

APPENDIX 5

**BIRMINGHAM'S OVERARCHING
INFORMATION SHARING PROTOCOL**

**WORKING TOGETHER IN EQUAL PARTNERSHIP
TO PREPARE YOUNG PEOPLE WITH ADDITIONAL NEEDS
FOR ADULT LIFE**

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1. CONTEXT

Birmingham is committed to supporting young people with additional needs to prepare for adulthood.

The Birmingham Transition Strategy sets out how all partners as 'Equals' will work together, to not only meet their statutory obligations but to shift the culture and practice of silo working, overcome the practicalities of structural and system difference, but more importantly work passionately and professionally to realise the best opportunities and life chances for vulnerable young people, enabling them to celebrate their personal ambitions and dreams within the community of their choice.

Managers and practitioners across children's and adult services, recognise that the structural and cultural differences between their services can make transition more difficult and confusing for young people and their families.

Differences in areas such as IT, Systems, approach to practice and how the services are accessed, organised and commissioned can result in a lack of confidence on the part of young people, their families and practitioners. The appropriate sharing of data is yet another barrier to effective transition and reduced cost, causing delay, poor planning and outcomes for all involved.

We all know that decisions to share information, with whom and when, can have a profound impact on the efficiency and quality of service support to a vulnerable young person. These decisions enable more timely interventions and more effective strategic planning for future demand and improvement in commissioned services.

There can be no justification for failing to share information that will allow action to be taken to protect vulnerable young people and to improve the quality of their lives.

An Information Sharing Protocol is a useful tool with which to manage large scale, regular information sharing, in particular performance data and associated costs. It creates a routine for what will be shared, when and with whom and provides a framework in which this regular sharing can take place with little or no intervention by practitioners.

It is not a useful tool for managing the ad hoc information sharing which all practitioners find necessary. Most importantly, it is not intended to be a substitute for the professional judgement which an experienced practitioner will use in those cases and should not be used to replace that judgement. The lack of an Information Sharing Protocol must never be a reason for not sharing information that could help a practitioner deliver services to a person.

This Protocol complements and supports wider national guidance, professional body guidance and local policies and procedures to improve information sharing in relation to transition across services in Birmingham.

Government Policy places a strong emphasis on the need to share information across organisational boundaries in order to ensure effective coordination of services, specifically in ensuring that there are integrated health and wellbeing services.

Partner agencies arranging services in Birmingham are continually processing information and will often be gathering the same basic information, undertaking similar assessments, producing and implementing plans of action that are appropriate to the agencies perceived response, rather the holistic needs of the individual. As a result, there is often unnecessary

duplication of effort, poor co-ordination and a lack of a coherent approach to the particular issues facing an individual which could be potentially detrimental.

The Health and Social Care Act states that Health and Wellbeing Boards will need to look more widely at issues such as crime reduction along with the wider responsibility of ensuring there are integrated health and wellbeing services.

In these circumstances, it has been recognised that a multi-agency response is the best way of ensuring that service users receive the right support. In order to achieve this it is essential to have in place a framework that will allow the sharing of relevant information between professionals, when it is needed, with a degree of confidence and trust.

2. THE PROTOCOL

This Protocol is an overarching framework for sharing information between partner organisations which provide services to young people from the age of 14 to 25 who are preparing for adulthood and subsequently are moving through a series of assessments and services.

The information shared will relate to the performance, associated costs and outcomes achieved by these services to improve the quality of life outcomes for adults with additional needs. The information will help populate a shared **Transitions Partnership performance Dashboard** can be seen at **APPENDIX 1**

The Protocol provides supporting guidance on how to share information, including arrangements for the monitoring, review and approval of the Protocol. It has the following benefits:

- Helps to promote information sharing and the development of relationships
- Helps to ensure compliance with legislation and guidance
- Raises awareness of the key information sharing issues
- A comprehensive document that is relevant to all information sharing arrangements, allowing service level information protocols to focus on day to day specific information exchanges
- Establishes clear lines of accountability

3. PURPOSE OF THE PROTOCOL

The Protocol enables partner organisations to utilise well established appropriate and transparent information sharing systems and processes to inform the commissioning of future services and to manage escalating costs.

It is a statement of the principles and assurances which govern information sharing by ensuring clarity and consistency in practice and in accordance with the:

- Data Protection Legislation: (i) the General Data Protection Regulation(EU) 2016/679) (GDPR) the Law Enforcement Directive (LED) and any applicable national implementing Laws as amended from time to time (ii) the Data Protection Act 2018 ((DPA 2018)(subject to Royal Assent) to the extent that it relates to processing of personal data and privacy; and (iii) all applicable Law about the processing of personal data and privacy;

- Human Rights Act, 1998
- Common Law Duty of Confidentiality
- Caldicott Principles
- Any other relevant legislation and guidance

Where other protocols and contractual arrangements already exist between organisations, then, if appropriate, this Protocol and associated service level protocols will run concurrently with them and parties can continue to adhere to existing protocols.

If it is a requirement to disclose personal service user information between organisations as part of a funding or contractual arrangement then all parties should be made aware of this as part of the funding and contractual process. It is recommended that all new partnerships entered into should be covered by an appropriate service level information sharing protocol.

LEGAL BASIS

Personal Data	Sensitive Personal Data
Sharing personal information in accordance with this protocol is lawful under the General Data Protection Regulation 2016 –Art 6	Sharing personal information in accordance with this protocol is lawful under the General Data Protection Regulation 2016 art 9
Public Task	Health & Social Care
Legal Obligation	
Vital Interests	Vital Interest

OBJECTIVES OF THE PROTOCOL:

The objectives are:

- Facilitate the lawful and appropriate sharing of information between all organisations and departments in an efficient and effective manner
- To encourage commitment by all partner agencies to work together to develop information sharing arrangements and working practice that will improve outcomes
- To reduce uncertainty as to the legal basis upon which information can be shared and help foster a shared understanding of legal and statutory duties
- To help professionals and organisations to understand when you need to get consent before sharing information and when you can share without consent or knowledge of the service user
- To develop consistency in information sharing

- To help organisations to develop clear service level protocols that set out the basics upon which they share information and of their respective roles and responsibilities which further strengthens the Birmingham Transition Protocol

INFORMATION SHARING PRINCIPLES:

This section sets out the general principles governing the sharing of information. All partners should:

- Facilitate the information exchange whenever such exchange is lawful
- Disclose the minimum amount of relevant information on a need to know basis
- Work together to develop frameworks, procedures and protocols for the sharing of information and to facilitate partnership arrangements

PURPOSE FOR WHICH INFORMATION MAY BE SHARED:

The sharing of information linked to this Protocol is supported when the purpose is:

- To improve well-being through educational, health and social care opportunities
- o appear to have a need or do have an eligible need for care and support for care support people in need
- To prevent health inequalities
- To provide seamless provision of children and young people's services
- To enable service users to access universal and specialist services
- To enable staff to meet statutory duties across organisations
- To improve data integrity and quality
- To manage and plan services
- To inform strategic commissioning
- To develop inter agency strategies
- To performance manage and audit

4. PARTIES TO THE PROTOCOL

The Birmingham Health and Wellbeing Board will own this overarching Information Sharing Protocol on behalf of their respective organisations. The partners included are:

- Birmingham City Council
- Birmingham Children's Trust
- Birmingham NHS Trust
- Birmingham CCG'S
- Voluntary and Community Sector
- Birmingham Safeguarding Boards- Children and Adults

5. STATUTORY POWERS AND DUTIES RELEVANT TO INFORMATION SHARING

The key pieces of legislation that underpin this Protocol and allow the sharing of information are:

- The Children Act, 1989 (Sections 17,27,47)
- The Children Act, 2004 (Sections 10,11)
- The Education Act 1996 (Sections 13, 434)
- The Education Act 2002 (Section 175)
- Learning and Skills Act (Sections 117, 119)
- Education (SEN) Regulations 2001 (Regulation 6 and 18)
- Children(Leaving Care Act) 2000
- Local Government Act 2000 (Part 1, Section 1 and 2)
- The Health Act 1999 (Section 27)
- The Human Rights Act 1998 (Article 8)
- The Data Protection Act 1998 (Sections 29, 35)
- Mental Health act 1983
- The Health and Social Care Act
- The Law of Confidentiality
- Data Protection Legislation: (i) the General Data Protection Regulation(EU) 2016/679) (GDPR) the Law Enforcement Directive (LED) and any applicable national implementing Laws as amended from time to time (ii) the Data Protection Act 2018 ((DPA 2018)(subject to Royal Assent) to the extent that it relates to processing of personal data and privacy; and (iii) all applicable Law about the processing of personal data and privacy;

Details of the key legislation and guidance affecting the sharing and disclosure of information are set out in HM Government national guidance, 'Information Sharing: Further Guidance on Legal Issues'

The powers and duties, when taken together, create a framework for the sharing of information between different groups of professionals and partner organisations, including the Voluntary and Community Sector, professionals working across service areas and local authority boundaries. Used proactively, they can facilitate the collation and sharing of information in many of the situations where people are most in need of help and targeted services. These situations are not limited to those where risks have materialised or where a service user is at risk of imminent or serious harm. Indeed, it is a responsibility to share information in order to prevent risk.

6. IMPLEMENTATION OF THE PROTOCOL

Partner agencies will be requested to approve and adopt the overarching Protocol formally.

All partners will disseminate the Protocol and ensure that the content is understood.

All partners will ensure the Protocol is available to the public through their Freedom of Information Publication Schemes.

Reviews will be carried out every two years.

7. ADOPTION OF THE PROTOCOL

The parties to the Overarching Information Sharing Protocol agree that the procedures detailed in this document provide a secure framework for the sharing of information between their respective organisations in compliance with their professional responsibilities.

Partner agencies that are party to this Protocol will undertake to:

- Ensure that staff adhere to the Protocol
- Implement and audit compliance with this Protocol within their respective organisations
- Ensure that where these procedures are adopted, no restriction will be placed on the sharing of information, other than those specified within this Protocol
- Ensure that all service level protocols established between partner agencies are consistent with this Protocol

Transitions Preparation for Adulthood – Performance Dashboard

INDEPENDENT LIVING AND HOUSING	FRIENDSHIPS/ RELATIONSHIPS/ COMMUNITY CONNECTION	EDUCATION/ EMPLOYMENT & TRAINING	A HEALTHY LIFE
<p>70 (67%) No and % of disabled children in transition and preparing for adulthood</p>	<p>10 (16%) No and % of young people are happy with the outcomes of their transition</p>	<p>800 (30%) No and % of young people who attend their EHCP Annual Review Meetings</p>	<p>10 (5%) No and % of young people from the age of 14 who access direct payments</p>
<p>40 (51%) No and % of disabled children in transition and living in the community</p>	<p>85 (105) No and % of parents/carers satisfied with the services provided by Birmingham agencies for their children</p>	<p>300 (10%) No and % of young people with a disability not in education, employment and training</p>	<p>30 (15%) No and % of young adults who access personal budgets following transition</p>
<p>12 (20%) No and % of disabled young people who are in transition and live in a residential setting within 10 Miles</p>	<p>0 (0%) No and % of young people in transition with an annual Health check</p>	<p>72 (10%) No and % of young people leaving care not in education, employment and training</p>	<p>0 (0%) No and % of young people in transition with an annual Health check</p>
<p>16 (29%) No and % of disabled young people who are in transition and live in a residential setting greater than 10 Miles</p>	<p>0 (0%) No and % of young people in transition with an annual Health check</p>	<p>20 (5%) No and % of young people coming through transition who are employed for 16 hours per week or more</p>	<p>0 (0%) No and % of young people in transition with an annual Health check</p>