



# sharing information

Leeds Interagency Protocol  
for Sharing Information

The Protocol



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**Note: The Protocol includes the following supporting documents**

**Operational Procedures, Appendices and Staff Guidance** Governing the Sharing of Information between Agencies in Leeds. This provides details of information sharing procedures.

The **Appendices** which include the following documents:

- Appendix 1: Key Legislation and Guidance
- Appendix 2: Determining Access to Personal Information - “the need to know”
- Appendix 3: An example of an Information Sharing Agreement
- Appendix 4: An example of an Access Agreement
- Appendix 5: An example of a Consent Form
- Appendix 6: An example of a standard form for reporting breaches

## **Background and summary**

### **Why do we need to share information?**

Government policy places a strong emphasis on the need to share relevant personal information across organisational and professional boundaries, in order to ensure effective co-ordination and integration of services. This is made clear in a number of documents including the NHS Plan, "Information for Health", "Every Child Matters" and the National Service Frameworks.

The Bichard Inquiry in the wake of the Soham murders and Lord Laming's Report into the Victoria Climbié tragedy also contained specific recommendations for information sharing".

Much of the information that needs to be shared involves personal details about service users and their needs.

The Government has also emphasised the importance of security and confidentiality in relation to personal information and has strengthened the legislation and guidance in this area in particular through the 1998 Data Protection Act and Caldicott guidance. Confidentiality NHS Code of Practice (2003).

Current practice in relation to information sharing may vary considerably. Some staff may be reluctant to share any personal information about service users because of uncertainties about current legislation and guidance. This can lead to serious difficulties in ensuring that services are properly co-ordinated.

Other staff may be unaware of the implications of recent changes and may be continuing to share information on the basis of informal arrangements. These arrangements may not comply with guidance or the law and this can leave individuals and the organisations they work for, at risk of possible legal action.

The Caldicott report recommended that organisations should draw up and implement protocols in order to protect patients confidentiality as well as facilitate the transfer of information between practice organisations on a need to know basis for justifiable purposes.

Health and social care organisations in Leeds recognised the need to provide a clear framework to help facilitate the sharing of information and responded by establishing an inter-agency steering group who developed a protocol.

## **What is the Protocol?**

The Protocol is an over-arching framework for sharing information between health, social care and other agencies in Leeds. It focuses on requirements for sharing personal information about service users. The Protocol:

- Clarifies the legal background on information sharing
- Outlines the principles that need to underpin the process
- Provides practical guidance on how to share information in a series of supporting Procedures
- Provides a framework within which organisations can develop Information Sharing Agreements (ISAs) or Access Agreements for specific areas of service
- Includes arrangements for monitoring and reviewing the use of the Protocol and for responding to breaches.

The Protocol is not contractually binding but is to be used to set good practice standards that the parties need to meet in order to fulfil any duty of care which exists in relation to the sharing of personal information.

## **What are the benefits of the Protocol?**

The Protocol provides the following benefits.

- **Helping to promote information sharing**  
The Protocol will help to remove barriers to effective information sharing and will assist in ensuring that service users receive integrated services which is a key principle of Government policy.
- **Helping to ensure compliance with legislation and guidance**  
The 1998 Data Protection Act stipulates that organisations must satisfy themselves that the agencies they share information with have the necessary procedures in place to comply with the Act's requirements. It would not be practical for organisations to carry out such checks each time they wished to share information. Signatories to the protocol confirm that they will comply with these procedures **whenever information is shared** and that they will abide by the monitoring arrangements within the Protocol.  
The Protocol includes detailed procedural guidance to assist organisations in complying with legislation and guidance and in particular to:
  - help to ensure that consent to share personal information is obtained from the service user wherever this is necessary
  - help ensure that information is shared where there is a requirement to do so
  - help ensure that partner organisations have appropriate procedures in place to ensure compliance with legislation

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The Protocol includes detailed procedural guidance on consent issues to assist staff in complying with legal requirements.

- **Raising awareness**

The Protocol raises awareness of the key information sharing issues and provides detailed procedural guidance. This will help organisations to ensure that staff are aware of these key issues and have confidence in the process of sharing information with others.

- **Avoiding the need to “re-invent the wheel”**

The Protocol contains comprehensive details that are relevant to all information sharing arrangements. This means that there is no need to keep “re-inventing the wheel” when drafting specific ISAs or Access Agreements. Signatories agree to ensure that all agreements established between partner agencies are consistent with the Protocol. As a consequence individual agreements can be relatively brief documents which focus on the specific types of information to be shared and any additional requirements that are felt to be necessary

## **Access Agreements**

There will be situations when an Access Agreement will be more appropriate rather than an ISA. For example where individuals are involved in cross organisational projects or services and need access to another organisations system then an Access Agreement should be used rather than an ISA.

In order to ensure effective safeguards are in place Access Agreements will include clear terms of access, usage and sharing, limitations as well as enforceable actions and personal accountability if those terms are breached:

- What security arrangements need to be in place to enable access to occur,
- What are the responsibilities of the staff involved and their manager with respect to Data Protection requirements
- What level of training may be required for staff either in information governance, such as Tiger, or IT related,
- Which policies need to be in place and agreed to,
- What will happen if confidentiality/ the agreement is breached e.g disciplinary action.

Access Agreements do not include information about costs, equipment or maintenance, if required these should form part of a contract or Service Level Agreement.

The phrase ‘ISA’ in the Protocol and its associated documents is a generic term which may refer to either an ISA or Access Agreement.

An example of an Access Agreement can be found in Appendix 4.

# The Information Sharing Protocol

## Section 1 - Introduction

### 1.1 Scope

This Protocol is an agreement between the agencies detailed in section 1.2 to govern the sharing of personal information about service users and facilitate the development of information sharing agreements. (It does not relate to the sharing of personal information about staff.)

The Protocol:

- Focuses primarily on the sharing of “personal” and “sensitive” information about people using health, social care and associated services commissioned by the partner agencies listed in Section 1.2. (Definitions of the terms “personal data” and “sensitive data” which are used in the Data Protection Act 1998 are given in Procedure A5.)  
The Protocol also refers to “private” information in relation to the Human Rights Act 1998 and “confidential” information.
- Covers the sharing of information for any of the purposes listed in section 2.1 and comprises the common principles and procedures to be adopted wherever and whenever these organisations share information for these purposes.
- Provides the framework for information sharing in Leeds. It will be activated through Information Sharing Agreements (ISAs) for specific areas of service between partner agencies. Each ISA will set out the detailed arrangements relevant to that particular application. All ISAs will need to be fully compliant and consistent with this Protocol. An example of an ISA is included as Appendix 3.

### 1.2 Parties to the Protocol

The following organisations are parties to the Protocol

- Leeds Teaching Hospitals Trust
- Leeds Partnerships NHS Foundation Trust
- NHS Leeds (Leeds Primary Care Trust)
- Leeds City Council
- Education Leeds
- West Yorkshire Police

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The following organisations are members of the Steering Group and support the aims and objectives of the protocol

- YAS
- NHS Direct
- Leeds VOICE
- Advocacy Network Leeds
- Leeds Careers:

### **1.3 Purpose of the Protocol**

The purpose of the Protocol is to provide a framework for the secure and confidential sharing of information between organisations. This will enable organisations to meet their responsibilities to protect, support and care for individuals and communities in accordance with government expectations as detailed in documents such as the NHS Plan and the National Service Frameworks.

The Protocol informs managers and operational staff of the reasons why personal information about service users may need to be shared and how this sharing will be managed.

The Protocol:

- Sets out the principles which underpin the sharing of information between the parties detailed in section 1.2
- Defines the specific purposes for which these organisations have agreed to share information to meet their responsibilities to protect, support and care for communities and individuals.
- Describes the roles and structures which will support the exchange of information between parties to the Protocol
- Describes the procedures which will ensure that information is disclosed in line with statutory responsibilities
- Describes the arrangements which have been agreed for exchanging information.
- Describes the security procedures necessary to ensure that the confidentiality of information exchanged is maintained.
- Sets out the responsibilities of organisations to implement internal arrangements to meet the requirements of the Protocol.
- Describes how the Protocol will be implemented, monitored and reviewed

## **Section 2 – Principles**

### **2.1 Purposes for which information may be shared**

This Protocol applies to the sharing of information between agencies for the following purposes:

- Improving the health and social care of people
- Protecting people and communities
- Prevention and detection of crime
- Supporting people in need
- Investigating complaints
- Managing & planning services
- Commissioning and contracting services
- Developing inter-agency strategies
- Performance management and audit
- Research relating to clinical or social care objectives

### **2.2 Key legislation and guidance**

Details of the key legislation and guidance affecting the sharing and disclosure of information are set out in Appendix 1.

### **2.3 Principles governing the sharing of information**

A number of safeguards are necessary in order to ensure a balance between maintaining confidentiality and sharing information appropriately.

The key principles governing the sharing of information are detailed in the Data Protection Act 1998 and the Caldicott Report. The Human Rights Act and the common law “duty of confidentiality”, Confidentiality NHS Code of Practice (2003) are also relevant in this context. (See Appendix 1 for further details.)

**The sharing of information by organisations under the Protocol will be based on the following principles:**

**1. Commitment to sharing information**

Partner organisations recognise that multi-agency initiatives require a commitment to sharing personal information about service users in compliance with guidance and legislation.

**2. Statutory duties**

Partner organisations are fully committed to ensuring that they share information in accordance with their statutory duties including the requirements of the of the Data Protection Act 1998 and the Human Rights Act 1998. (See Appendix 1)

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### **3. Caldicott requirements**

All organisations recognise the requirements that Caldicott imposes on NHS organisations and Social Services Departments. They will ensure that requests for information from these organisations are dealt with in a manner compatible with these requirements. (See Appendix 1)

### **4. Duty of confidentiality**

It is generally accepted that most (if not all) information provided by service users is confidential in nature. All organisations which are party to this protocol accept this duty of confidentiality and will not disclose such information without the consent of the person concerned, unless there are statutory grounds and an overriding justification for so doing. In requesting release and disclosure of information from partner organisations, all staff will respect this responsibility.

### **5. Consent**

Wherever possible organisations will seek consent from the service user to share personal information. Where consent to disclose information is requested, the service user will be made fully aware of the information it is proposed to share and the purposes for which it will be used.

If a person is unwilling to give consent, information will only be shared in exceptional circumstances and where there are appropriate statutory grounds for doing so.

### **6. Sharing without consent**

Organisations will put procedures in place to ensure that decisions to share personal information without consent have been fully considered and comply with the requirements of the relevant legislation. Such decisions will be appropriately recorded for audit purposes. All relevant staff will be provided with training in these procedures.

### **7. "Need to know"**

Where it is agreed necessary for information to be shared, this will be done on a "need-to-know" basis only i.e. the minimum information consistent with the purpose for sharing will be given.

### **8. Information kept confidential from the service user**

Where professionals request that information supplied by them be kept confidential from the service user, the outcome of this request and the reasons for taking the decision will be recorded. Such decisions will only be taken on statutory grounds

### **9. Specific purpose**

Partners will not abuse information that is disclosed to them under the specific purposes set out in the protocol. Information shared with a member of another organisation for a specific purpose will not be regarded by that organisation as intelligence for the general use of the organisation.

### **10. Fact / opinion**

When disclosing information about an individual, professionals will clearly state whether the information being supplied is fact, opinion, or a combination of the two.

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### **11. Use of anonymised information where possible**

Personal information will only be disclosed where the purpose for which it has been agreed to share clearly requires that this is necessary. For all other purposes, information about individual cases will be anonymised.

### **12. Access to information**

People will be fully informed about the information that is recorded about them. They will be able to gain access to information held about them and to correct any factual errors that may have been made. If an organisation has statutory grounds for restricting a person's access to information about them, they will be told that such information is held and the grounds on which it is restricted. Where opinion about a service user is recorded and they feel the opinion is based on incorrect factual information, they will be given the opportunity to correct the factual error and record their disagreement with the recorded opinion.

### **13. Complaints procedures**

Partners are committed to having procedures in place to address complaints relating to the disclosure of information. Service users will be provided with information about these procedures.

### **14. Staff awareness**

Partner organisations will ensure that all relevant staff are aware of and comply with their responsibilities in relation to:

- \* the Protocol
- \* the confidentiality of information about service users
- \* the commitment to share information in accordance with guidance and legislation

### **15. Disciplinary action**

Partner organisations will ensure that contracts of employment and policies include reference to the issue of disciplinary action should staff disclose personal information on a basis which cannot be justified on statutory grounds.

## **Section 3 - Operational Procedures**

### **3.1 Adoption of procedures**

A key aspect of the Protocol is the adoption by partners of a common standard for procedures for the sharing of information. This is intended to give organisations confidence that when they share information (under Information Sharing Agreements) partner agencies will be operating to a common standard that complies with relevant legislation and guidance.

(It is acknowledged that partner organisations may already have procedures in place which meet these standards and will want to use these.)

Partner organisations are committed to sharing information on the basis of these procedures and will provide evidence of this, as required, through the monitoring process.

**The procedures are detailed in a supporting document – “Operational Procedures Governing the Sharing of Information between Agencies in Leeds”.**

The document defines the detailed responsibilities and arrangements which organisations should put in place when establishing an information-sharing agreement (ISA) for a specific area of service. Individual ISAs are likely to include some additional procedures in order to meet particular needs arising within specific service areas.

An example of an ISA is included as Appendix 3.

The areas to be governed by common procedures are listed in the following section.

### **3.2 Summary of Procedures**

The procedures are detailed in three sections – “Sharing Personal Information”, “Access and Security Procedures” and “Managing the Protocol”.

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Procedure reference	Name of Procedure
<b>Section A</b>	<b>Sharing personal information</b>
<b>A1</b>	<b>Obtaining consent</b>
<b>A2</b>	<b>Establishing fitness to give consent</b>
<b>A3</b>	<b>Recording consent</b>
<b>A4</b>	<b>Checking for consent when sharing information</b>
<b>A5</b>	<b>Sharing information without consent</b>
<b>A6</b>	<b>Contact details for staff with specific roles</b>
<b>A7</b>	<b>Guidance for staff</b>

Procedure reference	Name of Procedure
<b>Section B</b>	<b>Access and security procedures</b>
<b>B1</b>	<b>Access and security</b>
<b>B2</b>	<b>Transfer of information by fax</b>
<b>B3</b>	<b>Transfer of information by email or disc</b>
<b>B4</b>	<b>Transfer of information verbally</b>
<b>B5</b>	<b>Transfer of information by post</b>
<b>B6</b>	<b>Use of personal information for additional purposes</b>
<b>B7</b>	<b>Determining access to personal information: the “need to know”</b>
<b>B8</b>	<b>Restrictions on the use of statistical and anonymised information</b>

Procedure reference	Name of Procedure
<b>Section C</b>	<b>Managing the protocol</b>
<b>C1</b>	<b>Approval and adoption</b>
<b>C2</b>	<b>Dissemination</b>
<b>C3</b>	<b>Confirming adoption of standard procedures</b>
<b>C4</b>	<b>Monitoring and review</b>
<b>C5</b>	<b>Reporting breaches</b>

## **Section 4 – Implementation of the protocol**

### **4.1 Structures and responsibilities**

The key areas of responsibility in relation to the protocol are summarised below.

Organisation	Responsibility
Information Sharing Steering Group	<ul style="list-style-type: none"> <li>• Dissemination arrangements</li> <li>• Training arrangements</li> <li>• Monitoring process</li> <li>• Review process</li> <li>• Monitoring compliance</li> <li>• Adjudicating on breaches</li> <li>• Approval of major amendments to the Protocol documents</li> </ul>
Lead members of the Information Sharing Steering Group	<ul style="list-style-type: none"> <li>• Implementation within organisations</li> <li>• Monitoring implementation</li> </ul>
Head of Information Governance, NHS Leeds has responsibility for Pan Leeds Information Sharing Agreements	<ul style="list-style-type: none"> <li>• Dissemination</li> <li>• Ensuring preparation of training materials</li> <li>• Liaison with partners re training programmes</li> <li>• Carrying out monitoring and review processes</li> <li>• Supporting partners in drafting ISAs</li> </ul>
Responsible to be confirmed following first review	<ul style="list-style-type: none"> <li>• Adjudicating on breaches</li> <li>• Approval of major amendments</li> </ul>

### **4.2 Disseminating the Protocol**

The Protocol will be made available to the NHS Leeds Library Service and to other appropriate organisations on request. All partners will make copies available to service users, carers and members of the public. An explanatory information sheet will be available. The documents will be available on the following websites: [www.leedspct.nhs.uk/infoshare](http://www.leedspct.nhs.uk/infoshare) [www.leeds.gov.uk](http://www.leeds.gov.uk) and [www.educationleeds.co.uk](http://www.educationleeds.co.uk)

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Training materials will be made available to support training programmes. These will focus primarily on the needs of managers and the needs of operational staff who are involved in sharing information. It is envisaged that where possible, training will be carried out on an inter-agency basis. An overview of the protocol will be available for inclusion in staff induction programmes.

As and when the protocol is amended (following review) programmes will be arranged to inform staff of agreed changes.

Further details of arrangements for dissemination are given in Procedure C2.

### **4.3 Monitoring arrangements**

Arrangements for monitoring the use and the effectiveness of the Protocol are detailed in procedure C4.

The Information Sharing Steering Group will be responsible for overseeing the monitoring and review process. Monitoring will be carried out in a number of ways:

1. Complaints received by organisations relating to information disclosure will be analysed to determine whether they relate to a breakdown or an inadequacy of the protocol.
2. Where individual ISAs specify the provision of statistics and reports, lead members will be asked to confirm receipt of these.
3. All reported breaches of the protocol will be followed up in accordance with Procedure C5.

### **4.4 Review arrangements**

The Review process will be carried out in accordance with Procedure C4.

1. Reviews will be carried out annually unless legislative changes require more immediate action.
2. One month prior to the review date, all parties to the protocol will be asked to submit feedback on the use of the protocol and put forward proposals for amendments and for addressing any problems that may have arisen. Appropriate advice will be obtained in relation to any proposed major changes.
3. Head of Information Governance, NHS Leeds will co-ordinate the review process.

## **Section 5 – Adoption of the protocol**

The parties to the protocol agree that the procedures detailed in the document provide a secure framework for the sharing of information between their respective organisations in compliance with their statutory and professional responsibilities.

### **The partner organisations agree to:**

- Facilitate the sharing of information wherever such sharing is lawful
- Implement the Protocol within each organisation
- Ensure staff adhere to the procedures and arrangements set out in the Protocol.
- Provide evidence, when requested, that agreed procedures and arrangements have been implemented
- Ensure that all agreements established between partner agencies for the sharing of information are consistent with the Protocol

**Produced by**

The Protocol was commissioned by the Board of the Leeds Full Local Implementation Strategy (FLIS) and produced by the inter-agency Information Sharing Steering Group. The Protocol will be reviewed annually.

**Disclaimer**

The contents should not be used as expert opinion, legal or otherwise. Professional advice should be sought where appropriate. Any liability arising from action taken in relation to the contents of the Protocol is excluded.

**Further information**

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