

Legal Reference

- 1.0 **Regulation 24 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014**

Outcome Statement

- 2.0 **Service users:**
- Receive safe and coordinated care, treatment and support where more than one provider is involved, or they are moved between services.
- 2.1 **This is because we comply with the regulations and will:**
- Cooperate with others involved in the care, treatment and support of a service user when our responsibility is shared or transferred to one or more services, individuals, teams or agencies.
 - Share information in a confidential manner with all relevant services, individuals, teams or agencies to enable the care, treatment and support needs of service users to be met.
 - Manage, store, transfer and share information in a way which ensures confidentiality of that information
 - Work with other services, individuals, teams or agencies to respond to emergency situations.
 - Support service user to access other health and social care services that they may need.
- 2.2 We will only share information about service users with others if the service user has given their permission, or where the law requires us to.
- 2.3 We will ensure that confidential information is held securely on your behalf and that you can access it at any reasonable time.

Policy Statement

- 3.0 Service users can be confident that when their care, treatment or support is provided by more than one service, or is transferred from one service to another, this is organised so that:
- A lead is always identified who is responsible for coordinating the care, treatment and support of the service user.
 - The service user is aware of who the lead is and how to contact them.
 - The plan of care includes arrangements for when a service user transfers between services.

- Each of their assessed needs is met by the service that is accountable for doing so; ensuring, in total, that all those needs are met.
- All those involved in the care, treatment and support of the service user:
 - a. Cooperate with the planning and provision of care, treatment and support
 - b. Have the documented plan of care available to them
 - c. Have relevant information about the service user available, where it has a direct bearing on the quality and safety of the care, treatment and support being delivered
 - d. Record the key points of the care, treatment and support they have given
 - e. Enable relevant information to be accessed in time to ensure that the needs of the person who uses services continue to be met.
 - f. Maintain clinical and professional confidentiality in relation to information held, stored or shared.

3.1 Service users can be confident that when information about their care, treatment and support needs to be passed to another service this is organised so that:

- The information includes everything the other service will need to ensure the needs of the service user are met safely, even when the transfer of information is required urgently.
As a minimum this includes:
 - a. Their name
 - b. Gender
 - c. Date of birth
 - d. Address
 - e. Unique identification number where one exists
 - f. Emergency contact details
 - g. Any person(s) acting on behalf the person who uses services, with contact details if available
 - h. Records of care, treatment and support provided up to the point of transfer
 - i. Assessed needs
 - j. Known preferences and any relevant diverse needs
 - k. Previous medical history that is relevant to the person's current needs, including general practitioner's contact details
 - l. Any infection that needs to be managed
 - m. Any medicine they need to take
 - n. Any allergies they have
 - o. Key contact in the residence that the service user is leaving
 - p. Reason for transferring to the new service

q. Any advance decision

r. Any assessed risk of suicide and homicide or harm to self and others.

- The information is transferred in time to make sure that there is no delay to the assessment of needs by the other service.
- The information is transferred in a way which maintains confidentiality at all times.
- There are no interruptions to the continuity of care, treatment and support for the service user.

3.2 Service users can be confident that when more than one service is involved at the same time in their care, treatment and support, or are planned to be in the future, the services provided are organised so that:

- All those involved understand which service has the coordinating role and who is responsible for each element of care, treatment and support to be delivered.
- Each service respects the confidentiality of information but not in a way which hinders or prevents the safe and effective delivery of care, treatment and support.
- Each service is involved when the care plan is reviewed.
- Where appropriate, all those involved discuss together the plan of care for the service user.
- It takes into account relevant guidance, including that from the Care Quality Commission which may from time to time be published.

3.3 Service users benefit from a service that:

- Wherever it is required, has in place a planned and prepared response to major incident and emergency situations. This response includes arrangements for sharing information with other providers in confidence, provision of mutual aid and arrangements for engagement with appropriate emergency planning and civil resilience partners across the local area.
- Is aware of and has arrangements in place to respond to any requirements made in relation to the service by the Civil Contingencies Act 2004.
- Reviews all of the plans that are in place and consults with others if required.

3.4 Service users can be confident that when more than one service is involved at the same time in their care, treatment and support or are planned to be in the future, the transfer of information is organised so that:

- The confidentiality of people who use services is protected.
- Information is transferred safely and securely.

- Where appropriate, the way in which information is documented, copied, stored and transferred to the other service has been agreed previously with other services, in line with laws that relate to the safe handling of information.
- Staff know the ways that are acceptable for transferring information.
- Information is transferred that:
 - a. Is relevant to the continuing safe delivery of care, treatment and support
 - b. Is factual, correct and does not include subjective opinions about the service user
- Can be shared in line with the Data Protection Act 1998 and the General Data Protection Regulations 2018.
- Staff notify the manager if information has been lost or transferred incorrectly.
- Where the manager cannot obtain consent, they are clear about the reasons and the necessity for sharing.

3.5 Service users know that they can request information to be transferred to another service and that the service will agree to transfer the information requested unless there is a good reason why they should not or cannot. If so, that reason is fully explained.

3.6 Service users are supported to access the care, treatment and support they need by the manager and staff who:

- Make them aware of other available health and social care services or support relevant to their care, treatment and support.
- Help them to approach other health and social care services or support they want to access, and that are relevant to their needs.
- Enables them, as far as possible, to access other health and social care services or support relevant to their care, treatment and support needs, provided that their care, treatment and support in their own home will not be compromised.
- Are able to register with a general practitioner, dentist and any other health service of their choice that they may require, as far as is possible.

Procedure

4.0 Each service user should be given a copy of this procedure as part of the admission process. This is in line with the manager being able to provide clear written information to the service user so as to make appropriate decisions about the performance and suitability of the service.

Name Of Service: Homecare Services & Hazelwood Homecare

Procedure Title:

Confidentiality

Ref: DC - 6.01

- 4.1 The manager should ensure that information, which is classed as confidential, is placed in a secure location where access can be restricted to those people who have the right to view the information.
- 4.2 The manager is responsible for ensuring that, apart from staff and the service user, access to confidential information is restricted to allow only those people for whom each service user has given permission.
- 4.3 If a service user, who has "Capacity", refuses permission for a person to access information relating to them, the manager should not attempt to overturn or override the decision.
To do so may constitute a breach of the service users basic human rights and is an offence.
- 4.4 The only circumstance where a service users refusal to access information can be overruled would be where the law requires such access.
This includes instances where the manager is aware that a criminal act may have been committed.
- 4.5 The manager is responsible for including "Confidentiality" as part of the induction process for staff. Each new member of staff should be given a copy of this procedure as part of induction.
Each new member of staff should receive a clearly written Job Description describing their duties and responsibilities in relation to confidentiality as they apply within the service.
- 4.6 Areas considered for classification as confidential may include:
- Paper based records
 - Computerised systems – this includes word processors, "palm tops", laptops, "notebooks" and "tablets".
 - Recruitment information
 - Other staff records – including Appraisal and Supervision.
 - Disciplinary records and complaints files
 - Business plans and market sensitive information
 - Any service user records
 - Conversations held or heard
- 4.7 **Definition of Confidentiality –**
There are two forms of confidentiality:
- **"Relative Confidentiality"**
Information held or supplied is used in a responsible way. Information is used for the benefit of individual staff members or service users concerned.
There are systems in place which safeguard and minimise the risk of misuse.
 - **"Absolute Confidentiality"**
Information is never recorded or documented in any form
Information is not discussed, commented on or shared.
It is a very difficult form of confidentiality to promote, examples of which are:
 - a. Doctor / patient confidentiality (although some notes do exist)
 - b. Parish Priest through the confessional
- 4.8 The manager is responsible for ensuring that service users are aware that "Absolute Confidentiality" cannot be guaranteed.

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- 4.9 All records should normally remain within the secure control of the service.
If records need to be taken or sent to another location the manager should ensure that a suitable, safe and secure method is used.
- Fax transmissions are not considered safe for confidential information as there is no guarantee who will receive the document at the recipients end.
- E-Mail is not considered to be secure for confidential items unless the recipient is able to ensure security of receipt at their end.
- 4.10 Where records or post is marked "Private and Confidential", the item should not be opened or shown to anyone other than the addressee.
- 4.11 Records held on computer (or other electronic storage and retrieval system) should be protected by an effective back up and retrieval system.
- 4.12 The manager should ensure that any back up system maintains the security and integrity of the originals and additionally ensures that these copies are erased or destroyed when no longer required.
- 4.13 Computer screens should never be left unattended with service user or other sensitive information on the screen.
- The use of screen savers and "sleep mode" systems should be promoted.
- 4.14 The manager may consider the use of password protection for files, folders or drives on the computer as a means of preventing unauthorised access to information.
- 4.15 The manager should ensure that information held is stored in line with the requirements of the Data Protection Act 1998 and the General Data Protection Regulations 2018.
- 4.16 Under normal circumstances information should not be given over the phone unless:
- The service user or staff member gives their permission
 - In an emergency to 999 call centre staff
 - Where requested by a care professional in respect of the care of a service user whose identity is known and is involved in the care of the service user.
 - If there is no other practical means of passing information.
- 4.17 In such cases the senior member of staff on duty must be satisfied that the person receiving the information has been able to properly prove their identity.
- 4.18 Staff at all levels must be aware of the potential breaches of confidentiality that can occur during casual conversations.
- Some service users will try to illicit information about another service user from staff and everyone should be aware that what they say, how they phrase it and the tone of their voice may be misinterpreted by others.

In order to minimise risks, staff should:

- Not talk about another service user in conversation with other service users.
- Not conduct confidential or private conversations in corridors or communal areas.
- Not conduct handover meetings with service users present
- Not discuss service users outside their home with people not employed in the service. They are not bound by the same rules of confidentiality as staff are.

The Following Evidence Will Demonstrate That The Required Outcomes Are Being Met And Relevant Standards Achieved

5.0 There is evidence that:

- Staff have undertaken training in confidentiality
- When asked, staff can explain the difference between “absolute” and “relative” confidentiality
- Personal records for staff and service users are kept in lockable cupboards or cabinets
- Where information is passed outside the service for analysis (e.g. to head office) these records are “anonymised” so as not to identify an individual by name
- Service users confirm that they have been given a copy of this procedure

Training Required

6.0 Staff should be aware of the following:

- What is confidentiality?
- Induction and foundation training should cover service user and personal confidentiality.
- What is the difference between “absolute” and “relative” confidentiality?
- What other agencies or service may require access to information at some point?
- What are the confidential matters in relation to the service or service users which must not be divulged?

Forms And Referenced Documents For This Procedure

7.0 Reference - Data Protection Act 1998 and the General Data Protection Regulations 2018

7.1 Form 010 - Communication Book

7.2 Reference - Statement of Purpose