

Adult Social Care Restricted Records Policy

CareDirector – ASC Case Management System

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Restricted Records Policy

Directorate:	Social Care, Health, and Housing (SCHH)			
Division & Service:	Adult Social Care / Resources			
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1. Introduction

- 1.1 This policy is intended for use for person records held within CareDirector. Person records held in CareDirector should be treated in line with relevant data protection guidelines.
- 1.2 Records held within CareDirector (adult social care case management system) will typically be personal and sensitive information. There will be occasions when these records need to be restricted/limited to specific teams or staff members.
- 1.3 This policy explains the circumstances when it may be necessary to restrict these records and the guidelines that should be followed to ensure that people have the right access to information that they need.

2. Legislation and Regulatory Framework

2.1 Relevant legislation:

- General Data Protection Regulations 2018
- Data Protection Act 2018
- Freedom of Information Act 2000
- Health and Social Care (Safety & Quality) Act 2015: Duty to Share
- Professional Standards (Social Work England)
- Caldecott Review: Information Governance

2.2 Relevant Central Bedfordshire Policy:

- Information Security
- Data Protection
- Records Management

3. Principles of the Policy

General Principles

- 3.1 Information about people who use services should be available as and when it is needed i.e. where there is a business need to do so, (unless a decision has actively been made to restrict access to that information).
- 3.2 All CareDirector users are expected to treat information as confidential and use it in line with Data Protection guidelines.
- 3.3 CareDirector users should not access information which is not related to the work they are carrying out.
- 3.4 Restricted records will be available to specific teams or users to enable them to maintain the wellbeing, and safeguard the person using services.
- 3.5 When requesting restrictions, the request will be to either allow only a user or team to view this record or deny a user or team to view this record.

- 3.6 Decisions for restricting a record should consider:
 - Necessary and proportionate: Any accessible information must be proportionate to the need and level of risk.
 - **Relevant**: Only information that is relevant to the purposes should be shared with those who need it.
 - **Timely**: Information should be shared in a timely fashion to reduce the risk of harm. Timeliness is key in emergency situations.

4. Restricting Records

Reasons for restricting records

- 4.1 A record may be restricted in CareDirector when (reasons not limited to):
 - a person using services is related to or a friend of a staff member who works for CBC only
 if working directly with adult social care and has access to CareDirector in the normal
 course of business.
 - the person is an anonymous registered person.
 - the record contains sensitive information or relates to someone with a high media profile, and it may be inappropriate for this to be available to all practitioners/CareDirector users.
 - giving King's Court evidence/witness protection and it may be inappropriate for this to be available to all practitioners/CareDirector users.
 - forced marriage and it may be inappropriate for this to be available to all practitioners/CareDirector users.
 - fleeing domestic violence and it may be inappropriate for details to be available to all practitioners/CareDirector users.
 - a person requests any part of their record is restricted in line with data protection/GDPR regulations.

Other reasons/circumstances

 Sensitive – Interim Restriction: An interim restriction may be needed where a case may involve sensitive or high-profile circumstances that require further discussion/decision regarding the need to restrict a record.

Types of data restrictions

- 4.2 There are 3 types of restrictions:
 - Named Worker/Team Restriction Deny specific user(s) or team(s) access to a record.
 - **Record Restriction** specific records relating to a person are restricted.
 - **Total Restriction** Used in exceptional circumstances only, allows only specific CareDirector users and/or Teams access to the record.
- 4.3 Typically, when a restriction request is submitted, it will be a named worker/team restriction to deny access to specific people or teams. If there is a need for wider total restriction, this must be discussed and agreed with the Head of Service.
- 4.4 Record restrictions would be applicable when a person requests specific parts of their social care records are restricted in line with data protection regulations i.e. a team has been asked not to share an assessment wider than their specific service area. If a record restriction is

- required, details of the which record this applies to should be specified in the ServiceDesk ticket.
- 4.5 If a request is made for a total restriction, there may be a requirement for other team(s)/role(s) to retain access to the record following the restriction. Details of who will retain access will be detailed in the total restriction request.
- 4.6 Where system access is limited, senior management roles can contact the Team Manager or Operational Manager to request information.

Decisions to restrict a record.

- 4.7 Any member of staff who becomes aware of an issue that may require the restriction of a record should notify their Team Manager/Operations Manager.
- 4.8 A discussion will take place about whether the record should be restricted. This meeting will include:
 - Team Manager
 - Allocated Worker
- 4.9 Recommendations will be made to the Operations Manager, who will make the final decision. Complex requests may require agreement from the Head of Service.
- 4.10 Any restriction to records should be by professional judgement and informed by the agreed standards. Consideration should also be given to whether this should be time limited and whether there is a named worker restriction, total restriction (except to allocated worker and line manager) or partial restriction e.g. outside of the team etc.
- 4.11 Information access decisions should be recorded whether the decision is taken to restrict records or not. If the decision is to restrict records, the reasons for this decision should be recorded and explained to the relevant parties where necessary.
- 4.12 A person's restricted records will include reference to the restriction (see section 4.14).

Requesting a record restriction/amending a restriction

- 4.13 To request a record is restricted/amended, the Team Manager should create a ticket via the ServiceDesk portal: "CareDirector Restriction Required" (see appendix 1).
- 4.14 When completing this form, the user should state the reason for the restriction and whether this will be permanent or temporary. The ticket should be cc'd to Operations Manager so that Operations Manager can confirm approval.
- 4.15 Once the restriction has been actioned by the Service Desk, the person record will be updated to include reference to the restriction, including the requestor name and the Service Desk ticket number only.
- 4.16 This information will also be included on a spreadsheet maintained by the CareDirector System Admin Team and will provide a cross reference to the Service Desk form, and reason for restriction.

5. Reviewing or Removing Restrictions

5.1 Records that are restricted should be reviewed on an annual basis, however restrictions can be lifted, reviewed or amended anytime to meet business need i.e. as time progresses, different staff, teams or roles may require access to a record which is restricted.

- 5.2 Reports of restricted records are undertaken by the CareDirector System Admin Team. These reports can be requested by Operational Managers and may initiate a discussion to remove the restriction.
- 5.3 A review discussion will take place prior to restrictions being removed/amended by the CareDirector Business Support Team. This should include:
 - Team Manager
 - Allocated Worker
- 5.4 Recommendations will then be made to the Operations Manager, who will make the final decision regarding removal.
- 5.5 Removal of restrictions will follow the same Service Desk process as described above (para 4.12).

6. Equality and Diversity

- 6.1 All SCHH policies are accompanied by an EIA (where applicable) and an implementation plan that sets out monitoring and reporting arrangements available in relation to this policy.
- 6.2 The Council is proactive about putting in place arrangements to ensure that we do not unfairly discriminate against individuals on the grounds of their protected characteristics. Equality is integral to the way in which any support is prioritised and delivered.

7. Evaluation and Review

7.1 This policy will be evaluated within 12 months of approval and validation and be reviewed every 3 years or sooner if any service changes impact on this document.

8. Appendices

Appendix 1 Service Desk – Restriction Request Form

Appendix 1 - Service Desk - Restriction Request Form

