

Information sharing protocol in First Response and children's social care teams

Contact or referrals for children in need /SECTION 17

1) Contact received

First question – Does the parent know the contact has been made, has the referrer sought consent from the parent to share the information with CYPS

Yes? – We record this in addition to it being captured on the referral form received

No? – Screening SWs advise the referrer they must go back, seek consent, and advise that they will be sharing information

Exceptions where consent cannot be obtained at the contact point: Some Police notifications/anonymous referrals/NSPCC or other third party

- 2) Screening team, with regard to the above (i.e. exceptions) will attempt to contact the parent and advise that information in the form of a concern or a request for assessment has been shared with this Department. A discussion is then held with the parent about sharing and receiving information from partner agencies in a proportionate way in order to understand the level of concern and what the appropriate support/intervention should be.
- 3) If consent is given – MASH process to be considered or proportionate checks undertaken via the gathering information episode.
- 4) If no consent for sharing information is obtained/or it is refused the contact is sent straight to the team on duty as a referral for action – if threshold for a social care assessment is met. If not met, NFA and request for referrer to complete a CAF – if a professional.
- 5) Initial/Core assessments – a visit occurs and consent is obtained from the parents for information to be shared across the partnership. This consent must be recorded clearly on the case file.
- 6) If consent is refused at this point, the duty social worker and manager will revert to the referrer for a discussion about how we can proceed.

Children where there are concerns of risk of harm /SECTION 47

- 7) If there is concern that a child has suffered or is likely to suffer significant harm, a section 47 enquiry will be considered
- 8) The reasons for the section 47 decision must be clearly evidenced by the manager in case notes at the time of making the decision

- 9) The initial strategy discussion must consider and clearly record the issue of consent with partner agencies, including the police, as to whether it is safe to seek consent to share information from the parent and to seek the consent of the parent to speak with the child. In some urgent and exceptional circumstances, it will be necessary to consider whether a) to see the child without consent of the parent b) to share information connected with safeguarding concerns without consent across the partnership.
- 10) The strategy episode must be completed before any actions are taken
- 11) If the child is seen without parental consent, the decision to do so and the reasons must be clearly recorded in the strategy discussion document.
- 12) Wherever possible, consent to share information must be sought from parents from the outset of the section 47. In most cases consent to share information will be sought.
- 13) If, as part of the strategy discussion, it is agreed that consent should not be sought as this may further place the child at risk, this must be clearly recorded and reasons given – again, by the chair, at the time.
- 14) Section 47s where consent has been obtained must go through the MASH process
- 15) Section 47s where the strategy discussion has agreed consent should not be sought or can be set aside in the interests of safeguarding a child should then go through the MASH process.

GUIDANCE

Managers must record explicitly, at every stage, the reasoning behind their decision-making in order that there is clear evidence about why information has been shared. Alongside this should be a record of who they discussed this with and what information they took into account in making that decision.

This is especially important when the level of risk has been assessed as one where the seeking of consent to share information can be put aside in the interests of safeguarding a child. This is the balancing act of competing rights – all decision making must take in to account article 6 and 8 rights.

Social workers must clearly record that consent has been obtained from the parent as part of the assessment process. Where consent has not been obtained this must be also be clearly recorded. Refusal of consent to share information does not in itself indicate an elevation of risk. Where there is a refusal of consent to seek or share information and the threshold for social care assessment is met, a balanced and

proportionate consideration of known factors, with the referrer, will assist in determining how to proceed.

The Pan London Procedures detail the complexity of information sharing issues at Section 3 of the fourth Edition. Paragraph 3.3.9; in the section headed Public Interest and Proportionality in respect of sharing information) that professionals must record the contexts in which the information is shared, the perceived levels of risk of harm at the time, the data requested, the data shared and with whom.

It further states (in paragraph 3.3.22;) that 'if there is significant change in the use to which the information will be put to that which has previously been explained, or in the relationship between the agency and the individual, consent should be sought again'. Social workers need to be clear with the parent at the point at which they are seeking consent - about what information they intend to seek and share with other professionals.

End.

Web link to Pan London Child Protection Procedures as updated 13/3/2013

http://www.londonscb.gov.uk/files/2010/procedures/full_amended_13_apr.pdf