INFORMATION AND ADULT SAFEGUARDING: CHALLENGES AND DILEMMAS

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Aim of this seminar...
Data sharing concerns

‘New patient database could undermine trust in NHS, risk analysis concludes’

The system that offered researchers linked primary and secondary care records for the first time is on pause. The hesitation comes after polls suggested that less than half the population had heard of the scheme; and concerns about the security of the data, the process for gaining consent, and data being available to commercial organisations.

...After NHS England sent every household a leaflet that didn’t explicitly mention care-data, the Information Commissioner’s Office said, “We don’t feel that the opt out has been explained as clearly as we expected.”

BMJ 2014;348:g1624 and BMJ 2014;348:g1702
Some sharing is liked

- Sarah’s law – the Child Sex Offender Disclosure Scheme, introduced 2011
- 98% of Registered Sex Offenders’ whereabouts are known
- Managed by Police/ Probation / MAPPA/ Other agencies
- Legislation to deal with R.S.Os who breach requirements
- R.S.O details remain confidential – used by agencies as part of existing safeguarding procedures.
Some sharing was liked then not ...
Turning to adult safeguarding (& children) Home Office 2013 found

- Problems of information sharing, esp IT system(s), access to secure email system.
- Different views of confidentiality esp in NHS.
- Staff turnover and corporate memory loss.
- Lack of shared ownership.
- Social services gets lumbered.

Is this the case here?

- Problems sharing information?
- Different views of confidentiality?
- Information gets lost?
Looking Ahead

The Care Bill is dubbed as the “next big thing” in social care and will be the most comprehensive reform of social care in 60 years. Over the next 18 months, up to 30 pieces of secondary legislation are expected to be developed.
Care Bill

Care Bill will enable patient information to be shared more freely across care settings, including those run by organisations that do not, at the moment, provide data to national bodies.
There will be a stronger focus on sharing information across providers, which will “require more extensive use of information standards, including the NHS Number”
Care Bill specific

- Clause 7 provides a specific duty to co-operate in individual cases. Where a local authority or one of its relevant partners requires the co-operation of the other to obtain information relevant to care and support functions, it could request such information and the local authority or relevant partner must co-operate in providing the information, unless doing so would be unlawful or have an adverse effect on its functions. Hansard source (Citation: Care Bill [Lords] Deb, 14 January 2014, c94)
Care Bill requirements

• SABs will be given very wide powers under the Care Act to request any person to supply information to it about any case. In particular it will be able to use these powers to request care homes and homecare providers to submit detailed reports and produce care records and other relevant documents to it as part of an on-going abuse or neglect enquiry.
Summary: Principles remain

• Share information on need to know basis
• Don’t confuse confidentiality with secrecy
• Obtain informed consent – know when to override
• Don’t give false assurances of confidentiality

See SCIE Protection adults at risk – good practice guide 2012
Other principles remain

- Data Protection Act 1998
- Criminal Justice Act 2003
- Crime and Disorder Act 1998
- Human Rights Act 1998
- Mental Capacity Act 2005
- NHS Act 2006
- And common law duty of confidentiality

- What do I need to know?
- Who can I get advice from?
Key practice points

• What to do when consent is refused?

• What is best way to ensure consent?
Example: Sharing in the public interest

The OPG will share information with professional and regulatory bodies where it considers it is in the public interest. This includes the Solicitors Regulation Authority, the Disclosure and Barring Service, the Care Quality Commission (England)

OPG safeguarding policy 2013 p19
Any lessons from Serious Case Reviews?
Can’t share info if it’s not there!

- ‘when the police seized (residents’) records they noted they were in various different places in the home
- ‘for most of (month) there is not evidence of any record of his care apart from the need for him to temporarily move rooms because of some maintenance work’
Problems sharing info

- The paramedics should have made a safeguarding alert. The lack of a fax machine and problems getting thought to social services emergency numbers meant they did not.
Too many/few systems

- Three recording systems in Trust – DNs, falls and GPs.
- Over reliance on post.
- Medication signings missing.
- Poor recording.
- Poor reviews not picking this up.
- Nor regulators.
Emerging messages from Making Safeguarding Personal

- Need to engage with IT systems to capture desired outcomes
- Amend or new systems?
- Voice of Adult @ Risk in recording
- How to aggregate?
Example of sharing in meetings

This meeting is held under the London multi-agency policy and procedures to safeguard adults at risk. All matters presented are confidential to the individuals attending and the agencies they represent. The record of the meeting is distributed on the strict understanding that it will be kept confidential and stored securely. In some circumstances it may be necessary to make the record of this meeting available to other agencies not directly involved (e.g. the civil and criminal courts). Attendees and the agencies they represent should seek the advice of the chair of the meeting if they wish to share the record with others.
SCIE’s 9 principles about good information

• Involve people
• Be available
• Clear comprehensive & impartial
• Consistent, accurate & up to date
• Meet quality standards
• Based on local needs analysis
• Commission info/advice
• Useful for future planning
• Avoid reinventing wheel
End talking points

• What am I best at in keeping records?
• Whose record keeping do I rely on?
• If I could do three things to improve information sharing what would they be?
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