

# Consent, Confidentiality and Mental Capacity Policy

Policy Management	
Policy Created: <i>November 2025</i>	Document Location: <input checked="" type="checkbox"/> <i>Bee-Able CIC website</i> <input checked="" type="checkbox"/> <i>Hard copy in red folder on top shelf of locked cabinet in office</i> <input checked="" type="checkbox"/> <i>Electronic copy on OneDrive &gt; Documents &gt; Policies</i>
Date of Last Review: <i>November 2025</i>	
Date of Next Review: <i>November 2026</i>	
Responsibility: <i>Manager, Bee-Able CIC</i>	Name: <i>Sharon Senior</i>
Signed:	Date:

## 1. Purpose

To explain how Bee-Able CIC gets and records consent, keeps people's information private, and works with the Mental Capacity Act 2005 (MCA) when adults may lack capacity to make decisions.

## 2. Scope

This policy applies to all staff, volunteers, service users, families, and contractors involved with the organisation.

## 3. Key Principals

- ☒ People have the right to make decisions about their own lives where they can.
- ☒ We assume adults have capacity unless assessed otherwise (MCA principle).
- ☒ Consent must be informed, voluntary and recorded.
- ☒ We keep personal information private and only share what is necessary.
- ☒ Where someone lacks capacity, we act in their best interests and follow legal guidance.



## 4. Consent: Key Points

- Children and Young People: Consent for children under 16 must be given by a parent/guardian. We also involve the child in decisions at an age/ability appropriate level.
- Adults: We ask adults for consent for activities, photos, medication prompts, transport, data sharing etc. Consent can be given verbally or in writing; important consents should be recorded in writing.
- Withdrawal: Consent can be withdrawn at any time. We record and respect that change.

## 5. Mental Capacity and Best Interest Decisions

- We follow the MCA 2005 principles:
  1. Assume capacity unless established otherwise.
  2. Support a person to make their own decision where possible.
  3. People must not be treated as unable to decide unless all practical steps to help them have been taken.
  4. Unwise decisions do not automatically mean lack of capacity.
- Capacity assessments: are task-specific and time-specific (e.g. consent to a trip on X date). Staff should record the rationale and the assessment outcome.
- If a person lacks capacity for a decision, we follow a best interests process, involve family/carers and relevant professionals, and document how the decision was made.

## 6. Confidentiality and Data Sharing

- What we keep private: personal details, health/support needs, safeguarding concerns, financial info.
- When we share: only with consent, or when required by law (safeguarding, court order, serious risk).



- How we store: paper files locked; electronic records password-protected and access-limited.
- Requests for information: handled under GDPR; service users (or reps) can request copies of their data. See Privacy Notice for details.

## 7. Special Areas

- Photography & Media: We do not publish photos/videos without explicit consent. Consent forms are requested at registration and recorded.
- Third-party requests: Requests from the police, local authority or other agencies are handled by the Manager and recorded.

## 8. Training and Responsibilities

- All staff receive training on consent, confidentiality, GDPR and MCA awareness.
- Staff must escalate complex capacity issues to the Manager or safeguarding lead.
- Managers ensure accurate record-keeping and lawful data handling.

## 9. Recording

All consent decisions, capacity assessments and data-sharing actions are recorded in the individual's file.

## 10. Monitoring and Review

We will review our practices regularly and this policy every year, or after any legal change or incident, to make sure it stays relevant and effective.