

Date: 20<sup>th</sup> December 2018

**Swandean – Trust Headquarters**  
Arundel Road  
Worthing  
West Sussex  
BN13 3EP

Dear Colleague

**Sharing information with families and carers – saving lives –  
message from Chief Executive**

We wrote to you last year about this. The importance of this stems from some work carried out by Papyrus (prevention of young suicide). A number of you reported how helpful this letter was and this is why we are sending it again. It has become apparent that clinicians may find themselves unclear and lacking in confidence when it comes to making a decision about what they can tell families and friends about their loved one's care and treatment. Staff may feel that this is a complex process and that they can still get it wrong and so take the view that not sharing is the safest option.

**We therefore want to say to all of you I want to say to all of you that we would rather support you for saving a person's life by potentially breaching confidentiality than have to explain why we held on to information that could have made a difference.**

It is an important part of your job to help carers and families' to understand the type of illness that their loved one is struggling with particularly if they are asking for your help. This does not necessarily mean that you are sharing information about the patient's individual symptoms. More general information about conditions and treatment can be very helpful. Even if the service user does not consent to information sharing there are no barriers to **receiving** information and listening to carers. The work you have been doing on triangle of care explains this.

Developing a clear understanding of what a particular service user wants begins with a simple, sensitive conversation on consent and information sharing. Ideally, this conversation should happen at a very early stage: initial assessment or admission to hospital. Having an open conversation with the service user helps us all begin to develop a strong, shared understanding and agreement as to what can and can't be shared and with whom.

The information sharing conversation is definitely not a tick-box exercise. It is personal. It is individual. It might be difficult balancing interests, but this should not be a barrier. Circumstances do change. So it is vital that you return to the sharing information conversation regularly. It is also vital that details of their carer/s are recorded in Care Notes.

We want to assure you that you will always have our support in sharing appropriate information with family members or other carers who can help when it is related to safety. The key principle is what is in the best interests of the service user.

With our thanks as always,

**Samantha Allen**  
Chief Executive

**Acosia Nyanin**  
Chief Nurse

**Rick Fraser**  
Chief Medical Officer &  
Caldicott Guardian

Chair: Peter Molyneux

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