Information Sharing Protocol

In respect of:

Single Assessment Process (SAP)

Document Control

Version History and Approvals

<table>
<thead>
<tr>
<th>Name of group or individuals</th>
<th>Purpose</th>
<th>Date of Issue</th>
<th>Version</th>
</tr>
</thead>
<tbody>
<tr>
<td>SW Peninsula SAP Information Governance Workstream</td>
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<td>24th May 2007</td>
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Document Author
South West Peninsula SAP Programme Information Governance Work stream

Document Location & Owner

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Contents

1. Purpose of this protocol
2. Objectives of the protocol
3. Scope
4. Legal Basis for sharing confidential and personal-identifiable information
5. Disclosures outside the Scope of this Agreement
6. Participating organisations
7. Reason for Sharing Information
8. Responsibilities and Standards for participating organisations
9. Complaints
10. Arrangements for monitoring and review
11. Certification
12. Appendix One - Participating organisations and key contacts
13. Appendix Two – SAP and the Caldicott principles
1. Purpose of this protocol

1.1 The purpose of this protocol is to provide a framework for the secure and confidential, obtaining, holding, recording, storing and sharing of information to facilitate the Single Assessment Process (SAP).

1.2 This agreement on information sharing has two focuses:

- The communication between the professional disciplines within joint teams or other service providers contributing to the delivery of the Single Assessment Process.
- The sharing of information gained from the Single Assessment Process with those agencies who are not SAP Participating Organisations, such as housing, education, police and independent providers who represent the wider context of delivering co-ordinated and holistic services.

1.3 This protocol replaces the separate protocols for Devon & Cornwall entitled “Information sharing for SAP”.

1.4 This document should be read in conjunction with other related SAP guidelines and information available on www.devon.gov.uk/sap-pro.

2. Objectives of the protocol

2.1 To ensure personal information relating to the Single Assessment Process is shared legally and ethically in order to:

2.1.1 Safeguard the service users right to confidentiality in the exchange of their personal information

2.1.2 Safeguard professional staff by providing guidelines that will allow appropriate and controlled access to service user’s personal information to:

- Ensure they have enough information to form professional judgements and to inform care planning under the Single Assessment Process
- Ensure they are informed about known and potential risks
- Ensure that a commonly understood framework is available to manage access to information and to protect professional staff

3. Scope

3.1 This protocol and the related guidance and procedures has been developed as an operational protocol as established under the terms of the respective existing Protocols for Sharing Person-Identifiable Information between NHS and Social Care organisations in Cornwall and Devon. This Protocol must be read in conjunction with these two overarching protocols.

3.2 This protocol sets out the requirements for information sharing between participating organisations to support the operation of the Single Assessment Process (SAP).

3.3 This protocol applies to information about individuals that is held on manual files and computer systems by staff employed by signatory organisations for the operation of SAP. It applies to
information that may be disclosed in any manner such as on printouts, viewed on a computer screen, by email, written forms or verbally.

3.4 Any contractual agreements (including Service Level Agreements (SLAs)) established with third parties handling personal-identifiable information must be compliant with the legislation governing sharing of information.

4. **Legal Basis for sharing confidential and personal-identifiable information**

4.1. The legal framework for information sharing is mainly governed by 3 areas of law:
- Administrative Law – statutory organisations must act within their ‘*vires*’ (have the power to share information).
- Human Rights Act 1998
- Data Protection Act 1998
- Common Law duty of confidentiality

4.2 The specific legislation for NHS and Local Authority organisations to share information is set out in the SAP Implementation Guidelines.

4.3 The legal powers and data protection conditions which enable the signatory organisations to lawfully share information for the purposes of undertaking single assessment and planning are:

4.3.1 **Explicit and informed consent** from the service user or the person(s) with appropriate Capacity to share information between organisations participating in this protocol for the purposes of sharing information for single assessment and planning. Please see the SAP Implementation Guidelines.

4.3.2 **Local Government Act 2000, section 2** confers Councils with the power to do anything which is considered likely to promote or improve the social wellbeing of their area and the **NHS Act 1977, Section 22** requires health and local authorities to cooperate to secure and advance the health and welfare of their local population; this will satisfy the condition for processing which is necessary for the exercise of any functions conferred on any person by or under any enactment.

4.3.3 **Public interest** - Delivery of public health and social care services in the public interest requires the sharing of single assessment and care planning information between health and social care.

4.3.4 **Legitimate interests** - the sharing of single assessment and care planning information between health and social care is in the legitimate interests of the Council to promote social wellbeing and of the local NHS organisation to secure and advance health and welfare.

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1 Data Protection Act 1998, Part II, Schedule 3(1) - The data subject has given his explicit consent to the processing of the personal data
2 Data Protection Act 1998, Part II, Schedule 2(5)(b) and Schedule 2(7)(1)(b) - The processing is necessary for the exercise of any functions conferred on any person by or under any enactment
3 Data Protection Act 1998, Part II, Schedule 2(5)(d) - The processing is necessary for the exercise of any other functions of a public nature exercised in the public interest by any person.
4 Data Protection Act 1998, Part II, Schedule 2(6)(1) - The processing is necessary for the purposes of legitimate interests pursued by the data controller or by the third party or parties to whom the data are disclosed, except where the processing is unwarranted in any particular case by reason of prejudice to the rights and freedoms or legitimate interests of the data subject.
4.3.5. Medical purposes – the sharing of data between health and social care is necessary for medical purposes and is undertaken by a health professional or a person working for Social Care services as they will owe the same duty of confidentiality as a health professional.\(^5\)

5. Disclosures outside the Scope of this Agreement

5.1 Disclosures of confidential information in connection with the Single Assessment Process made under the auspices of this protocol are only disclosed for the purpose specified at the time of disclosure. It is a condition of access that it will not be used for any other purpose without the consent of the data subject.

5.2 Disclosure to the police of personal information should be managed in accordance with specific local information sharing protocols.

5.3 Disclosures to organisations that are not party to this protocol may only be made in accordance with relevant legislation.

5.4 Further advice and guidance is available from the Caldicott Guardian and Information/Governance/Data Protection officers of your respective organisation. The Caldicott principles are given in Appendix Two.

6. Participating organisations

6.1 By signing this protocol all of the parties agree to accept and implement this Information Sharing Protocol and any linked SAP Implementation Guidelines and to adopt the statements and procedures contained within them. A list of the participating organisations that are signed up to this protocol is in Appendix One.

7. Reason for Sharing Information

7.1 The key benefits of the Single Assessment Process SAP are to:

- Reduce unnecessary duplication of assessments by different professionals and/or agencies
- Reduce delay in transfers of care with better access to information
- Reduce unnecessary admissions to hospital.

7.2 By sharing information a full assessment can be built up over time and an agreed integrated multi agency care plan for NHS and adult social care.

7.3 The collection and sharing of information for the Single Assessment Process should be justified and processed according to the principles of the Data Protection Act. It must be based on the person’s informed consent by verbal or written agreement.

7.4 For the purposes of delivering and management of the Single Assessment Process, personal-identifiable information will be shared between the parties to this protocol for the following purposes;

\(^5\) Data Protection Act 1998, Part II, Schedule 3(8)(1) The processing is necessary for medical purposes and is undertaken by (a) a health professional, or (b) a person who in the circumstances owes a duty of confidentiality which is equivalent to that which would arise if that person were a health professional.
• To carry out an assessment of needs
• To assess, plan, implement and review an individual's care plan
• To support emergency care provision in accordance with the care plan, including management of risk
• To make a referral to other agencies
• To deal with complaints, grievances and professional or administrative malpractice

7.5 The type of service user information to share will cover:

• Statistical information
• Depersonalized /Anonymous Information
• Personal Identifiable Information

8. Responsibilities and Standards for participating organisations

8.1 The signatory organisations listed in Appendix One will formally adopt this information sharing protocol.

8.2 Each organisation will take responsibility for the dissemination and implementation of this agreement.

8.3 Devon County Council will place this agreement and its associated documents on its public website on behalf of the signatory organisations - www.devon.gov.uk/sap.

8.4 This Information Sharing Protocol assumes that the following are in place:

• Each signatory organisation will have an appointed Caldicott Guardian.
• Appropriate measures in compliance with NHS Connecting for Health (CfH) information governance standards. These standards apply to all organisations and include standards for information security.

9. Complaints

9.1 Any complaint received from or on behalf of a service user or appropriate person, relating to inappropriate disclosure of information, will be dealt with via the existing procedure(s) of the organization to which the complaint relates.

10. Monitoring and Review of this Protocol

10.1 This Information Sharing protocol is considered to be effective from the date of signing by each organisation.

10.2 The SAP Programme Board will monitor the effectiveness of this Information Sharing Protocol.

10.3 This protocol will be reviewed annually by a process agreed at the SAP Programme Board to ensure it is in line with changes to legislation, governmental and local guidance. Updates will be distributed to the key contacts within signatory organisations that will be responsible for issuing them to staff.
11. Certification

Certification - Single Assessment Process Information Sharing Protocol

By signing below, the Signatories accept and agree to be bound by the provisions contained in this Protocol.

Signed .............................................................................................................. (Insert signature)

By ....................................................................................................................... (Enter name and position of person signing)

For and on behalf of ............................................................................................. (Insert Organisation name)

Date ..................................................................................................................... (Insert date)
## 12. Appendix One - List of Participating organisations and key contacts

<table>
<thead>
<tr>
<th>Organisation</th>
<th>Key Contact &amp; role</th>
</tr>
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<tbody>
<tr>
<td>12.1.1 CORNWALL COUNTY COUNCIL of County Hall, Treyew Road, Truro, Cornwall, TR1 3AY</td>
<td>Dave Richards, Senior Assistant Director, Cornwall Adult Social Care</td>
</tr>
<tr>
<td>12.1.2 CORNWALL &amp; ISLES OF SCILLY NHS PRIMARY CARE TRUST of The Sedgeemoor Centre, Priory Road, St Austell, Cornwall, PL25 5AS</td>
<td>Terry Ancell, Information Governance Manager, Carol Williams, Caldicott Guardian</td>
</tr>
<tr>
<td>12.1.3 ROYAL CORNWALL HOSPITALS NHS TRUST of Bedruthan House, Penventinnie Lane, Truro, Cornwall TR1 3LJ</td>
<td>Len Szepietowski, Information Governance Manager, Dr. Rob Pitcher, Caldicott Guardian</td>
</tr>
<tr>
<td>12.1.4 CORNWALL PARTNERSHIP NHS TRUST of Trust Headquarters, Porthpean Road, St.Austell PL26 6AD</td>
<td>Gareth Widdows, Information Governance Officer, Ellen Wilkinson, Caldicott Guardian</td>
</tr>
<tr>
<td>12.1.5 DEVON COUNTY COUNCIL of County Hall, Topsham Road, Exeter EX2 4QD</td>
<td>Caroline Hitchcock, Senior Information Governance Officer, Jane Moxon, Operations Manager</td>
</tr>
<tr>
<td>12.1.6 DEVON DOCTORS LIMITED of Unit 10, Manaton Close, Matford Business Park, Exeter, Devon EX2 8PF</td>
<td>Nick Hopkinson, Associate Director IM&amp;T, Dr. David Somerfield, Medical Director and Caldicott Guardian</td>
</tr>
<tr>
<td>12.1.7 DEVON PARTNERSHIP NHS TRUST of Wonford House Hospital, Dryden Road, Exeter, Devon EX2 5AF</td>
<td>Katherine Jones, Information Governance Manager, Virginia Pearson, Caldicott Guardian</td>
</tr>
<tr>
<td>12.1.8 DEVON PRIMARY CARE NHS TRUST of Dean Clarke House, Southernhay East, Exeter Devon, EX1 1PQ</td>
<td>David Lawrence, Information Governance Manager, Dr. Alison Diamond, Acting Caldicott Guardian</td>
</tr>
<tr>
<td>12.1.9 NORTHERN DEVON NHS HEALTHCARE TRUST of North Devon District Hospital, Raleigh Park, Barnstaple, Devon, EX31 4JB</td>
<td>Gary Walbridge, Service Manager, Intermediate Care</td>
</tr>
<tr>
<td>12.1.10 PLYMOUTH CITY COUNCIL of Civic Centre, Plymouth, Devon, PL1 2AA</td>
<td>Tony Daniel, Information Governance Manager, Richard Struthers, Caldicott Guardian</td>
</tr>
<tr>
<td>12.1.11 PLYMOUTH HOSPITALS NHS TRUST of Derriford Hospital, Derriford Plymouth PL6 8DH</td>
<td>Tony Daniel, Information Governance Manager, Dr. Simon Payne, Medical Director and Caldicott Guardian</td>
</tr>
<tr>
<td>12.1.12 PLYMOUTH TEACHING PRIMARY CARE TRUST of Building One, Brest Road, Plymouth, Devon, PL6 5QZ</td>
<td>Sharon Martin, Information Governance Manager, Dr. Vaughan Pearce, Medical Director and Caldicott Guardian</td>
</tr>
<tr>
<td>12.1.13 ROYAL DEVON &amp; EXETER NHS FOUNDATION TRUST of Barrack Road, Exeter, Devon, EX2 5DW</td>
<td>Paul Stannard, Consultant, Caldicott Guardian</td>
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13. Appendix Two - SAP and the Caldicott principles.

Principle 1  Justify the Purpose(s)

Every proposed use of transfer of patient-identifiable information within or from an organisation should be clearly defined and scrutinized, with continuing uses regularly reviewed by an appropriate guardian.

SAP  All traces of and access to information will be logged in an audit file (contents and retention schedule TBA) which can be scrutinised by authorized administrators within each appropriate organisation.

Principle 2  Do not use patient-identifiable information unless it is absolutely necessary

Patient-identifiable information items should not be used unless there is no alternative

SAP  Patient/client data will be accessed by appropriately authorized members of staff in line with National Service Framework (NSF) requirements. These are underpinned by agreed SAP data sharing protocols, as part of an Information Sharing Toolkit.

Principle 3  Use the minimum necessary patient-identifiable information

Where use of patient-identifiable information is considered to be essential, each individual item of information should be justified with the aim of reducing identifiably.

SAP  Only information required for the completion of the assessment will be shared across agencies. An individual patient/client can decide whether they wish to have any element of their assessment data withheld from a partner agency.

Principle 4  Access to patient-identifiable information should be on a strict need to know basis

Only those individuals who need access to patient-identifiable information should have access to it, and they should only have access to the information items that they need to see.

SAP  Professionals will have access to individual assessment data based on their role, agency involvement and patient/client consent.

Principle 5  Everyone should be aware of their responsibilities

Action should be taken to ensure that those handling patient identifiable information – both clinical and non-clinical staff – are aware of their responsibilities and obligations to respect patient confidentiality.

SAP  Prior to any professional using the application to perform an assessment, full training will be given in both the assessment protocol and the application. An element of this training data protection, the data sharing protocols (including consent) and an awareness of their responsibilities and obligations in sharing data.

Principle 6  Understand and comply with the law
Every use of patient identifiable information must be lawful. Someone in each organisation should be responsible for ensuring that the organisation complies with legal requirements.

**SAP**

(existing structures within each organisation are in place to oversee observance of legal requirements and ensure SAP compliance.)