

EXAMPLE 1

Requesting information in early childhood

This example covers:

- sharing without consent
- collaboration between Information Sharing Entities (ISEs) and Risk Assessment Entities (RAEs)
- seeking and considering views and wishes.

Background

- Maggie is 3 years old and lives with her mother, Sam. She attends a long day care (LDC) Service 5 days a week and is usually a bright, happy child. Ayesha is the LDC service team leader.
- Over a 2 week period, Ayesha notices that Maggie has missed 5 days at the service. Ayesha contacts Sam who tells her that Maggie is often awake at night crying, and that Maggie doesn't want to go to day care in the mornings. Sam thinks Maggie is worried about not being with her. While Sam is happy to talk about Maggie's changed behaviours, she shares very little about their personal circumstances or family situation. She does, however, reveal that her MCH nurse, Kim, was very helpful when she suffered post-natal depression after Maggie's birth.
- Several of Maggie's educators also observe that Maggie's behaviour has changed. When Sam leaves the service in the morning, Maggie becomes tearful and withdrawn. They have also observed that Sam is noticeably more irritable than usual and is not as well-groomed as she usually is.

Applying information sharing

- Ayesha tells Sam (the mother) that she'd like to contact her MCH nurse to have a discussion around how the LDC might better support Maggie's wellbeing. Sam becomes teary and says that she can tell Ayesha what she needs to know. Ayesha decides not to continue the conversation with Sam as she doesn't want her to withdraw Maggie from the LDC, which may increase Maggie's distress.
- Using the family violence screening tool, Ayesha records observable signs of trauma that may indicate family violence, as this is relevant information she may need to share.
- Knowing MCH is a prescribed ISE and being concerned about Maggie's wellbeing, Ayesha calls the MCH service despite Sam's views. Ayesha advises the MCH nurse about Sam's views about her information being shared. The MCH nurse shares that there is a history of family violence, so they will need to share information under FVISS. They will also need to check the status of Sam and Maggie's family violence safety plans with Sam's family violence service (which is an RAE under FVISS) before taking further action as a family violence risk assessment may need to be completed by an RAE.

- The MCH nurse offers to follow up with Sam's family violence service as she has spoken with them previously in relation to the situation, and Maggie also has an appointment coming up. The family violence service (RAE) advises they are not aware of any changes, but they will check in with Sam. They soon get back in touch with the MCH nurse and Ayesha to inform them that Maggie's father has moved back into the family home despite an intervention order being in place, so the police have been notified.
- They also inform Ayesha and the MCH nurse that the family violence service has not informed Sam (the mother) that her information has been shared at this time, due to the risk of escalation if Maggie's father (the perpetrator) were to find out the services were sharing information about him, Sam and Maggie. The 3 services agree to stay in touch to better support Maggie and Sam.
- Ayesha continues to build a stronger relationship with Sam to build her trust and work with her to promote Maggie's wellbeing and better manage her behaviour. Ayesha talks to Sam about ways to support Maggie at the Service, including developing a "social story" with Maggie about her interests at day care, having set routines and times for drop-off and pick-up, and bringing in self-soothing items from home that Maggie can use while she is at the LDC.
- Ayesha plans to inform Sam that information sharing has occurred between the services when she is confident that it is safe, reasonable and appropriate to do so. She plans to seek advice on this from Sam's family violence service.

Which information sharing scheme applies?

- Ayesha requests information from the MCH nurse under CISS to help her better understand the situation and inform her support for Maggie.
- As the MCH service's information includes a history of family violence, there may be current family violence risk to Maggie and Sam.
- Where children are involved and family violence may be present, you will need to apply CISS (to promote child wellbeing or safety) and FVISS (to assess and manage family violence risk) in line with the purposes of each scheme. Under both schemes, information must be shared in line with MARAM.

Is consent required to share information under CISS or FVISS?

- Consent is not required from any person to share relevant information to promote the wellbeing or safety of a child or group of children (under the age of 18), or to share information that is relevant to assessing or managing family violence risk to a child.
- However, you should seek and take into account the views of the child and/or family member (who is not a perpetrator) before sharing their information, wherever safe, reasonable and appropriate to do so.

