

CONFIDENTIALITY Policy & Procedure



1. INTRODUCTION

Everyone using Getting Heard's services has the right to expect that our service will hold information about them in confidence. Confidentiality is central to trust between clients and service providers, and is one of the key principles underpinning advocacy. It is essential that all advocates, other workers and people who use Getting Heard services are aware of this policy and of its limitations.

This policy should be read in conjunction with a number of other policies (see Section 9); most notably the Non-Instructed Advocacy Policy which explains the policy position for sharing information when someone does not have mental capacity and sharing information would be in their best interests.

2. GENERAL PRINCIPLES

People who use Getting Heard services have the right to believe, and be assured, that information given in confidence will only be used for the purposes for which it was given and will not be released to any person outside Getting Heard without their consent, unless conditions for breaching confidentiality are met (outlined in section 3).

Every effort will be made to explain this policy to all clients using Getting Heard's services and where appropriate the policy will be provided in writing or read to them, before they discuss the reasons for approaching the organisation. Clients should be periodically reminded of the contents of the confidentiality policy throughout their contact with the organisation.

This policy shall be explained to Getting Heard's funders, local Safeguarding Boards when relevant, local agencies and, where appropriate to parents or carers. Clarification must be sought with other statutory agencies, which Getting Heard services come into contact with during the course of their work, to establish their routine procedures when people disclose information which is of concern.

Getting Heard's handling of confidential personal information will:

- Promote, support and protect the privacy, dignity and rights of clients
- Be understood by clients who have capacity, staff, volunteers and partner services
- Comply with best practice
- Conform with the law
- Promote the care and welfare of clients and the effective operation of services

3. BREACHING CONFIDENTIALITY

The limits to confidentiality must be explained to clients before gathering information from them.

Confidentiality can **only** be breached when:

1. If a person shares information which leads a volunteer or member of staff at Getting Heard to believe the person or someone else may be at risk of serious harm or abuse.
2. If a volunteer or member of staff, having made every effort to do so, still lacks the ability to interpret the person's method of communication, and is therefore unable to consult them in such a way as to elicit their views or involve them in a potential breach.
3. If people working within the service would otherwise be assisting a criminal offence.
4. If there is a court order for disclosure.
5. When working in a children's unit, or a secure unit there may be a statutory requirement that the unit's confidentiality policy will supersede Getting Heard's policy.

When confidentiality has to be breached without permission, wherever possible the advocate shall **inform the person at the earliest opportunity** of the reasons for doing so, giving them opportunities to discuss other alternatives and plan for likely outcomes. Every effort should be made to ensure the person is given the maximum control possible over the process of breaching confidentiality, and to keep them informed at every stage of action Getting Heard intends to take.

Advocates/other service staff are only authorised to make the final decision about whether confidentiality is to be breached in an emergency and they are unable to contact the CEO or a Supervising Advocate. An example of such an emergency could be a client who is about to return home where they would be at immediate risk of harm.

4. PROCEDURE FOR BREACHING CONFIDENTIALITY (Office Hours)

Any information from any source which gives rise to concern for the safety or well being of a person or people, directly or indirectly, should be made known to the worker's Line Manager immediately

Managers should ensure staff and volunteers are aware of how to contact them, or a colleague at a management level, in an emergency during the working, including ways of interrupting meetings.

If an immediate Line Manager is unavailable, the concern should be escalated to either a Supervising Advocate or the CEO. Any decision to take further action will be made by the relevant Manager. This may be following discussion with the CEO or other managers.

In circumstances where information has been received/actions observed indicating people other than clients of the organisation are at risk of harm, this information may be passed by the CEO to relevant agencies, without identifying the source of information.

5. PROCEDURE FOR BREACHING CONFIDENTIALITY (Outside Office Hours)

All staff and volunteers will be supplied with an emergency out-of-hours contact telephone number for the CEO when they first start. This number should be saved in their phone directory.

6. INFORMATION SHARING EXTERNALLY

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 to the purposes should be shared with those who need it. This allows others to do their job effectively and make sound decisions.
- Adequate for its purpose. Information should be of the right quality to ensure that it can be understood and relied upon.
- Accurate and up to date and should clearly distinguish between fact and opinion. If the information is historical then this should be explained.
- 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 vulnerable adult.
- Practitioners should ensure that sufficient information is shared, as well as consider the urgency with which to share it.
- Shared in an appropriate, secure way

Information sharing and respecting confidentiality falls within the guidance set out in the MCA CoP 5.56 -5.57 for people assessed as lacking capacity to give consent and provides a clear framework for Getting Heard staff to work to.

All 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.

7. INFORMATION SHARING INTERNALLY

- 6.1 Information about people is confidential to Getting Heard as an organisation and not to individuals working in the name of Getting Heard. Information outside of internal meetings or supervision should only be shared with other Getting Heard workers/advocates if it is considered essential for the safety and well-being of the person concerned.

8. RECORDING INFORMATION

All manual and electronic information will be held securely and confidentially. For further detail, please see Data Protection Policy, Adult Safeguarding Policy, Safeguarding Children Policy. Please also consult the ICT Remote Working Policy.

At the first contact with a client, a record should be made on the client database that the confidentiality policy and its limits were explained to the client, and that, with the exception of clients who lack capacity, the client accepted the policy and consented to work with Getting Heard.

A record should be made on the client database of all subsequent reminders to clients of the confidentiality policy; these should be dated and timed.

All information received/actions observed, which may indicate cause for concern, including potential breaches of confidentiality, should be recorded in writing by the member of staff. Detailed reports should be written which include a chronology of events which are dated and timed, people involved/present, details of the issue(s)/concern(s); recording of exact wording used by client/other wherever possible, and actions taken by member of staff. All reports should be signed by the author.

Managers should further record all action taken by them from the point at which they are alerted to a potential concern, issue and/or potential breach of confidentiality by a member of staff, including steps taken to contact senior manager(s); time of contacting a senior manager; action agreed to be taken and by whom; and progress on such action. All records should be dated, timed and signed.

9. OTHER RELEVANT POLICIES

- Advocates Code of Practice
- Data Protection
- Health and Safety
- Adult Safeguarding
- Safeguarding Children
- Whistleblowing
- Non-Instructed Advocacy