

Home-Start Haringey Hackney and Waltham Forest

100 Tower Gardens Road
London N17 7QA
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HOME-START HARINGEY HACKNEY AND WALTHAM FOREST

PRIVACY NOTICE and CONSENT STATEMENT

In the course of the scheme and Home-Start UK (“we”/”us”) providing support and friendship to your family and monitoring and evaluating your needs, we collect and hold certain personal information about you. We will only do so with your explicit consent and in accordance with all applicable data protection legislation, including the General Data Protection Regulation.

Information collected

The personal information collected by us will be limited to that which is essential to allow us to provide the support you require and deserve. This will include:

- Names, genders, addresses, telephone numbers and e-mail addresses.
- Employment, immigration statuses, disabilities (such as physical or learning disabilities) and racial/ethnic origins.
- Data concerning health (such as substance abuse, domestic abuse, mental health, depression and pregnancy).
- Details of any ancillary support services/agencies being used by the family (such as family GP, health advisors, social workers, mother & baby clinics, children’s centres, CAMHS, CPN/mental health, debt counselling, legal support, employment, housing support, education and dentistry).
- In the case of children, additional information as to whether the child is subject to assessment needs (such as CAF/UNOCINI) or a child care/protection plan, or is a child in need.

We may also collect information from any individual/agency that has referred your family to us.

How we will use your personal information and who it will be shared with

Internal

Our volunteers discuss your support with the appropriate organiser/co-ordinators, who in turn discuss your support with their line managers. Discussions take place in a confidential setting, for the purposes of supervision and to ensure the best possible support to your family. Volunteers meeting together for peer support do not share information that may identify, or breach the confidentiality of your family.

All information provided to our board of trustees for the purpose of assessing the level of referrals, local trends or case studies shall be anonymised.

External

We will, on an anonymised basis, use your personal information to demonstrate the impact of our services. Any case study information shared will always be on an anonymised basis unless we have further explicit consent from you.

We will inform funders and your health visitor (and other agencies involved with your family) that you have sought support from us (including the nature and level of such support) and provide them with *[general information]*. In the event your family has been referred to us, we shall share the same information with your referrer (this will include any changes to the support and informing the referrer when the support comes to an end).



We may share your personal information with Home-Start UK for the specific purposes of statistical analysis and the promotion of our work nationally as well as any reporting requirements for funders who support the network on a national level. This will be on a pseudo-anonymised basis (meaning that we will take steps to limit the ability to for your personal information to be identified. This will normally include the anonymization of names and full addresses).

We may share your personal information with our external auditors for quality auditing purposes but only in the presence of your organiser/co-ordinator and only after the auditors have providing us with all necessary written undertakings to preserve the security and confidentiality of your information.

We will share personal information with law enforcement or other authorities if required by applicable law (including, in line with our Safeguarding and Promoting the Welfare of Children/Safeguarding Adults at risks policies, where there are concerns about the safety or wellbeing of a child or adult at risk and it is considered necessary for their welfare and protection).

We will not share your personal information with any other third party without first obtaining your explicit consent.

How long your personal information will be kept

We will keep your personal information after we have finished providing our support to respond to any questions, complaints or claims made by you or on your behalf, to show that we treated you fairly and/or to keep records required by law. We will not keep the information for longer than necessary. We keep different types of information for different lengths of time (further details can be found in our Information Governance Policy which is available on request).

Keeping your personal information secure

We have appropriate security measures in place to prevent your information from being accidentally lost, or used or accessed in an unauthorised way. We limit access to your personal information to those who have a genuine need to know it. Those processing your information will do so only in an authorised manner and are subject to a duty of confidentiality. We also have procedures in place to deal with any suspected data security breach. We will notify you and any applicable regulator of a suspected data security breach where we are legally required to do so.

Your Rights

You have a number of important rights which you may exercise in relation to your personal information free of charge. In summary, those include rights to:

- access your personal information and to certain other supplementary information that this Privacy Notice is already designed to address;
- require us to correct any mistakes in your information which we hold;
- require the erasure of personal information concerning you in certain situations;
- receive the personal information concerning you which you have provided to us, in a structured, commonly used and machine-readable format and have the right to transmit those data to a third party in certain situations;
- object at any time to the processing of personal information concerning you for direct marketing
- object to decisions being taken by automated means which produce legal effects concerning you or similarly significantly affect you
- object in certain other situations to our continued processing of your personal information; and
- otherwise restrict our processing of your personal information in certain circumstances.

For further information on each of these rights, including the circumstances in which they apply, visit the Information Commissioner's Office ("ICO") website at <https://ico.org.uk/for-the-public/>.

If you would like to exercise any of the rights, please email, call or write to us using the details in 'How to contact us' below, let us have enough information to identify you, let us have proof of your identity and address, and let us know the information to which your request relates.

How to complain



Please report any complaint to the details set out in 'How to contact us' below. We hope we can resolve any query or concern you raise about our use of your information. You also have the right to lodge a complaint with the ICO who may be contacted at <https://ico.org.uk/concerns/> or telephone: 0303 123 1113.

How to contact us

Please contact us if you have any questions about this Privacy Notice or the information we hold about you as detailed below:

By signing this form you confirm you have read and understood the contents of this Privacy Notice and Consent Statement and consent to us processing your personal information in accordance with this Privacy Notice. You may withdraw your consent at any time by using the contact details set out in 'How to contact us' above.

Parent(s) signature:

Date:

Co-ordinator Signature:

Date:



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100 Tower Gardens Road
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Fax: 020 8245 9317
Email: info@home-start-haringey.org



Referral Form

Scheme Code: HSHH&WF.

Home Start Family Number (Official use only)

WE ARE UNABLE TO PROCESS YOUR REFERRAL UNTIL WE RECEIVE THIS FORM

We try to respond to all referrals within 3 weeks after receiving the referral to report progress. If you have any issues or concerns about the referral process or the support for the family please contact Fatmata Bah, Director of Operations

Please note that all referrals must be made with the consent of the family.

Have you discussed this referral with the family prior to completing this form? YES ___ NO ___

This form will be held in confidence but may be shown to the family if requested.

Name of children Under 5	Date of birth	Registered Disabled		Child Protection Plan	
		YES Please state	NO	YES	NO
Other Siblings					

Name of family : _____ Date: _____

Address _____

Post Code: _____ Tel No. _____

Email:- _____

Name of mother/partner _____ Main carer YES/NO

Name of father/partner _____ Main carer YES/NO

Please tell us is an interpreter is required for this family YES/No

<p>Referred by:</p> <p>Name _____</p> <p>Agency _____</p> <p>Address _____</p> <p>Tel _____</p> <p>E-mail: _____</p> <p>If Self Referral pleas tick <input type="checkbox"/></p>	<p>Family Doctor _____</p> <p>Tel _____</p> <p>Health Visitor _____</p> <p>Tel _____</p>
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Are there any other agencies involved or offering any additional support?

1. Who?

What service do they provide?

.....

2. Who?

What service do they provide?

.....

3. Who?

What service do they provide?

.....

Dated:

I hope that Home-Start will help meet needs the family has in the following areas:

Reason for the referral:

.....

.....



Family needs

So that we can offer the family the most appropriate support, and match the most suitable volunteer please complete the following table. Please note that there is not a 'points' system. Families will not be prioritised on the basis of how many categories are ticked.

This information also helps us to evaluate the outcomes of our support.

I hope that Home-Start will help meet needs the family has in the following areas:

Family needs	✓	If you have ticked, please tell us <u>why</u> this is a need
1. Managing child's behaviour		
2. Being involved in the child(ren)'s development		
3. Coping with own physical health		
4. Coping with own mental health		
5. Coping with feeling isolated		
6. Parent's self-esteem		
7. Coping with child's physical health		
8. Coping with child's mental health		
9. Managing the household budget		
10. The day-to-day running of the house		
11. Stress caused by conflict in the family		
12. Coping with the extra work caused by multiple birth/multiple children under 5		
13. Use of services		
14. Other (please describe)		

- Please tell us about any Health and Safety issues that we need to consider when placing a volunteer with this family:Please tell us if the family has issues relating to (please circle):
Lone parent Drug/Alcohol abuse Domestic violence Post-natal depression Mental health
- Please add any background information that you think we would find useful (if necessary attach an extra sheet).

This section is for monitoring purposes only

Please provide some details about the children and adults caring for them:

Details of children: Please note the family must have at least one child under the age of five years, (please include details of all all children under 18)

Name of child	Gender		Date of birth	Immigration status		Considered to be disabled by main carer?		On Child Protection Register or subject to child protection plan?		Asian or Asian British				Black or Black British			Chinese or Other Ethnic Group		Mixed	White			
	Male	Female		Asylum seeker	Refugee	YES	NO	YES	NO	Indian	Pakistani	Bangladeshi	Other Asian	Caribbean	African	Other	Chinese	Other Ethnic	Any mixed	British	Irish	Other White	
1.																							
2.																							
3.																							
4.																							
5.																							
6.																							

Details of any assessments for children's needs - Is any child subject to an assessment of needs such as CAF? Yes / No

Name of child	Name and agency of lead professional
1.	
2.	
3.	
4.	

Details of other members of the household with responsibilities for caring for the children

	Gender		Date of birth	Immigration status		Do they consider themselves to be disabled?		Asian or Asian British				Black or Black British			Chinese or Other Ethnic Grp		Mixed	White		
	Male	Female		Asylum seeker	Refugee	YES	NO	Indian	Pakistani	Bangladeshi	Other Asian	Caribbean	African	Other	Chinese	Other Ethnic	Any mixed	British	Irish	Other White
Main Carer																				
Partner living in household																				
Other Please specify e.g. Grandparent																				

Religion.....

Sexual Orientation.....

Referrer's signature Date

Parent's signature Date (optional)

Thank you for taking time to provide this information which will help us to process the referral. We will try to respond to you within two weeks to tell you about progress with this referral.

