

# Bacup and Rawtenstall Grammar School



## Confidentiality and Information Sharing

## **Bacup & Rawtenstall Grammar School Policy on Confidentiality and Information Sharing**

This policy is based on guidance from the Pan-Lancashire Policy and Procedures for Safeguarding Children Handbook concerning confidentiality. The quotations used are taken from this document. It also relates to guidance provided in:

- The Ethical Framework for Good Practice in Counselling and Psychotherapy (BACP 2013)
- The Code: Standards of Conduct, Performance and Ethics for Nurses and Midwives (NMC 2008)
- 0-18: Guidance for all Doctors (GMC 2007)

### **Introduction**

This policy is about sharing information for the purposes of safeguarding and promoting the welfare of children. Sharing of information amongst professionals working with children and their families is essential. In many cases it is only when information from a range of sources is put together that a child can be seen to be in need or at risk of Significant Harm.

We will follow the guidelines given in the Pan-Lancashire guidance relating to information sharing generally (see link below). The focus of this policy is to make it clear when we will share information disclosed to us by students – this may be information to be shared with parents/carers or health professionals.

The policy does not relate to the sharing of “standard information” – progress grades, attendance figures, behaviours – with parents/carers.

### **Context**

Within school there are times when students disclose information to staff. This may be a request for support – some medical assistance or a request for counselling; it may be information disclosed within a counselling session; it may be the disclosure of self-harm or of some other form of abuse. In all situations we will consider the student’s right to confidentiality and we will not share this information without their consent to do so, with certain exceptions – see section below on over-ruling consent.

### **Consent**

Consent must be 'informed' - this means that the student giving consent needs to understand why information needs to be shared, what will be shared, who will have the information, the purpose to which it will be put and the implications of sharing that information. A student or young person who has the capacity to understand and make their own decisions, may give (or refuse) consent to sharing.

Children aged 12 or over may generally be expected to have sufficient understanding (this is presumed in law for young people aged 16 or 17). Younger children may also have sufficient understanding – in fact, we would consider nearly all students at BRGS as having the capacity to understand “informed consent”.

“When assessing a child's understanding you should explain the issues to the child in a way that is suitable for their age, language and likely understanding. Where applicable, you should use their preferred mode of communication.

The following criteria should be considered in assessing whether a particular child on a particular occasion has sufficient understanding to consent, or refuse consent, to sharing of information about them:

- Can the child understand the question being asked of them?
- Does the child have a reasonable understanding of:
  - What information might be shared?
  - The main reason or reasons for sharing the information?
  - The implications of sharing that information, and of not sharing it?
- Can the child:
  - Appreciate and consider the alternative courses of action open to them?
  - Weigh up one aspect of the situation against another?

- Express a clear personal view on the matter, as distinct from repeating what someone else thinks they should do?
- Be reasonably consistent in their view on the matter, or are they constantly changing their mind?

If a student is competent to give consent, then their consent or refusal to consent is the one to consider even if a parent or carer disagrees.”

The information above relates to “Fraser Competence”. Fraser (or Gillick) competence relates to a legal case (1982) which looked specifically at whether doctors should be able to give contraceptive advice or treatment to under 16-year-olds without parental consent. Since then, it has been more widely used to help assess whether a child has the maturity to make their own decisions and to understand the implications of those decisions.

Parents should be clear of the impact of the above. **In all situations, unless the student is considered to be at risk from parent/carers**, we will encourage/persuade students to share information with their parent/carers (and would ask for consent to seek further professional advice, if needed). This information may be that they have requested counselling; it may be relating to something they disclose in a counselling situation; it may be that they reveal to us that they are self-harming. In any of these situations, if students do not give us consent to share information with you, we are required to respect their request for confidentiality, with certain exceptions (see over-ruling consent, below). This would also be the case were a young person to visit their GP in confidence. The GP would always seek to encourage the young person to share information with parent/carers, but would not break confidentiality – except in certain circumstances.

### Over-ruling consent

In a situation where a student cannot give consent or where we judged them as not “Fraser competent”, parents would be informed as a matter of course. However, as mentioned earlier, we would class the vast majority of our students as “Fraser competent”.

We will, however, act without the student’s consent (but with their knowledge):

- When there is evidence that the student is suffering or is at risk of suffering Significant Harm
- Where there is reasonable cause to believe that the student may be suffering or at risk of Significant Harm
- To prevent Significant Harm arising to others, including through the prevention, detection and prosecution of serious crime, i.e. any crime which causes or is likely to cause Significant Harm to a student or serious harm to an adult.

Where it is necessary for a student to be transported to hospital or require the urgent intervention of mental health professionals we will consider this to be a situation of potential Significant Harm and will contact parents/carers with the knowledge of, but possibly without the consent of, the student.

Where there has been a concern of Significant Harm school will liaise with parents/carers, health professionals and the student to ensure a safety monitoring plan is devised.

### Parental role

It is natural for parent/carers to want to know what is taking place in the life of their child. Additionally, it may seem strange that school is withholding information from parent/carers at a student’s request. As mentioned above, **school will always seek to encourage/persuade** a student to share information with parent/carers (unless they are deemed to be at risk from parent/carers). We will also offer to act as intermediaries to sharing, or to share information on a student’s behalf. Parents can help to facilitate sharing if they are able to provide plenty of opportunities for their children to share information and that they seek to create supportive “it doesn’t matter what’s wrong, we can always get through it together” environments at home.

### For reference

Pan-Lancashire Policy and Procedures for Safeguarding Children Handbook:

<http://panlancshirescb.proceduresonline.com/chapters/contents.html>