



Facilitator notes: Confidentiality

The questions and scenarios on this activity sheet can be completed in any order. Discuss in pairs the following questions. Report back as a group.

What is confidentiality?

The right of an individual to have personal, identifiable, medical information kept private, however this is not absolute. Confidentiality is not new! Hippocrates "the father of medicine" in the 5th century BC cited it in his oath which was traditionally taken by all doctors. Now it is written into modern law. Doctors, like everyone else, must comply with the law when using, accessing or disclosing personal information. The law governing the use and disclosure of personal information is complex, including requirements of common law, data protection and human rights, and there are variances across the UK. *For more information the General Medical Council have guidelines and information online about confidentiality and good medical practice.*

What are some of the reasons why doctor-patient confidentiality is so important and in what circumstances do you think information can be shared?

The doctor/patient relationship is extremely valuable. Patients trust doctors to do the best for them and so divulge their personal information. Trust is very important. Often much of a diagnosis is based upon what the patient says therefore effective treatment relies on patients providing full information.

Patients can feel embarrassed or vulnerable when they lack control over an element of their health.

Without trust patients may avoid seeking medical help or be reluctant to reveal information about themselves or family members, fearing impact upon their reputation, lifestyle, employment or personal relationships.

Appropriate information sharing is essential though:

Patients may be put at risk if those who are providing their care do not have access to relevant, accurate and up-to-date information about them.

Indirectly related to patient care, health services function efficiently and safely when large volumes of patient information are used for medical research, service planning and financial audits. There are also disclosures in cases where public protection is required.

This is made more complicated because the healthcare environment is no longer a single doctorpatient relationship thus sharing of patient information is increasingly required.

Patients, in many situations, are thus provided opportunity to consent to which data is shared.



Scenario 1

You are on a bus travelling back from your 'work experience' placement and you bump into one of your friends. You are really eager to share what you have been doing and start chatting. What can and can't you discuss with them?

Think about if you were one of the patients you had seen and you overheard someone talking about you...

Legal protections prevent physicians from revealing certain discussions with patients. This applies to you too. It is good to reflect on what you have seen but do not discuss any patient details with others.

You can tell people that you have been participating in work experience, which members of the team you have met, and generally what you have found interesting, but you should not discuss or describe any patient situations you have witnessed, even anonymously. If the patient or other people overheard, they could feel very upset and this could damage their relationship with their GP and affect their long-term health. They could also submit an official complaint which is very serious for the participating practice.

Scenario 2

A 48-year-old mother of two is visiting her GP because she has frequent back pain. Towards the end of the appointment she asks her GP about her sixteen-year-old son, he had an appointment with the same GP last week which he said was for an earache, but she didn't believe him. She asks the GP what her son's appointment was for and whether he is OK?

If you were the GP in this situation what would you do?

The GPs priority is the trust between her and her patient. If she discusses the son with her mother, this could damage her patient-doctor relationship. The son may not return to the GP if something serious occurs. The GP can explain this to the mother.

The RCGP have produced this activity sheet for pupils aged 16-17 who are taking part in work experience in a healthcare setting. These activities have been designed to be discussed in a group setting, to reflect and confirm understanding. Work experience can be in a primary or secondary care setting, it may perhaps be a voluntary opportunity in a care home or even relevant part-time work.