

Blaenavon Medical Practice

Confidentiality & Medical Records

INTRODUCTION

The reasons for the Policy:

- all information held at the Practice about patients is confidential, whether held electronically or in hard copy
- other information about the Practice (for example its financial matters, staff records) is confidential
- staff will by necessity have access to such confidential information from time to time

APPLICABILITY

The policy applies to all employees and Partners, and also applies to other people who work at the Practice e.g. Trust staff, LHB staff, self-employed staff, temporary staff and contractors – collectively referred to herein as 'workers'.

POLICY

- Workers must not under any circumstances disclose patient information to anyone outside the Practice, except to other health professionals on a need to know basis, or where the patient has provided written consent.
- All information about patients is confidential: from the most sensitive diagnosis, to the fact of having visited the surgery or being registered at the Practice.
- Workers must not under any circumstances disclose other confidential information about the Practice to anyone outside the Practice unless with the express consent of the Practice Manager and at least one Partner.
- Workers should limit any discussion about confidential information only to those who need to know within the Practice.
- The duty of confidentiality owed to a person under 16 is as great as the duty owed to any other person.
- Workers must be aware of and conform to the requirements of the Caldicott recommendations.
- All patients can expect that their personal information will not be disclosed without their permission (except in the most exceptional circumstances when disclosure is required when somebody is at grave risk of serious harm).
- Electronic transfer of any confidential information, once approved by the Practice Manager, must be transmitted via the NHSnet. Workers must take particular care that confidential information is not transmitted in error by email or over the Internet. See also Electronic Transfer of Patient Data Policy.

- Workers must not take data from the Practice's computer systems (e.g. on a memory stick or removable drive) off the premises unless authorised to do so by the Practice Manager or Senior Partner.
- Workers who suspect a breach of confidentiality must inform the Practice Manager or Senior Partner immediately.
- Any breach of confidentiality will be considered as a serious **disciplinary** offence and may lead to dismissal.
- Workers remain bound by the requirement to keep information confidential even if they are no longer employed at the Practice. Any breach, or suspected breach, of confidentiality after the worker has left the Practice's employment will be passed to the Practice's lawyers for action

RESPONSIBILITIES OF PRACTICE STAFF/WORKERS

All health professionals must follow their professional codes of practice and the law. This means that they must make every effort to protect confidentiality. It also means that no identifiable information about a patient is passed to anyone or any agency without the express permission of that patient, except when this is essential for providing care or necessary to protect somebody's health, safety or well-being.

All health professionals are individually accountable for their own actions. They should, however, also work together as a team to ensure that standards of confidentiality are upheld, and that improper disclosures are avoided.

Additionally, Blaenavon Medical Practice, as Employers:

- are responsible for ensuring that everybody employed by the practice understands the need for, and maintains, confidentiality.
- have overall responsibility for ensuring that systems and mechanisms are in place to protect confidentiality.
- have vicarious liability for the actions of those working in the practice – including health professionals and non-clinical staff (i.e. those not employed directly by the practice but who work in the surgery).

Standards of confidentiality apply to all health professionals, administrative and ancillary staff - including receptionists, secretaries, practice manager, cleaners and maintenance staff who are bound by contracts of employment to maintain confidentiality. They must not reveal, to anybody outside the practice, personal information they learn in the course of their work, or due to their presence in the surgery, without the patient's consent. Nor will they discuss with colleagues any aspect of a patient's attendance at the surgery in a way that might allow identification of the patient unless to do so is necessary for the patient's care.

IF DISCLOSURE IS NECESSARY

If a patient or another person is at grave risk of serious harm which disclosure to an appropriate person would prevent, the relevant health professional can take advice from colleagues within the practice, of from a professional / regulatory / defence body, in order to decide whether disclosure without consent is justified to protect the patient or another person. If a decision is taken to disclose, the patient should always be informed before disclosure is made, unless to do so could be dangerous. If at all possible, any such decisions should be shared with another member of the practice team.

Any decision to disclose information to protect health, safety or well-being will be based on the degree of current or potential harm, not the age of the patient.

STAFF CONFIDENTIALITY AGREEMENT

(a copy of this [agreement](#) should be signed by every staff member/worker)

Declaration

I understand that all information about patients held by Blaenavon Medical Practice is strictly confidential, including the fact of a particular patient having visited the Surgery.

I will abide by the confidentiality guidelines set out below.

I have read the Staff Confidentiality Policy above and fully understand my obligations and the consequences of any breach of confidentiality. I understand that a breach of these obligations may result in dismissal.

I understand that any breach, or suspected breach, of confidentiality by me after I have left the Practice's employment will be passed to the Practice's lawyers for action.

If I hold a professional qualification and my right to Practice depends on that qualification being registered with a governing body, it is my responsibility to have read and understood their advice on confidentiality.

Name: _____

Signature: _____

Date: _____

Confidentiality guidelines:

- Be aware that careless talk can lead to a breach of confidentiality – discuss your work only with authorised personnel, preferably in private.
- Always keep confidential documents away from prying eyes.
- Verbal reporting should be carried out in private. If this is not possible, it should be delivered in a volume such that it can only be heard by those for whom it is intended.
- When asking for confidential information in circumstances where the conversation can be overheard by others, conduct the interview in as quiet and discreet a manner as possible and preferably find somewhere private for the discussion.
- There may be times when a young person attends on their own. On such occasions it may not be appropriate to enquire further as to the reason for the visit, and a referral to a clinician, or a Practice nurse for triage, may be more appropriate.
- Information should be given over the telephone only to the patient or, in the case of children, to their parent or guardian. Precautions should be taken to prevent the conversation being overheard. Care must be taken to ensure that the duty of confidentiality to a minor is not breached, even to a parent.
- The duty of confidentiality owed to a person under 16 is as great as the duty owed to any other person.
- When using computers, unauthorised access should be prevented by password protection and physical security such as locking the doors when offices are left unattended. Where possible, VDU screens should be positioned so they are visible only to the user. Unwanted paper records should be disposed of safely by shredding on site and computer files on hard or floppy disks should be wiped clean when no longer required.
- If unsure about authorisation to disclose, or a person's authorisation to receive confidential information, always seek authorisation from a Partner or the Practice Manager before disclosing any personal health information.
- Medical records and information must not be handed to the patient or relative. The traffic of such information, i.e. from one department to another, must be co-ordinated by the Practice staff.

CONFIDENTIALITY (TEENAGERS) POLICY

INTRODUCTION

This policy is specific to patients under the age of 18, and should be read in conjunction with the Staff Confidentiality Policy Agreement and Fraser (Contraceptive) Guidelines (see Resources below).

POLICY

The principles of confidentiality apply equally to all patients regardless of age. Young people (including those under 16) are entitled to equal confidentiality as all other patients. This includes respecting their wishes to withhold information from parents or guardians. The GP involved will determine the competency of a young person seeking treatment and will determine the extent to which confidentiality guidelines apply in each case.

Care must be taken to ensure that this right of confidentiality is not inadvertently breached by following the procedural guidelines in force.

Any young person regardless of age can independently seek medical advice or treatment, including surgical procedures, if a health professional believes that they are capable of understanding the choices of treatment and their consequences. This includes contraceptive advice, but the principles apply to other treatments, including abortion.

The policy of the Practice is to support young people in exercising their choice of medical treatment, and to deal with them in a sympathetic and confidential manner. Where a young person presents at the surgery without adult support they may be booked in to see a clinician in the normal way. Where there is some question of the urgency of an appointment the matter should be referred to a nurse in the first instance to triage the request.

Reviewed	Date	For Review
PM – no alterations	March 2011	March 2012
PM – no alterations	January 2012	January 2013
PM – change of name	November 2014	January 2016
PM – no alterations	November 2017	January 2019