

Winnipeg (November 5, 2015) -- CMHA released a brief today, “**Recommendations for information sharing that supports family involvement and upholds the rights of service users**”, that suggests it is possible to uphold PHIA and the rights of people with mental illness while ensuring that family are informed of a critical patients’ mental health status. To do so, training to interpret PHIA in an ethically robust way, particularly in cases where consent to share information with family is not given, should be adopted as a core competency of mental health service providers.

The brief:

- Provides a short background on the importance of family to relatives with mental illnesses or mental health disturbances;
- Outlines common barriers to information sharing identified in international research;
- Identifies emerging best practices cited in international research.

“The release of any personal health information should always be considered an ethical dilemma. But PHIA is not and should not be ‘a smokescreen’,” says Executive Director Marion Cooper. “We need to understand what training and leadership health care staff need to ensure that information is shared with family when it is in the best interest of the patient.”

“International research into information sharing, particularly when consent is withheld, suggests the ethical quandaries experienced by health care staff around confidentiality in Manitoba are not uncommon,” says Public Policy Manager Tyler Pearce.

The brief calls on the Government of Manitoba to take the opportunity to enlarge a recovery-oriented approach to support the role of families in giving care to people living with mental illness or undergoing a mental health challenge, specifically through investments in policy and programs that promote family involvement, encourage health care professionals to engage in dialogue with family. The brief also calls for mental health professionals to be allotted time to work more fully with families and to have the skill of responding to complex ethical, legal and practical dilemmas about confidentiality and information sharing adopted as a key workplace competency.

“If we are going to build a true recovery-oriented mental health system, families need to be an active part of that system. Our brief on barriers to information sharing and best practices only covers a small piece of what family involvement in a recovery-oriented system might look like, but it’s a key piece,” says Cooper.

The full brief can be found on CMHA’s website: winnipeg.cmha.ca

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