

# **FAMILY EDUCATION TRUST**

**RESPONSE TO THE DEPARTMENT FOR EDUCATION AND SKILLS DOCUMENT ON:**

## ***Information Sharing Databases in Children's Services: consultation on recording practitioner details for potentially sensitive services and recording concern about a child or young person***

(see <http://www.dfes.gov.uk/consultations/conResults.cfm?consultationId=1280> for the consultation document)

We are writing in response to the consultation paper to express some of our concerns about the proposal to establish information sharing databases in children's services.

### **1. The rationale for the databases**

The consultation document sets the inclusion of every child's details on a database in the context of 'a shift in focus from reaction when things have gone wrong, to prevention and early intervention' (2.2). However, given the fact that the vast majority of the 11 million children in England and Wales are not at risk and never will be, the proposal to store basic details about each and every child appears unnecessary and disproportionate. It could also be counterproductive, since the greater the volume of information to be stored on the database, the greater the scope for errors in data input and maintenance.

Rather than establishing a system where the majority of records will never show an indicator of concern and will never need to be accessed, it would make more sense to enter details about a child at the point when a practitioner first feels the need to raise an indicator of concern. The resulting system would be less cumbersome, easier to manage, more accurate and more focussed.

If the government is determined to proceed with the proposal to establish information sharing databases, we would recommend that not only should the information stored be kept to a minimum, but also the number of children concerning whom data is stored should also be kept to a minimum.

### **2. The limitations of information sharing databases**

The government's track record with information databases does not inspire confidence. To take just three examples, in recent months major problems of efficiency, accuracy and confidentiality have been experienced with systems operated by the Inland Revenue, the Child Support Agency and the National Health Service.

To embark on the establishment of databases containing basic details of every child in England and Wales would not only be costly in terms of finance, time and resources, but also an extremely hazardous exercise.

Paragraph 2.26 of the consultation document envisages that designated practitioners from a broad range of statutory services would have access to the database. On top of that it is envisaged that practitioners from an even wider array of targeted and specialist services would be able to access the database to record their contact details on the record of a child with whom they were in contact (para 3.5). Irrespective of whether the inclusion of the latter group of practitioners is made subject to consent, this represents a considerable number of practitioners who would have access to the database. Yet the greater the number of people who have access to the data, the greater the risk to security, and the greater the scope for abuse of the system.

In our view, these considerations lend weight to the argument that if it is decided to proceed with databases at all, they should be set up on a much smaller scale, containing details only of children known to be at risk. There is no need for statutory services to share information about children where no danger of abuse exists.

### **3. The role of parents**

We are concerned by the way in which the consultation document places a strong emphasis on sharing information with a wide range of practitioners, but takes little account of parents either as providers or receivers of information.

Parents are the primary carers of their children and possess unique responsibilities towards them. They are the key links between their children and all the statutory services listed at para 2.26. They also have a keen interest in any of the targeted and specialist services that their children may receive, such as those listed in para 3.5.

Parents are therefore uniquely placed to put practitioners in touch with each other where the need arises, and the information provided by a parent is likely to be far more reliable and up to date than information stored on a vast database. Therefore if a social worker needs details of a child's GP or educational setting, in the vast majority of cases that information can be readily obtained from the child's parent.

Of even greater concern, however, is the reference in the consultation document to safeguarding the confidentiality of children aged 12 and over with a view to keeping parents in the dark about any 'sensitive services' their children may be accessing. Paragraph 3.6 indicates the government's sensitivity to the concerns of some young people that:

*'their parents might indirectly find out that they are using services when they do not wish their parents to know about this. These arguments could apply to a range of services including social services and services in relation to youth offending, mental health, substance misuse, sexual health, contraception, HIV, and abortion. We do not want to deter children and young people from accessing the services they need'.*

We are deeply concerned by the assumption that once children have reached the age of 12, they are to be treated them as autonomous individuals, unaccountable to their parents. If a child is receiving services from practitioners listed in para 3.5, we believe the presumption should be that their parents should know about it. If a child is in contact with a social worker, police officer, educational psychologist, or specialist clinic etc, it makes no sense to exclude the ones who bear legal responsibility for them and must live with the consequences of decisions that may be made concerning them.

By suggesting that children ages 12 and over should be able to conceal from their parents their involvement with such services and particularly with ‘personally sensitive’ services such as contraception, sexual health and abortion, the government appears to have missed the point that when young people want to keep their parents in the dark about something, it is invariably because they are involved in something that is not good for them.

Apart from in the most exceptional circumstances, it is more important that such information is shared with parents than with anyone else. Any information sharing system that excludes parents and keeps them out of the loop unless their children give explicit consent to include them, is failing to pay due regard to the family unit and is not serving the best interests of children.

Where services to children and young people are concerned, the first priority should be to share information with parents, not with anyone but the parent.

#### **4. The absence of a formal ‘educational setting’**

In the event that the government proceeds with its plan to include the details of each and every child on an information sharing database, we are concerned that the mere absence of a formal educational setting should not generate an indicator of concern.

We note that the legal responsibility rests with parents provide children of compulsory school age with an ‘efficient full-time education, suitable to [their] age, ability and aptitude and to any special needs [they] may have, either by regular attendance at school or otherwise’ (Education Act 1996, s.7). While the majority of parents in England and Wales send their children to a state or independent school, some fulfil this responsibility in a variety of other ways. For example, some employ personal tutors, while others make use of tutorial groups of various kinds; still others take personal responsibility for their children’s education, sometimes with the assistance of informal co-operative groups. The absence of a formal educational setting should therefore not be taken to indicate that the child is at risk.

If the database were to be limited to children who were the subjects of concern, this issue would not arise. Details of persistent truants and children excluded from school could be recorded without the risk of their being lumped together with children receiving a full-time and efficient education outside a formal educational setting.

#### **Conclusion**

We remain unpersuaded of the need for the introduction of information sharing databases in children’s services. To store basic details of each and every child on a database would be a costly and hazardous exercise and the track record of other government departments does not inspire confidence in terms of ensuring accuracy and confidentiality.

If the government decides to proceed with the establishment of information sharing databases, we would recommend that:

- Details of children should be added only at the point where an indicator of concern becomes evident (i.e. basic details of each and every child should not be included as a matter of course),
- Information stored on the database should be kept to a minimum, and
- The number of practitioners granted access to it should also be kept to a minimum

We would further recommend that the absence of a formal educational setting should not trigger an indicator of concern, and that parents should be at the heart of any information sharing regarding their children and not excluded from it.

19 January 2005