

Mr Andrew Cox
Coroner for Cornwall & Isles of Scilly
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Addaction Cornwall
Western House
Tabernacle Street
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13/02/2019

Dear Mr Cox

Re: Regulation 28 letter (12th December 2018) ref AJC / KC

Addaction recognises the importance of confidentiality which is essential to the effective running of our services. We recognise the right of individuals in having their personal information protected and as such operate strict practices to ensure that personal information is held securely and shared appropriately. We seek consent from clients in order to share this information with other organisations and people, including their General Practitioner and we have a duty to inform our clients and service users of how we process, store and share this data under the GDPR 2016.

Many people are apprehensive about engaging with addiction services and there is a real concern within the field that routine information sharing with GPs could create a barrier to accessing treatment for some individuals. People who use our services have a right to expect that information about them will be held in confidence by their workers and that they will be treated with discretion and sensitivity when accessing Addaction's services. Our Confidentiality and Consent policy is based on the principle that the client's wishes and rights are of fundamental importance and draws upon guidance produced and published by Public Health England (Confidentiality Toolkit v6.3).

Following the inquest into the death of Mr Benjamin Colin Williamson on November 8th you wrote to [REDACTED], Operations Manager asking that Addaction review the processes/procedures in place for dealing with consent and the sharing of information with Primary Care providers. In addition you asked that we involve [REDACTED] so that lessons learned would be identified and shared.

I am writing to confirm that we have internally reviewed and improved how we record confidentiality and consent reviews, shared copies of Addaction's consent and confidentiality policy (DQ225) and met with [REDACTED] and colleagues at the Mullion Health Centre on 30th January 2019 to identify lessons learned and agree any required improvements.

Improvements to recording confidentiality and consent reviews within Addaction

Since December 2018 we have introduced a monitoring function into our patient management system (Halo). This will ensure that the three monthly reviews are conducted and recorded in line with our policy requirements. We now have ability to run reports,

identify where reviews are required and monitor this through line management/supervision processes.

Review consent and information sharing procedures with Primary Care.

In the Mullion Health Centre a Summary Care Record (SCR) is created for all patients that enables staff providing care for patients in an emergency, from anywhere in England, are made aware of any current medications or allergies the patient may suffer from. This information from every patient record is sent automatically. If patients wish their information to be withheld from the SCR, they can choose to stop this from being shared (i.e. Opt-out).

At Addaction clients are asked for consent, usually by signing a consent form, detailing with whom information can be shared, what information will be shared and for what purpose (i.e. Opt-in). Consents should be reviewed and updated regularly, normally every three months for adult services as part of the client's recovery plan review.

In addition when Addaction provides a regulated activity, such as a home detoxification, a BBV vaccination or a treatment for hepatitis C this is **conditional** on information being routinely shared with the GP. Likewise the GP is required to provide Addaction with a SCR and regular updates.

Some Addaction staff work from a number of GP practices across the county, including the Mullion Health Centre, to improve accessibility and to 'normalise' obtaining help from specialist services. However we recognise that there are a number of patients who prefer to be seen away from their local Health Centre and that barriers to treatment could be created were other provision not made available.

Addaction encourages workers to gain consent to share information with GPs and generally most people do not object to this. We examine those who decline to share information with their GP to ensure that risks are identified, assessed and managed. However Addaction does not operate a policy of absolute confidentiality and there are a number of circumstances that legally or ethically override the need for confidentiality.

Our colleagues in Primary Care recognise that some patients will be reluctant to allow information to be shared with their GPs or attend specialist provision within the practice, preferring to access help and support in other locations. In Benjamin's case decisions around information sharing with his GP and where he accessed sessions may have been influenced as his mother [REDACTED] worked at the Mullion Health Centre. Addaction is clear that the informal communication between a parent and their employer should not replace formal communication channels between those involved in a clients care and we have reinforced this with all our staff members.

Whilst no policy changes were recommended through the review process, moving forward the following actions have been agreed

1. Addaction has agreed to provide the Health Centre with the numbers of clients registered at the practice who are accessing our services.
2. In order to improve communication our designated practice worker will attend the practice multi-disciplinary team meetings. They will also be able to access the patient

management system (SystemOne) to improve information sharing between the services and update records as required.


3. Where consent to share information with a GP exists, Addaction will inform them at an earlier stage regarding plans to cease structured treatment / move to support that the client initiates (known as Recovery Support)

In summary Addaction has reviewed the processes and procedure in place for dealing with consent and the sharing of information with primary care practitioners. Since December 2018 we have implemented a number of changes to improve the timely review and recording of client consent and information sharing permissions. We have shared our policies and improved awareness of our approaches with our Primary Care Colleagues and how they differ to those routinely implemented in General Practice. We have agreed a number of actions to improve information sharing particularly for clients like Benjamin who are not in receipt of a regulated activity.

We hope that this response demonstrates the importance Addaction attaches to learning and continuous improvement. If you need any additional information please contact me.

Yours faithfully




Contract Manager
Addaction Cornwall