



**Scottish Accord on the  
Sharing of Personal Information**



Fife Child Protection  
Committee

getting  
it right  
for every child

**Information Sharing Protocol for**

**FIFE CHILDRENS' SERVICE**

**Version 1.0**



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**Appendix 1 – Information Commissioner’s Office**

**Information Sharing Between Services in Respect of Children and Young People – 28<sup>th</sup> March 2013**

## Part A – Introduction to this ISP

### **1 Scope and purpose of this ISP**

- 1.1 This Information Sharing Protocol (ISP) is supplementary to the Scottish Accord on the Sharing of Personal Information (SASPI), and has been agreed between the participating partner organisations. Partners have given consideration to its contents when drawing up this document.
- 1.2 This ISP has been prepared to support the regular sharing of personal information between Partners regarding children and families 'in need', 'at risk', requiring protection from harm and children/young people having the right help in place to support his or her development and wellbeing.
- 1.3 It supports the information sharing partner organisations involved and the groups of Service Users and associated adults it impacts upon. It details the specific purposes for sharing and the personal information being shared, the required operational procedures, consent processes, and legal justification.
- 1.4 The aim of this protocol is to:
  - Facilitate the exchange of information between partners in order to strengthen the processes for safeguarding and promoting the welfare and wellbeing of children.
  - Children and their parents/carers should be made aware that agencies will share confidential information in a responsible and lawful way to ensure the safety and well-being of children. It should over-ride any perceived risk of damaging the relationship between a professional and their service users.
  - Facilitate the exchange of information between partners regarding the child protection status of children and where the Fife Partnership are responsible for working together, to meet the needs of looked after children and young people.
  - Health Monitoring – Allow the systematic monitoring of healthcare provision for children including dental services.
- 1.5 This Information Sharing Protocol covers the exchange of information between Police Scotland Fife Division, Fife Council, NHS Fife, and the Scottish Children's Reporter Administration.

Other agencies covered by this ISP are Scottish Fire and Rescue Service and other agencies / companies contracted to deliver services on behalf of NHS Fife and Fife Council to provide care and support services.
- 1.6 This information may also be shared to support the effective administration, audit, monitoring, inspection and improvement of services and reporting requirements. Partners may only use the information disclosed to them under this ISP for the specific purpose(s) set out in this document and within their authority to process this information.

### **2 High level functions of this ISP**

- 2.1 The functions which this information sharing protocol community are seeking to support :

- Proactively meeting the needs of children, young people and their families within the Getting it Right for Every Child Framework (GIRFEC).
- Multi agency procedures and processes where sharing information is relevant to assessment, including the assessment of risk and planning of further investigations.
- Agreeing and implementing service provision
- Reviewing service provision
- Discharge of services
- For the public / function interest
- Responding to risk situations
- Inspection, audit and scrutiny of case files
- Health Care Monitoring

Each partner to this protocol must appoint a single point of contact (SPoC) who must work together to jointly solve problems relative to this ISP

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- 2.2 Personal information shared to support functions other than those detailed above are not supported by this ISP.

## **3 Service Users included in this ISP**

3.1 The Service Users which this ISP relates to include:

- Pre birth and children and young people aged 0-18 years, their families and associated adults who become known to one of the participating organisations and requests, or appears to require an assessment of need

## **4 Benefits to Service Users**

4.1 Benefits to the Service Users:

- Promote a more seamless response to service users, and their families from agencies
- Joined up working and decision making

- A co-ordinated approach to identifying concerns, assessing needs and agreeing actions and outcomes
- One multi-agency assessment
- A single / multi agency child's plan
- Information available in order to have full assessment of risk
- Targeted and appropriate service provision
- Information shared for self evaluation, inspection, scrutiny and audit for the continuous improvement of service provision
- Scottish Ministers have a clear vision for all Scotland's children which has been articulated through the Getting it Right for Every Child agenda. This stipulates the areas that should be considered when assessing children's well-being.

**Safe**

**Healthy**

**Achieving**

**Nurtured**

**Active**

**Respected**

**Responsible**

**Included**

In many cases, a risk to wellbeing can be a strong indication that the child or young person could be at risk of harm if the immediate matter is not addressed. As Getting it right for every Child is about early intervention and prevention it is very likely that information may need to be shared before a situation reaches crisis

## **5 Details of personal information being shared**

5.1 Personal information shared for the purpose of this ISP includes a range of information regarding the Service Users needs.

5.2 The information shared might therefore include:

- Concerns
- Risk Assessment
- Child's Plans
- Chronologies of significant events
- Referrals
- Investigations
- Registration details
- Legal measures
- Financial assessments
- Housing situation

- Family circumstances and supports
- Associated adult information
- Additional support needs eg: interpreter
- Social and Emotional Developmental
- Advocacy

Full details of the information which is covered by the ISP is included in Annex A.

- 5.3 The information is used to share with each other, all of the information that is available to it, that may be relevant to assessment, including the assessment of risk, investigations, care planning, who will be involved, whether any short / long term needs will remain unmet, service user outcomes and how ongoing care will be managed and reviewed
- 5.4 Only the **minimum necessary** personal information consistent with the purposes set out in this document must be shared.

## **6 Key identifying information**

- 6.1 When sharing information, some, or all of the following identifiers will be used where available, to ensure that all partner organisations are referring to the same Service User however, name and date of birth will always be used.
- Child's Full Name
  - Child known by any other name
  - Child's date of birth
  - Child's address (home or accommodated)
  - Child's educational establishment if known
  - Partner's system identifiers for example:
    - Social Work Swift ID
    - Health CHI Number
    - Educational Scottish Candidate Number
    - Police Scotland Crime File Number

## **7 The information sharing partner organisations**

- 7.1 This ISP covers the exchange of information between staff of the following organisations that are engaged in delivering the service outlined in this document:

<b>Information Sharing Partner Organisations</b>	<b>Responsible Manager</b>
Fife Council, Social Work Service	Head of Service
Fife Council, Education Service	Head of Service
Fife Council, Housing and Neighbourhood Services	Head of Service
Police Scotland Fife Division	Data Controller

NHS Fife	Director of Public Health & Caldicott Guardian
Barnardo's Scotland	Pending Signature
Fife Voluntary Action	Chief Executive
Scottish Children's Reporter Administration	Locality Reporter Manager

- 7.2 The responsible managers detailed above have overall responsibility for this ISP within their own organisations, and must therefore ensure the ISP is disseminated, understood and acted upon by relevant staff.
- 7.3 Staff of these partner organisations who work directly with Service Users in order to carry out the functions described in this ISP, are bound by this document.
- 7.4 The term 'staff' encompasses paid workers, volunteers, students and other temporary workers approved by the employing / hosting organisation, whose duties include those relating to the functions outlined in this ISP.
- 7.5 Partner organisations will ensure that all current and newly-appointed staff receive appropriate training in the application of this ISP and the requirements of the SASPI framework.



## Part B – Justification for sharing personal information

**Please note: Staff should not hesitate to share personal information in order to prevent abuse or serious harm, in an emergency or in life-or-death situations. If there are concerns relating to child or adult protection issues, the relevant organisational procedures must be followed.**

### **8** *Legislative / statutory powers*

- 8.1 Disclosure of information will be conducted within the legal framework of the Data Protection Act 1998 (DPA), the Human Rights Act 1998 and in compliance with the common law duty of confidence.
- 8.2 Public Records (Scotland) Act 2011
- 8.3 Freedom of Information (Scotland) Act 2002
- 8.4 Children's Hearing (Scotland) Act 2011
- 8.5 The Scottish Government has laid proposed legislation before Parliament in the form of the Children and Young People (Scotland) Bill which is anticipated to receive Royal assent and becoming an Act in 2014.

Although not yet law, the proposed legislation provides a strong indication of the need to share information to promote, support and safeguard a child's wellbeing

- 8.6 Information Commissioner's Office states that as GIRFEC is about early intervention and prevention, it is very likely that information may need to be shared before a situation reaches crisis. While it is important to protect the rights of individuals, it is equally important to ensure that children are protected from risk of harm. Therefore where a practitioner believes, in their professional opinion, that there is risk to a child or young person that may lead to harm, proportionate sharing of information is unlikely to constitute a breach of the Act in such circumstances.

ICO's full statement can be seen in Appendix 1.

### **9** *Consent*

- 9.1 Consent is normally required to share information between different partner organisations. To provide valid informed consent the Service Users or their lawful representatives, must be provided with appropriate information to enable them to make an informed decision.
- 9.2 Implied consent is given when a Service User takes some action, including making a judgement, in the knowledge that in doing so he or she has incidentally agreed to a particular use or disclosure of information.
- 9.3 Explicit consent is given by a Service User agreeing actively, either verbally or in writing, to a particular use or disclosure of information. It can be expressed either verbally or in writing, although written consent is preferable since that reduces the scope for subsequent dispute.
- 9.4 Consent must not be secured through coercion or inferred from a lack of response to a request for explicit consent. The Practitioner must be satisfied that

the Service User has understood the information sharing arrangements and the consequences of providing or withholding consent.

- 9.5 Consent should not be regarded as a permanent state. Opportunities to review the Service User's continuing consent to information sharing should arise during the course of the service provision. The Practitioners should exercise professional judgement in determining whether it would be appropriate to re-visit a Service User's continued consent at any given juncture. Ideally it should take place in the context of a review or re-assessment.
- 9.6 The Practitioner should exercise professional judgement in determining whether consent is required under the circumstances given in **Section 12** of this document.
- 9.7 Where circumstances exist such that consent may not be appropriate, for example where an assessment under the wellbeing principles raises concerns, the Data Protection Act 1998, provides conditions to allow sharing of this information, such as 'for the exercise of any other functions of a public nature exercised in the public interest by any person' or ' in the legitimate interests of the data controller or the third party to whom the data are disclosed so long as it is not prejudicial to the child

## Part C – Operational procedures for this ISP

### 10 Summary

- 10.1 Only the minimum necessary personal information will be shared on a **need-to-know** basis and only when it supports the delivery of the purposes and functions set out in this ISP.
- 10.2 Personal information will only be collected using the approved collection methods, ensuring the required information is complete and up-to-date.
- 10.3 All reasonable steps must be taken to ensure that anyone who has received information is notified of any relevant changes by the information provider and if any inaccuracies are found the necessary amendments will be made.
- 10.4 Decisions about Service Users should never be made by referring to inaccurate, incomplete or out-of-date information.
- 10.5 Information provided by partner organisations will not be released to any third party without the permission of the owning partner organisation.
- 10.6 Staff must also follow their own organisation's procedures relating to the handling of personal information.

**Please note: Staff should not hesitate to share personal information in order to prevent abuse or serious harm, in an emergency or in life-or-death situations. If there are concerns relating to child or adult protection issues, the relevant organisational procedures must be followed.**

### 11 Fair processing information

- 11.1 It is necessary to communicate with the Service User or their lawful representatives about the need for information sharing at the earliest appropriate opportunity, preferably at first contact.
- 11.2 Being clear and open with Service Users about how their personal information will be used, will allow them to make an informed decision regarding consent for the sharing of their information. However consent is only one of the conditions that satisfy 'Fair Processing'. Under the Data Protection Act 1998, it is lawful to process information in the following circumstances. Schedule 2 of the Data Protection Act 1998 clearly sets out the circumstances where information can be shared.
  - Consent
  - Contract
  - Legal obligation
  - Vital interests
  - Administration of justice
  - Public function/interest
  - Legitimate interests of the data controller and third party but not prejudicial to individual

11.3 Partner organisations will clearly inform the Service Users about what personal information is to be shared, who the information will be shared between, why it needs to be shared and for what purposes it will be used for.

11.4 Agreed methods of providing this information are:

- Verbally at point of contact where this is possible.
- Child Protection Information for Parent and Families Leaflets, GIRFEC Information Sharing Leaflet
- Seeking consent to share information from service users should take place prior to sharing information, except in some situations where a child's wellbeing may be placed at risk or an initial assessment is required to ascertain the level of risk to a child
- Practitioners in all agencies including universal, targeted and specialist services should proactively inform children and their families when they first engage with the Service about their policy on how information will be held, stored and shared and seek consent as soon as possible.

## **12 Obtaining consent**

12.1 The approach to obtaining consent should be transparent and respect the Service User.

12.2 For the purposes of this ISP, no consent will be required from Service Users where there is a concern that the child is at risk of harm. Under these circumstances and in such cases where there is an intention to share, then consent will not be sought from parents or other relevant carers. Consent should only be collected where an individual has a real choice in the matter.

12.3 No consent is required from Service Users if the following circumstances are identified:

- A child's health, development or behaviour is impaired, or likely to be affected by possible abuse/neglect
- A child may be exposed to harm, this could be due to parental substance misuse, domestic abuse, parental mental health, or parental learning difficulties.
- A parent/carer may not be able to care for a child adequately or safely without help.
- The behaviour / presentation of a child may indicate possible abuse.
- Information held about an adult may raise concerns for children they have contact with ie; an adult who has convictions for offences against children
- Where a victim of domestic abuse is pregnant, or is a parent and there is concern that a child may be harmed as a consequence of this.
- A child who may be involved in sexually harmful behaviour to others.
- Where a child's mental health raises concerns about them placing themselves at risk.
- A child who may be involved with offending.

- For the public function / interest
- When instructed to do so by a court

12.4 Partner organisations should be prepared to be open with their Service Users about the role that their consent plays in the information sharing process and indeed be clear about the type of circumstances in which they may share personal information without their knowledge or consent.

12.5 If there is a significant change in the use to which the information will be used compared to that which had previously been explained, or a change in the relationship between a partner organisation and the Service User, then consent will be sought again.

12.6 Consent obtained from Service User's for the purposes of this ISP will only be used to support the delivery of the purposes and functions set out in this document. Once the service provision of this specific ISP concludes, then consent obtained will also end. In the event of a similar or subsequent service provision undertaken in the future, new consent will be obtained.

12.7 Staff should use opportunities such as reviews or assessments to reaffirm the Service User's consent to the sharing of information outlined in this ISP.

### **13 Refused and withdrawn consent**

13.1 A Service User has the right to refuse their consent to have information about them shared. They also have the right to withdraw previously granted consent at any point, to the sharing of their information. Further personal information should not then be shared.

13.2 Where the Service User has refused or withdrawn consent, the implications of withholding consent will be clearly explained to them and this dialogue will be recorded in partner organisation's paper files and or / and electronic information systems following case recording local operating procedures. If a Service User withdraws consent to share personal information it will also be explained that information already shared cannot be recalled. See section 15 below, for further information.

The refusal of consent to allow agencies to share information will be a factor which will feature in the overall assessment of risk for a child. On many occasions this may heighten the assessed risk for a child and further investigation/intervention maybe required.

- Agencies should make clear to children/parents/carers using their service that the welfare and protection of children is paramount when deciding whether or not to share information with others. No agency can guarantee absolute confidentiality as both statute and common law accept that information may be shared in some circumstances.

### **14 Recording consent**

14.1 Decisions regarding Service Users' consent of how and when it was obtained and whether it was provided in verbal or in written form, must be recorded in partner organisations' paper files and / or electronic information systems following case

recording local operating procedures.

- 14.2 Details of refused or withdrawn consent should also be recorded together with any subsequent reviews of consent.

## **15 Sharing information without consent**

Advice obtained from the ICO in April 2013, supports early intervention and the fact that information should be shared early enough to avoid risk of harm. Harm can manifest in many forms not just physical, the wellbeing indicators provide a way of assessing risks to a child. Therefore as in many cases, a risk to wellbeing can be a strong indication that the child or young person could be at risk of harm if the immediate matter is not addressed. As GIRFEC is about early intervention and prevention it is very likely that information may need to be shared before a situation reaches crisis

- 15.1 Personal information can be lawfully shared without consent in circumstances; where there is a legal requirement and where there is a substantial over-riding 'public interest'. For example there can be a public interest in disclosing information to protect individuals or society from risks of serious harm, such as serious communicable diseases or serious crime.
- 15.2 If a claim of substantial public interest is made, justification will be clearly stated and any decision to share information with another party without the consent of the Service User will be fully documented in the partner organisations paper files and / or electronic information systems, as per the local operational procedures of each partner organisation. This note will include details of the legal requirement used and details of the member of staff who authorised the sharing.
- 15.3 The Service User will usually be informed of this decision and of the information which has been shared; unless by doing so it would risk harm to others or hinder any investigation or legal proceedings.

## **16 Actions to be taken where a Service User lacks capacity**

- 16.1 Whenever dealing with issues of capacity to consent, local rules and procedures should be followed.
- A young person over the age of 16 will normally have the capacity to consent to the disclosure of personal or confidential information. For the purposes of the Data Protection Act, a child is taken to have that capacity if the child has a general understanding of what is involved. In the absence of indication to the contrary, children aged 12 and over are generally expected to be old enough and to have that understanding to give their consent.
  - However, the understanding or capacity of each child needs to be considered individually. In seeking consent from a child, it is important to explain the issues in a way that is suitable for the child's age and level of understanding, in a language that is clearly understood and the child's preferred mode of communication for example Braille or a language other than English.
  - In most cases, where a child is judged unable to give consent, then a person with parental responsibility, such as the parent, guardian or legal guardian for those children over the age of 16 who do not have capacity, or carer should be asked to give consent on behalf of their child. If you are unsure whether a child is able

to consent it may be appropriate to seek consent from both the child and parent or carer. Where parental or carer consent is required the consent of one person is sufficient, but if family members are in conflict, careful consideration will need to be given to whose consent is sought. If parents are separated, then the consent of the resident parent is usually sought.

## **17 Temporary impairment of capacity**

- 17.1 Where a person has a temporary loss of capacity, consent will be deferred, if appropriate, until such time as consent can be obtained. Consent to share information will be sought when capacity is regained.
- 17.2 Where it is not appropriate to defer the sharing of information, then it will not be appropriate to defer consent, as consent cannot be obtained retrospectively. Therefore, only where deemed necessary, may information be shared without consent, see section 16 above for further information.

## **18 Information collection**

- 18.1 The approved collection tools for partner organisations to gather the personal information detailed in this ISP are:
- SWIFT Fife Council, Social Work Electronic Information System
  - E1 Fife Council, Education Electronic Information System
  - GENERO Fife Council, Housing and Neighbourhood Services
  - Scottish Intelligence Database Police Scotland
  - Crime recording System Police Scotland
  - Public Protection Unit System Police Scotland
  - Vulnerable Person System Police Scotland
  - PNC Police Scotland
  - CHS Police Scotland
  - Voter's Role Police Scotland
  - Visor Police Scotland
  - OASIS NHS Fife
  - Child Health Surveillance NHS Fife
  - TIARA NHS Fife
  - EOasis NHS Fife
  - Therefore (A & E) NHS Fife
  - CHI NHS Fife
  - SCI store NHS Fife
  - Badger (e-maternity system) NHS Fife
  - Case Management System SCRA
  - - Voluntary Organisations
  - Secure email, Partner's client paper files, Templates / Forms / Letters
  - Telephone / Verbal communication

## **19 Frequency of information sharing**

- 19.1 The personal information outlined within Section 5, Part D and Annex A, will only be shared on a need-to-know basis to support the functions of this ISP.
- 19.2 Partner organisations will share relevant personal information as detailed in Annex A.
- 19.3 Should changes be made to a record, all reasonable efforts must be taken to ensure that anyone who has received a copy of the record is also alerted to the change.

## **20 Retention Schedules**

- 20.1 Personal data will be held, processed and then destroyed securely in accordance with the retention schedule of each partner organisation.

## **21 Subject Access Requests**

- 21.1 Requests for personal information will be processed and responded to using the standard SAR and FOISA procedures within each partner organisation.

## **22 Information Security**

- 22.1 Breaches of security, confidentiality and other violations of this ISP must be reported in line with each partner organisations' incident reporting procedures.
- 22.2 Significant data breaches involving personal information provided by partners under this ISP should be notified to the partner that originally provided the information.
- 22.3 All signatories must have appropriate technical and organisational measures in place to ensure that any personal data shared between partners is handled and processed in accordance with the requirements of the Data Protection Act 1998.

## **23 Complaints**

- 23.1 Each partner organisation has a formal procedure by which Service Users can direct, their complaints regarding the application of this ISP.

## **24 Review of this ISP**

- 24.1 This ISP will be reviewed in November 2014 or sooner if appropriate and evaluated through the Children's Services Self Evaluation Framework.



## Part D – Methods and controls for the sharing of personal information to support this ISP

### 25 Information flow reference table

- 25.1 The information flow reference table provides a list of the personal information to be shared between the partner organisations, with whom in each partner organisation it will be shared with, when it will be shared, why it will be shared and the methods of how it will be shared.
- 25.2 The information flow reference table will be reviewed and updated as necessary, to reflect any changes in the processing of personal information detailed in this ISP.

Confirm that the adult / child who is the subject of the request for information falls within the scope of the ISP

**See para 3.1 and para 6.1**

Gather relevant information

**See para 5.2**

Review the information to ensure that it is necessary, proportionate and up to date to disclose. Particular care should be taken if sensitive personal data or third party personal data is being considered for disclosure

**See Section 5 and Section 10**

If further confirmation required of the information to be shared refer to line manager or partner's single points of contact

**See para 2.1**

Provide information authorised for sharing to the partner organisation

**See para 18.1**

Record details of the information shared and any requests where the decision taken was not to share the information

**AND**

Record details of consent or refusal / withdrawal to share information

**See para 13.2 and Section 14**

## Annex A – Information which can be shared under this ISP

### **26 Details of information to be shared**

- Concerns
- Risk Assessment including:
  - Parental substance misuse
  - Domestic Abuse
  - Parental Mental Health Issues
  - Parental learning difficulties
  - Health screening and health risks
  - Social risks
  - Environmental risks
  - Investigations
- Registration details
- Medical examinations
- Legal measures
- Financial assessments
- Housing situation
- Family circumstances, care and supports / Informal and formal
- Household circumstances
- Additional support needs eg: interpreter
- Social and Emotional Developmental
- Immunisations
- Offence related referrals
- Risks regarding alleged perpetrator of harm
- Educational needs
- Advocacy

This will include information on the child who is the subject of the notification, siblings of that child, other children connected to that child and any key and/or significant adults who are involved and/or associated with the child in question. They will also seek information from and any other service and/or agency that may be involved with the child and/or have relevant information relating to that child. It will also identify key workers and their specific roles and responsibilities.

It is incumbent on all partners to recognise that any information shared must be justified on the merits of each case and is necessary, relevant proportionate and compliant with the 8 principles of the Data Protection Act (1998) and the sharing is lawful.

## **27 Children's Services data sharing activities and processes**

Multi Agency Interagency Referral Discussion	Process / Activity
Police Disclosure of Information	Process / Activity
Multi Agency Child's Plan	Process / Activity
Fife Multi Agency underage sexual activity protocol	Protocol
Significant Case Review	Protocol
Individual Pupil Case Review	Activity
Child Protection Messaging	Process / Activity
Online Child Protection Register	Process / Activity
Getting it Right Group - LAC progress update	Process / Progress Update
Police Child Cause for Concern Report	Process / Activity
Child Protection Notification of Concern	Process / Activity
Children Affected by Parental Substance Misuse	Protocol
Young Person's Significant Risk Advisory Group	Multi Agency Group
Autistic Spectrum Community	Multi Agency Assessment
School Liaison Mechanism	Multi Agency Group
Health promotion, screening and immunisation	Activity
NHS Fife Unborn child Policy	Policy / Process
NHS Fife Operational Division Child Welfare Pathway	Process
NHS Child Welfare ED Flowchart	Process
NHS Child Protection ED Flowchart	Process
NHS Paediatric/ /Parental Attendance Alert	Guidance
Young Offenders Management Group	Multi Agency Group
Young Carers - Recording Young Carers	Process
Recording an Instant Alert	
Profile Template	
Twilight Flyer	
Children's Hearing System	Process
Early and Effective Intervention	Process / Activity

**This list is not exhaustive**

TERM	DEFINITION
ADVOCACY	Ensuring that people can express their views and that these views are heard and taken into account by those who are involved in decision making about adults, children and young people's lives.
AGENCIES	Organisations in the statutory or voluntary sector where staff, paid or unpaid, work with or have access to children and young people and / or families: adults / older people. This includes but is not exclusive to, social work, health, education, housing and the police
ASSESSMENT	An ongoing process of gathering information structuring it and making sense of it, in order to inform decisions about the actions necessary to maximise a child's adult's potential and well-being
CALDICOTT GUARDIAN	<p>A Caldicott Guardian is a senior person responsible for protecting the confidentiality of patient and service-user information and enabling appropriate information-sharing. The Guardian plays a key role in ensuring that the NHS, Councils with Social Services responsibilities and partner organisations satisfy the highest practicable standards for handling patient identifiable information.</p> <p><a href="http://www.dh.gov.uk/en/">http://www.dh.gov.uk/en/</a></p>
CONFIDENTIALITY	<p>Respect for the privacy of information.</p> <p>Information about a person is generally held under legal and ethical obligation of confidentiality.</p>
CONSENT	<p>Agreement articulated by an individual with the care professional to share information about them with other care professionals</p> <p><u>Explicit Consent</u> – Can be given in writing or orally (and then recorded) agreeing that information can be used for purposes described</p> <p><u>Implied Consent</u> – is where the person has been informed about the information to be shared, the purpose for sharing and that they have the right to object ; their agreement to sharing has subsequently been signalled by their behaviour rather than orally or in writing.</p> <p><u>Consent Direction</u> – are directions expressed by the data subject indicating the terms on which their personal information may be disclosed, and what and where data may not be disclosed.</p>
CPC	<p>Child Protection Committee</p> <p>Multi-agency forum responsible for the development, co-ordination and review of child protection inter-agency policy and practice..</p>
CONCERN	Something which affects or has the possibility of affecting the well-being, happiness or potential of the child. It may relate to a single event or observation, a series of events, or an attribute of the child or someone associated with them.

DATA	Information recorded in a form in which it can be processed automatically in response to instructions; information recorded as part of a relevant filing system or an accessible record  Personal Data – anything which is capable of identifying a living individual e.g. name, DOB, address, e-mail address, postcode.
DATA SUBJECT	A person who is the subject of personal data
DISCLOSURE	Divulging or provision of access to data
GIRFEC	Getting it right for Every Child  Getting it right for every child (also known as "Getting it right" or GIRFEC) is a national approach to supporting and working with all children and young people in Scotland. It affects all services for children and adult services where children are involved. It is based on research, evidence and best practice and designed to ensure all parents, carers and professionals work effectively together to give children and young people the best start we can and improve their life opportunities.  <a href="http://www.scotland.gov.uk/Topics/People/Young-People/gettingitright/background">http://www.scotland.gov.uk/Topics/People/Young-People/gettingitright/background</a>
Inter-agency Referral Discussion	A series of discussions between 3 core agencies and any other service and/or agency which may be involved with the child and/or have relevant information relating to that child.
ISP	Information Sharing Protocol  Locally developed, documented rules and procedures for the disclosure and use of information, which specifically relate to security, confidentiality, consent issues and data destruction, between two or more organisations or agencies.
LEAD PROFESSIONAL	An agency practitioner who becomes the lead professional responsible for co-ordinating assessment, planning and action to ensure that all of the support provided is working well and is achieving the outcomes specified in the child's plan.
NAMED PERSON	A practitioner/manager who has responsibility for ensuring that a child's needs are addressed in universal services.
SERVICE USER	An inclusive term to describe those people who have contact with service providing organisations and have information recorded about them
SHANARRI	Eight nationally recognised indicators agreed by the Scottish Government known as the SHANARRI framework
SPOC	Single Points of Contact
UNIVERSAL SERVICES	Education and Health



**SIGNATURE**

By signing this protocol, all signatories accept responsibility for its execution and agree to ensure that staff are trained so that requests for information and the process of sharing itself is sufficient to meet the purpose of this protocol. Signatories must also ensure that they comply with all relevant legislation

Signed on behalf of Police Scotland, Fife Division:

*[Handwritten signature]*

Title:

MR

Rank / Position:

C/Supt

Date:

3/11/2013

Signed on behalf of NHS Fife

*[Handwritten signature]*

Title:

DR Dr.

Rank / Position:

Exec. Director of Public Health, CARDICOT GUARDIAN

Date:

17/ October / 2013

NHS Fife

Signed on behalf of Fife Social Work Service

*[Handwritten signature]*

Title:

Head of Service Children & Families

Rank / Position:

Date:

2/10/13

Signed on behalf of Fife Education and Learning

Burlwadey

Title: HEAD OF SERVICE

Rank / Position: \_\_\_\_\_

Date: 3.10.13

Signed on behalf of Fife Voluntary Sector

[Signature]

Title: C.E.O, FIFE VOLUNTARY SECTOR

Rank / Position: \_\_\_\_\_

Date: 03/10/13

Signed on behalf of Fife Housing and Neighbourhood Service

[Signature]

Title: HEAD OF HOUSING + NEIGHBOURHOOD SERVICES

Rank / Position: \_\_\_\_\_

Date: 29.10.13

Signed on behalf of Scottish Children's Reporter Administration

[Signature]

Title: Locality Reporter Manager

Rank / Position: \_\_\_\_\_

Date: 2/10/13