parent with whom the child resides would usually be sought**. If the child is subject to a [Care Order](#), practitioners should liaise with the relevant local authority about questions of consent.

You should try to work with all involved to reach an agreement or understanding of the information to be shared. You must always act in accordance with your professional code of practice where there is one and **consider the safety and wellbeing of the child, even where that means overriding refusal to consent**.



**If you judge a child to be competent to give consent, then their consent or refusal to consent is the one to consider even if a parent or carer disagrees.**

**You can seek advice from your manager or nominated safeguarding adviser if you are unsure.**



Staff in Sussex Partnership Foundation Trust use the government guidelines for information sharing when considering safeguarding issues. With regard to sharing information with parents, some of whom may have their own mental health issues, the Trust would always recommend being open and honest with parents about their concerns unless it is likely to be detrimental to the welfare of the child or the parent to do so, in which case, staff are asked to record their concerns, share them with multi-agency colleagues as appropriate and to seek advice from their Named Nurse or Doctor.

**Executive Director – Nursing & Governance, Sussex Partnership NHS Foundation Trust**

## Mental Capacity Act

This provides the legal framework for assessing capacity and making best interests decisions on behalf of people aged 16 yrs and older who lack the mental capacity to make particular decision(s) for themselves. There are key principles which include the need to provide all possible support to enable the person to make the specific decision(s), and that any best Interest decision must consider the less restrictive impact on the person's rights and freedom of action. The Act also includes provisions for people to plan ahead for a time when they may lack capacity in the future. The Act is supported by the [Code of Practice](#), which has statutory force. Chapter 12 of the Code describes the relevance of the Act to children and young people, and Chapter 16 provides guidance on access to information. The [SCIE MCA Directory](#) provides further guidance and publications.

## Sharing information without consent

A recent review in Brighton & Hove highlighted that there is confusion about when information can, and should, be shared without consent.

You do not necessarily need the consent of the information subject to share their personal information. Wherever possible, you should seek consent or be open and honest with the individual (and/or their family, where appropriate) from the outset as to why, what, how and with whom, their information will be shared.

Staff struggle to raise the issues of obtaining consent to share information **when the case is not in the child protection arena**  
**Ben, Brighton & Hove LSCB Learning Review**

**When there is evidence or reasonable cause to believe that a child is suffering, or is at risk of suffering, significant harm, or information relates to the prevention of significant harm to a child or serious harm to an adult (including through the prevention, detection and prosecution of serious crime), then sharing confidential information without consent will almost certainly be justified on the basis that it is in the public interest.**

This might be the case where a failure to share information about a parent's lifestyle could put a child at risk.

Of course it is not possible to give guidance to cover every circumstance in which sharing of confidential information without consent will be justified. You must make a **professional judgement** on the facts of the individual case. In many criminal justice contexts it is not feasible to get consent, because doing so may prejudice a particular investigation. However, you should be prepared to be open with the public about the sorts of circumstances in which you may share information without their knowledge or consent.

As you have already read, eliciting the views of children and parents is important and represents good practice, however, even if consent is refused, that does not automatically preclude you from sharing confidential information.

There will be circumstances where you should **not seek consent** from the individual or their family, or inform them that the information will be shared, for example where to do so would:

- Place a child at increased risk of Significant Harm; or
- Place an adult at risk of serious harm; or
- Prejudice the prevention, detection or prosecution of a serious crime (i.e. a crime involving Significant Harm to a child or serious harm to an adult); or
- Lead to unjustified delay in making enquiries about allegations of Significant Harm to a child or serious harm to an adult.

### Public Interest

There are also public interests, which in some circumstances may weigh against sharing, including the public interest in **maintaining public confidence in the confidentiality of certain services**.

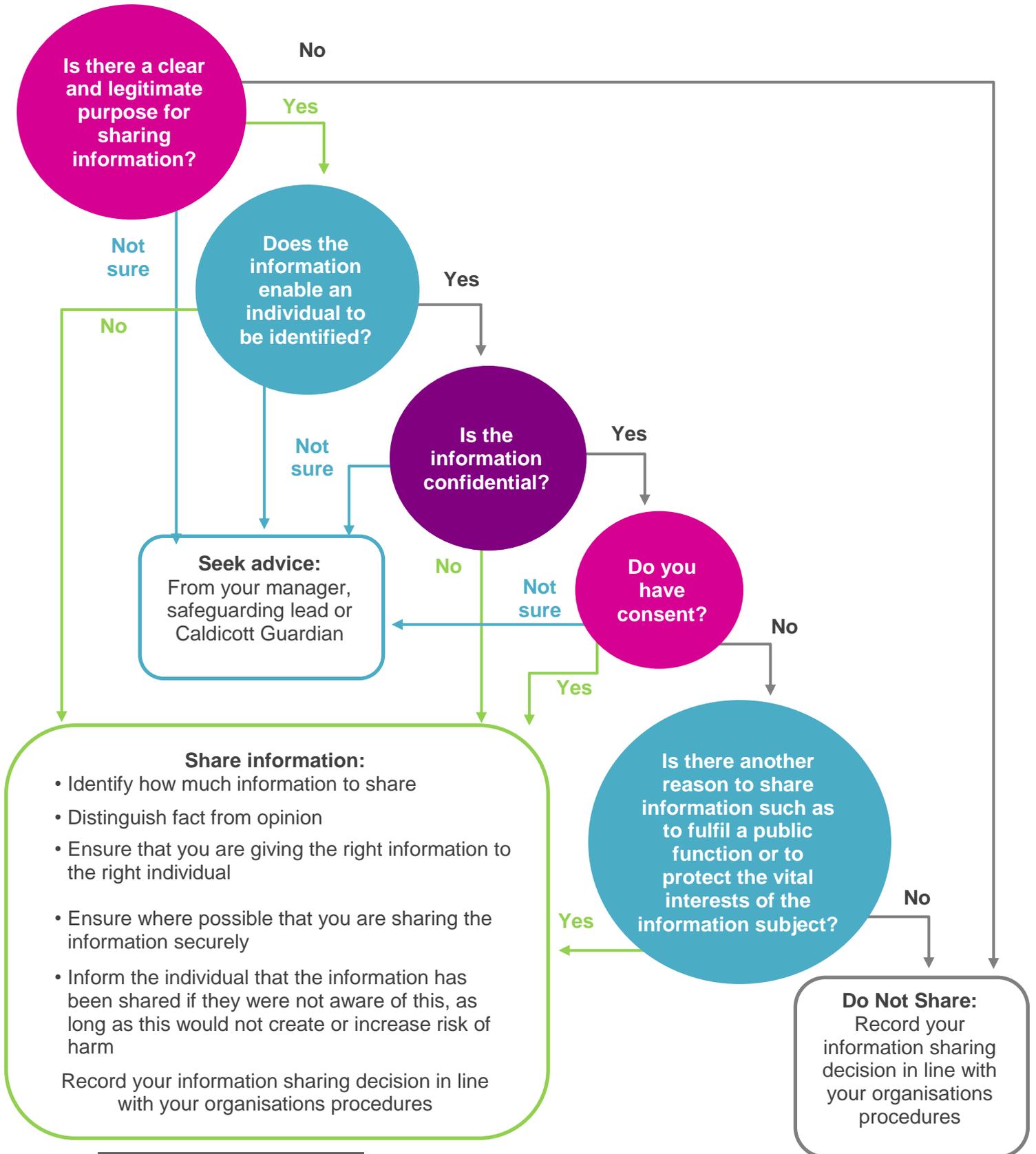
As already outlined in this guidance, there will be cases where sharing limited information without consent is justified to enable you to reach an informed decision about whether further information should be shared or action should be taken. Remember information shared should be **necessary** for the purpose and **proportionate**.

When deciding whether the public interest justifies disclosing confidential information without consent, you should be able to seek advice from your line manager or a designated safeguarding professional.

If you are working in the NHS or a local authority the **Caldicott Guardian** may be helpful (see [Caldicott Guardian](#)). Advice can also be sought from Named Professional/ Safeguarding Leads in individual agencies.

# Quick Guide: When to share information<sup>4</sup>

When asked to share information, you should consider the following questions to help you decide if and when to share. If the decision is taken to share, you should consider how best to effectively share the information.



<sup>4</sup> [Information Sharing: Advice for practitioners providing safeguarding services](#) March 2015

# Principles of Information Sharing<sup>5</sup>

These principles are intended to help you share information between organisations. You should use your judgement when making decisions on what information to share and when and should follow organisation procedures or consult with their manager if in doubt.



## Necessary and proportionate

When taking decisions about what information to share, you should consider how much information you need to release. The Data Protection Act 1998 requires you to consider the impact of disclosing information on the information subject and any third parties. Any information shared must be proportionate to the need and level of risk.

## Relevant

Only information that is relevant to the purposes should be shared with those who need it. This allows others to do their job effectively and make sound decisions.

## Adequate

Information should be adequate for its purpose. Information should be of the right quality to ensure that it can be understood and relied upon.

## Accurate

Information should be accurate and up to date and should clearly distinguish between fact and opinion. If the information is historical then this should be explained.

## Timely

Information should be shared in a timely fashion to reduce the risk of harm. Timeliness is key in emergency situations and it may not be appropriate to seek consent for information sharing if it could cause delays and therefore harm to a child.

## Secure

Wherever possible, information should be shared in an appropriate, secure way. You must always follow your organisation's policy on security for handling personal information.

## Record

Information sharing decisions should be recorded whether or not the decision is taken to share. If the decision is to share, reasons should be cited including what information has been shared and with whom, in line with organisational procedures. If the decision is not to share, it is good practice to record the reasons for this decision and discuss them with the requester. In line with each organisation's own retention policy, the information should not be kept any longer than is necessary. In some circumstances this may be indefinitely, but if this is the case there should be a review process.

---

<sup>5</sup> [Information Sharing: Advice for practitioners providing safeguarding services](#) March 2015

# Information Standards – some things to consider

**The law says: Information shall be adequate, relevant, not excessive, accurate and up to date.**

You should check the quality of information before it is shared to minimise the spreading of inaccuracies across information systems. In individual casework, a simple device would be to ask the subject to check the quality of information. This could form part of the consent process.

Be alert to variations in data recording practice. For example, a person's date of birth, or even name, can be recorded in various formats. This can lead to records being mismatched, duplicated or corrupted. Before sharing information you must make sure that the organisations and partners involved have a common way of recording key information.

Having a clearly defined objective will help you to determine what information is necessary to achieve that objective. **You must never share information if it is not necessary to do so.** It is good practice for both practitioners and managers to check every now and then that all the information being shared still meets the criteria. If you have any doubt, practice concerns should always be raised in supervision or with a manager.

If you believe that you have shared inaccurate information, you should first take steps to determine what is accurate. Once content that the information you have is now accurate, you should ensure that it is corrected by others holding it. In cases of continuing disagreement between organisations about the accuracy of a record, the matter should be taken to the appropriate senior manager.

Sharing information is a two way process and it requires both parties to understand each other's use of language or jargon. There must be opportunities to have a conversation to discuss the information being exchanged and to seek clarification about its relevance and importance  
**Keanu Williams SCR**  
**Birmingham Safeguarding Board 2013**

## Information Sharing and IT

Your professional judgment is the most essential aspect of multi-agency work. This could be put at risk if organisations rely too heavily on IT systems. There are also issues around compatibility across organisations along with practitioners who may not have the knowledge/understanding of how to use them. Evidence from the Munro review is clear that IT systems will not be fully effective unless individuals from organisations co-operate around meeting the needs of the individual child.

...but as the recording was not in the required format the information sharing was stopped by a line manager. The recording system procedures in place at the time acted as an obstacle to collaborative working in the interest of the children.  
**Keanu Williams SCR**  
**Birmingham Safeguarding Board 2013**

**Managers should ensure that a record of emerging significant themes around information sharing is kept and passed on up to inform wider learning about information sharing**

## Recording of Information Sharing Decisions

You should record all **information sharing decisions** and the reasons for it whether or not you decide to share information. If the decision is to share, you should record what information was shared & with whom

You should work within your agency's arrangements for recording information and within any local information sharing protocols in place

## Unplanned Conversations

Brighton & Hove LSCB want to make clear its view that **unplanned conversations are good practice** and aid effective and timely safeguarding. It is our view that collaborative multi-agency working is improved by co- location and close working. That said, sharing information on a casual basis that is then not appropriately recorded could be a risk across all agencies.

**Unplanned conversations which result in 'relevant information' being shared must be documented**

For this purpose 'relevant information' means information that is either; new, influences decision making or results in an action. Brighton & Hove LSCB expects clear messages from Senior Management, and for questions to be asked in supervision or management oversight sessions, that reinforce that all significant discussions that influence decision making are recorded.

This Review [Keanu Williams] has noted that there may also be an issue where professionals work in the same building and other staff drop in to see one child but may have another one also placed there. Outside formal meetings informal chats and discussions take place about a particular child which might not be properly recorded and shared. Whilst all work should not be in formal meetings, there are risks in taking decisions in informal 'corridor' chats and supervision and training courses need to alert professionals to the balance between formal and informal practice

**Keanu Williams SCR  
Birmingham Safeguarding Board 2013**

One of the findings from the Baby Liam SCR concerned the need for professionals to ensure that all and any "unplanned" conversations they have regarding a case (for example an informal case discussion in the kitchen with a colleague) are routinely recorded on the child's file, and for managers to remind workers of the need to do this in supervision sessions. Whilst recording information is a routine part of our work, we need to ensure that any adhoc case discussion is also formally recorded so it can contribute to the chronology on a case and form part of the ongoing assessment."

**Head of Safeguarding, Children's Services**

## The security of shared information

**The law says: Personal information shall be protected by appropriate technical & organisational measures.**

Access to personal information should be on a strict need-to-know basis. Only staff who need access to personal identifiable information should have access to it, and they should only have access to the information items that they need to see.

The following rules apply to all staff:

- Personal files must **never** be left unattended or unsupervised. This means that, outside normal working hours, they **must** be locked away in cabinets.
- Codes for accessing computers must **never** be noted in such a way that others can see and use them
- The conveying of information needs to be achieved in a **secure way**.

## The retention of shared information

**The law says: Personal information shall not be kept for longer than is necessary**

Care should be taken that the consent process leaves the service user clear about the length of time their records will be kept by each organisation.

Where there are no specified rules about information retention, professional judgement will need to be exercised. Considerations for judging retention periods include:

- the current and future value of the information for the purpose for which it is held;
- the costs, risks and liabilities associated with retaining the information; and
- the ease or difficulty of making sure the information remains accurate and up to date.

You should familiarise yourself with your agencies own policies and procedures on the retention of information. **The default position will always be to retain information according to your organisations' policy.**

If you archive a record or store it 'off-line' it must still be necessary to hold it and you must be prepared to give subject access to it and comply with the data protection principles. If it is appropriate to delete a record from your live system you should also delete it from any back-up of the information you keep. Organisations sharing bulk information between themselves should have an agreement about what should happen once the need to share the information has passed.

## Access to personal information

It is good practice to identify a single point of contact for people to go to when they want to access their information, and to make people aware of this facility, maybe as part of the consent process.

**The law says: Individuals have a right of access to information about them.**

You will need to familiarise yourself with your organisations own processes. Best practice would be to show service users their records at the point of engagement.

Good records management practice will need to be developed in which each organisation keeps a brief record of where other information is held.

In rare instances, you may feel that it is not in the public interest for a service user to access some information held about them. The rough yardstick for gauging this is to think about the effect that releasing the information would have on the individual or a vulnerable other. In every instance where the right way forward is unclear, further help should be sought in supervision or from a manager and, where appropriate, a legal advisor.

### The Freedom of Information Act

The Freedom of Information Act 2000 and the Freedom of Information (Scotland) Act 2002 gives everyone the right to ask for information held by a public authority, to be told whether the information is held, and, unless exempt, to have a copy of the information. Service users may make requests for information that is partially personal and partially non-personal. For example, a person may request information about them that is being shared between various agencies, and ask for information about those agencies' policies for sharing information. You should refer to your organisation's Freedom of Information publication scheme for further information on how to respond to such requests.

# Guidance related to information sharing

*Working Together to Safeguard Children* [2015] states that:

In addition, the LSCB can require a person or body to comply with a request for information. This can only take place where the information is essential to carrying out LSCB statutory functions. Any request for information about individuals must be 'necessary' and 'proportionate' to the reasons for the request. LSCBs should be mindful of the burden of requests and should explain why the information is needed.

**Chapter 3 Paragraph 22**

HM Government has published guidance which should be read in conjunction with this Protocol.

- Information Sharing: Advice for practitioners providing safeguarding services to children, young people and parents [March 2015].

**Attention is particularly drawn to the “seven golden rules of information sharing” set out in this guidance.**

The Information Commissioner (who is responsible for regulating and enforcing the DPA) has produced a statutory Data Sharing Code of Practice which also offers useful guidance:

- [Data Sharing Code of Practice](#) [May 2011] including a statement of the 8 Data Protection Principles.

The Website of the Information Commissioner’s Office includes information about:

- [The Data Protection Principles](#)
- [The common law duty of confidence](#)
- [Consent](#)

These documents should be considered as useful guidance in respect of the legal principles and of what the law requires with regard to decisions about the sharing of information, but they do not constitute legal advice:

## Useful resources and external organisations

- ICO Data Sharing Code of Practice and checklists
- Centre of Excellence on Information Sharing
- Practice guidance on sharing adult safeguarding information

## Relevant departmental advice and statutory guidance

- Working Together to Safeguard Children (2015)
- Keeping Children Safe in Education (2015)
- What to do if you're worried a child is being abused (2015)

All of our partner agencies are required, as per the Brighton & Hove LSCB Constitution, to ensure that all professionals who come into contact with children understand the purpose of information sharing in order to safeguard and promote the welfare of children. They must be assured that within their agency there is a clear understanding of what information can be shared including how to obtain consent to share information and when information may be shared even though consent has not been obtained.



Brighton & Hove

**LSCB**

local safeguarding  
children board

## Brighton & Hove LSCB

Moulsecoomb North Hub  
Hodshrove Lane  
Brighton  
BN2 4SE

[www.brightonandhovelscb.org](http://www.brightonandhovelscb.org)

01273 292379

@LSCB\_Brighton  
#yourLSCB