

Freedom of Information Act 2000 disclosure log entry

Reference

23-24048

Date response sent

31/05/23

Subject

SHARE Suicide Prevention Guidelines

Details of enquiry

1. Do A&E and mental health specialist staff follow the SHARE guidance regarding CONSENT, CONFIDENTIALITY & INFORMATION SHARING IN MENTAL HEALTHCARE & SUICIDE PREVENTION? https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/1013010/zero-suicide-alliance-share.pdf
 - a. If not, what guidance or protocol do you follow regarding vulnerable patients?
 - b. If so, do you provide training on this guidance? Is this training mandatory?
2. In the last year, or six months should this exceed the cost limit, how many times was this protocol enacted?
Essentially, I would like to know how many times did your NHS trust shares information about somebody being at risk of suicide with another agency, including police, councils, social workers.

Response sent

1. Do A&E and mental health specialist staff follow the SHARE guidance regarding CONSENT, CONFIDENTIALITY & INFORMATION SHARING IN MENTAL HEALTHCARE & SUICIDE PREVENTION? https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/1013010/zero-suicide-alliance-share.pdf

We can confirm that we follow Share Guidelines as per 'The Share: Consent, Confidentiality And Information Sharing In Mental Healthcare And Suicide Prevention, published 26 August 2021'.

SHARE means:

- Seek consent to share information
- Have regard to the law, rules and regulations
- Always act in the patients' best interests
- Record all discussions and activities
- Ensure service user confidentiality is respected

We also follow this type of guidance, through a number of other service delivery frameworks and processes, rather than a linear approach of adhering to SHARE guidelines.

- a. If not, what guidance or protocol do you follow regarding vulnerable patients?

Some of these mechanisms are Mental Health Act 1983, Mental Capacity Act 2005, aligned to the North Central London Crisis Concordat approach.

For example, at the point of admission to our services, patients state to whom they give consent to share their information.

However in all instances where a patient is deemed to present immediate risk to self and/or others, we enact the above frameworks, open to Mental Health services and Acute care, to ensure that information is shared with relevant professionals and/or next of kin to ensure the patient's safety. This would be in line with our data sharing procedure, and Consent to Treatment Policies, both currently in effect, though we are working on an updated version to be issued in the future. [Data sharing procedure](#) and [Consent to treatment policy and procedure](#)

3. In the last year, or six months should this exceed the cost limit, how many times was this protocol enacted?

Essentially, I would like to know how many times did your NHS trust shares information about somebody being at risk of suicide with another agency, including police, councils, social workers.

Whilst we confirm that the Trust holds information falling within this scope, our computerised patient records system does not have a specific electronic field to capture this information, so it would be entered as freeform text within the notes section of a patient's file, and so we cannot run a report electronically to extract this information.

We have estimated that it would require resources beyond those provisioned under section 12 of the Freedom of Information Act 2000 (FOIA), to manually trawl through all patient files over the last 6/12 months to identify, extract and collate such data into a report.

Spending up to 30 minutes per patient file to manually search for signs of a patient in crisis, eg suicidal thoughts, and to then identify and extract this data would take circa 500 hours (13 weeks) of officer time per 1,000 files.. Section 12 of the Freedom Of Information Act 2000 (FOIA) allows a public authority to refuse questions where it estimates that the work required would exceed the appropriate limit. The appropriate limit for the NHS is currently set at £450 which equates to 18 hours of staff work calculated at a generic rate of £25 per hour. Accordingly, the Trust is not obliged to respond to this question and so we will not be processing it further.

Should you wish to narrow the scope of this question, eg for a period of a week in a given department, then the Trust would treat any reformulated request we receive as a fresh FOI request and we may be able to help you further.