



**Barnardo's NI response to
The Department of Health Consultation on the Draft
Guidance on Information Sharing for Child Protection Purposes**

July 2019

Barnardo's NI is the largest children's charity in Northern Ireland. We work with approximately 11,000 children, young people and families across more than 40 different services and programmes. We are also a leading provider of schools-based child support services in Northern Ireland with a presence in approximately 250 schools, reaching more than 12,000 children in schools in Northern Ireland, and more than 11,000 children in schools in other parts of the UK through our NI-managed social and emotional literacy schools-based programmes.

We deliver a wide range of services across Northern Ireland, from providing family support and early intervention, to working directly with children and families who have experienced adversity and need our support. We believe that every child deserves the best possible start in life, and our service provision reflects that philosophy.

Barnardo's NI welcomes the opportunity to comment on the draft guidance on Information Sharing for Child Protection Purposes. Our comments are informed by our experiences of delivering services that support children, young people and families and working with a wide range of stakeholders, including Health and Social Care Trusts, in the course of that service delivery.

We welcome the development of this draft guidance and believe it is a helpful and robust resource which will provide much needed clarity on information sharing for child protection purposes, including between agencies. We also wish to explicitly welcome the guidance offered on consent in point 3.22, as we believe this will have positive implications

going forward. However, we wish to make some brief comments in relation to the following areas:

- Clarity of communications
- Co-operating in the best interests of the child
- The importance of effective information sharing

1. Clarity of communications

Whilst we recognise the draft guidance contains a wealth of material and is a useful reference resource, we strongly believe it is necessary to develop a condensed version for easy accessibility for day-to-day use. We know from our own experience of service delivery that social workers and other professionals working in this area are frequently under time pressure, and it would be unrealistic to expect professionals to consistently refer to the full guidance, which could mean the guidance isn't implemented effectively and lead to the delays or lack of information sharing experienced in the past. A condensed paper drawing out the points already emboldened in the draft would support effective, consistent implementation of the guidance by highlighting the key points, with references to the full guidance available if further clarity was needed in any instance.

In addition, full training for all health professionals to whom this guidance applies should be rolled out as part of the implementation. With the recent introduction of GDPR, information sharing has received much attention but with that has come some confusion, lack of clarity and fear of making a mistake, leading to reluctance to share information even when it should be shared. Training on the implications and implementation of this guidance, along with an easily accessible briefing sheet on the guidance, could help ensure a common understanding of the guidance and its effective implementation across Trusts. We also urge that some of the points within the guidance are clarified, to consider a range of scenarios. For example, it would be helpful to have more clarity around the roles and expectations of providers and commissioners in relation to subject access requests (3.30). Similarly, we have concerns that the proportionality aspect (3.37) could lead to confusion and subjectivity; we recommend that practitioners are supported to make consistent and informed decisions, and that learning from serious case reviews is applied to this process on an ongoing basis.

2. Co-operating in the best interests of the child

We welcome the emphasis on the child's best interest and the recognition of the child's rights under the UNCRC. The best interests of the child should be paramount in the consideration of information sharing, and should act as the underlying theme throughout this guidance. Information sharing that is in the best interests of the child's wellbeing should be promoted through this guidance.

On a related point, we suggest that Section 2: Legal Framework for Information Sharing for Child Protection Purposes should reference the Children's Services Co-operation Act (Northern Ireland) 2015.

Further, we recognise that for information sharing for child protection purposes to be effective, there must be professional trust between sectors, with the third sector viewed as a partner in child protection. We recommend this is supported by the training mentioned above. To support effective implementation of the guidance, it will be important that Health and Social Care Trusts (HSCTs) work with the third sector. We recommend that the final guidance is circulated and disseminated widely within the third sector to promote parity and reciprocal information sharing, with the aim of improving outcomes for children.

3. The importance of effective information sharing

The nature of our work in Barnardo's Northern Ireland means we need to understand a child's story, and be able to assess risk effectively. We need to know the 'big picture' of a child's life in order to identify and provide the right intervention that will lead to the best outcomes. We also need to be in a position to accurately assess potential risk to other children in our care who are accessing our services. It's therefore important that we have as much information as possible about a child to inform those decisions, and that we receive this information in a timely manner. Some example scenarios could include:

- If we received 'LAC' information about a child coming into a residential facility but didn't know that they had demonstrated an active interest in arson, there could be a risk to other children in the residential accommodation.
- If a child was referred to one of our services but we were not informed about instances of their harmful sexual behaviour (considered unrelated to the referral for the service), we would not be in a position to identify the best intervention for that

- child, and it could also pose a potential risk to other children accessing the service.
- When there are separate 'LAC' reviews for siblings and there is no interconnectedness between the children's pathways, we don't see the full picture of that child's experience and links to their family; this impacts on our ability to effectively work with that child, both in terms of identifying appropriate placements and understanding the extent of the child's trauma and adverse experiences (ACEs).

When referrers, including HSCTs, share a wider range of information relevant to the child's wellbeing, we as a provider are better positioned and informed to deliver the most effective intervention to promote better outcomes for that child in line with their best interests, as well as ensuring we have the information we need to protect other children accessing support.

We welcome the publication of this draft guidance. We hope our comments are useful, and we would be happy to engage further in the ongoing development of the guidance. We look forward to working with the HSCTs to support its implementation when finalised.

For further information, please contact:

Julia Buchanan

Assistant Director, Policy

Barnardo's NI

julia.buchanan@barnardos.org.uk