

MB ChB Programme – Guidance on Ethics – Confidentiality and Duty of Care

Part of the privilege of working as a medical practitioner is that people trust us with their stories, which often contain sensitive and private information that they do not necessarily want to be more widely shared. Many patients assume that their medical information will be shared across their healthcare team but, even then, they may only want some professionals to know some things.

As medical students, and future doctors, providing confidentiality within your care is of significant professional consideration and a legal and ethical duty. It is not an absolute right, but patients can, in the main expect your conversations to be confidential. The times when this cannot be the case are sometimes subtle and often nuanced but, don't worry, we will teach you all about this in the coming years. If you would like more information now then please refer directly to the GMC guidance on Confidentiality [April 2017] [Confidentiality: good practice in handling patient information - professional standards - GMC \(gmc-uk.org\)](https://www.gmc-uk.org/guidance/Confidentiality%20good%20practice%20in%20handling%20patient%20information%20-%20professional%20standards%20-%20GMC%20(gmc-uk.org).pdf)

Away from clinical practice, there are other reasons why you might have access to confidential information, for example when carrying out research, and the university has more general expectations and guidance in relation to this which you must familiarise yourselves with and adhere to. Equally, healthcare providers including hospitals and community services will have additional policies and resources that meet the needs of their patient cohorts.

The bottom line is that you should never be in a position where you need to share information without taking advice first. We are here to help. If you are not sure what to do, wait and ask for help.

Obtaining Information

Information about a person can be obtained by spoken word, (face to face, telephone, video/conference call etc), web- based discussion, observation, written notes, via a third party, audiotape, photographs or videotape.

When obtaining information:

Whenever possible, consultations should be conducted in private and only take place with people either invited to attend by the patient or those necessary to provide care. The latter group includes you. However, it is important to appreciate that healthcare environments are busy places and it is important to acknowledge that some settings, including wards, do not offer absolute privacy.

When caring for adults, the patient's views are of paramount importance and they should be fully involved, to the best of their ability, in any discussions unless they explicitly express the wish to be absented. In paediatric care, this can vary somewhat depending on the age of the child. Again, don't worry, we will teach you all about this.

Make sure you are clear who is present and in what capacity before you begin any consultation.

Making a record of information

Ask the persons present to agree to your making written notes of the information; (explain that you need an accurate record). You may need to capture brief notes during your consultation/examination but let the patient know what you are doing and why. It is better practice and usually more efficient to write up the majority of your notes after the consultation is complete.

Whenever personally recording information, you should make notes as soon as possible after your consultation rather than during the event/interview. Do not rely on memory to write them later.

Again, don't worry, we will teach you robust medico-legal practice in relation to keeping contemporaneous and, when necessary, retrospective medical records.

Many medical records are now computerised and so will have an electronic signature and time print. All handwritten recorded information should be dated and accompanied by your full signature. As signatures are often hard to read, you should also set down your name (and status as a medical student) in non-joined letters.

Maintaining Confidentiality

Information should be used only for the purpose for which it was given, and should not be shared with other people, or used for other purposes, except with the valid consent of the person who is the subject of the information. For the purpose of your own notes:

Do not identify the patient or refer to him/her in such a way that he/she could be identified by another person. In any oral or written report, refer to the patient only by initials, first name or pseudonym.

Do not include photographs or other recorded material of the patient without their consent.

Keep all information about the person in a secure locked cabinet or drawer or on an encrypted, secure hard disc. Avoid transporting sensitive information on USB sticks unless absolutely necessary and always ensure that USB sticks are encrypted and that sensitive information is removed after use.

There are times when you will really benefit from reflecting on your clinical interactions, learning from colleagues through further discussion, but this should always be in a confidential environment with other healthcare professionals and/or healthcare students and should be an empathic, courteous and professional interaction at all times.

Information Security

Data Protection Policy

The University needs to hold and to process large amounts of personal data about its students, employees, applicants, alumni, contractors and other individuals in order to carry out its business and organisational functions.

UK data protection law (UK GDPR plus the Data Protection Act 2018) defines personal data as any information relating to an identified or identifiable natural person ('data subject'); an identifiable natural person is one who can be identified, directly or indirectly, in particular by reference to an identifier such as a name, an identification number, location data, an online identifier or to one or more factors specific to the physical, physiological, genetic, mental, economic, cultural or social identity of that natural person. This information is often referred to as person identifying information (PII) by the University and for the purposes of this Policy should be considered to have the same meaning as personal data as defined by the legislation.

Compliance with legislation will be achieved through the implementation of controls and responsibilities including measures to ensure that:

2.1 personal data is processed lawfully, fairly and transparently. This includes the provision of appropriate information to individuals upon collection of their data by the University in the form of privacy or data collection notices. The University must also have a legal basis to process personal data.

2.2 personal data is processed only for the purposes for which it was collected;

2.3 personal data is adequate, relevant and not excessive for the purposes for which it was collected;

2.4 personal data is accurate and where necessary kept up to date;

2.5 personal data is not kept for longer than necessary;

2.6 personal data is processed in accordance with integrity and confidentiality principles; this includes physical and organisational measures to ensure that personal data, both manual and digital, are subject to an appropriate level of security when stored, used and communicated by the University, in order to protect against unlawful or malicious processing and accidental loss, destruction or damage. It also includes measures to ensure that personal data transferred to or otherwise shared with, or disclosed to third parties have appropriate contractual provisions and/or safeguards applied to maintain compliance with data protection law;

2.7 personal data is processed in accordance with the rights of individuals, where applicable. These rights are:

- the right to be informed;
- the right of access to the information held about them by the University (through a subject access request);
- the right to rectification;
- the right to erase;
- the right to restrict processing;
- the right to data portability;
- the right to object; and
- rights in relation to automated decision making and profiling;

2.8 The design and implementation of University systems and processes must make provision for the security and privacy of personal data, including a Data Protection Impact Assessment;

2.9 Personal data will not be transferred outside of the UK without the appropriate safeguards in place

2.10 Additional conditions and safeguards must be applied to ensure that more sensitive personal data (defined as Special Category data in the legislation), is handled appropriately by the University. Special

category personal data is personal data relating to an individual's:

- race or ethnic origin;
- political opinions;
- religious or philosophical beliefs;
- trade union membership;
- genetic data;
- biometric data (where used for identification purposes);
- health; or
- sex life or sexual orientation.

In addition, similar extra conditions and safeguards also apply to the processing of the personal data relating to criminal convictions and offences

Child Safeguarding

All organisations that work to serve children and young people, from the largest national bodies to very small voluntary groups, share a duty of care for the children and young people under the age of 18 years with whom they work.

The University of Manchester has a Child Protection policy and guidance document that you should read. This document can be found here: [Child Protection Policy](#)

Every child who takes part in an activity organised by The University of Manchester should be able to participate in a stimulating and safe environment and be protected from neglect and physical, sexual and emotional abuse.

KEY PRINCIPLES & DEFINITIONS

The key principles that underlie this policy are that:

- anyone who has not reached their 18th birthday should be considered as a child
- all children have the right to protection from abuse;
- all allegations of abuse will be taken seriously and responded to swiftly and appropriately;
- University of Manchester staff and students are aware of best practice and know where to go to for advice and guidance so that children in their care can be protected and that staff/students themselves do not place themselves in an unnecessarily vulnerable position.

CHILD SAFEGUARDING POLICY STATEMENT

The University of Manchester is committed to safeguarding and promoting the welfare and safety of children. We will:

- adhere to University procedures to recruit staff and select students to ensure child safeguarding risks are identified and addressed;
- carry out appropriate Disclosure and Barring Service checks;
- take all reasonable steps to ensure that staff and students are aware of The University of Manchester Child Safeguarding policy and related procedures, and that training in these procedures is made available to staff and students;
- provide information to all interested parties regarding The University of Manchester Child Safeguarding policy and procedures for working with children;
- provide this policy and guidance to teachers, group leaders, service providers and any other interested parties on The University of Manchester's expectations regarding child safeguarding responsibilities when visiting the University and when our staff and students are involved in activities on premises external to the University;
- work closely with other organisations to safeguard children;
- have robust procedures in place for dealing with allegations of abuse against University staff and students.

This policy will be reviewed every two years by the Compliance and Risk Office in consultation with key University contacts with advice from the NSPCC.

Each placement provider will have specific rules and procedures which you must adhere to regarding duty of care for children and young people under the age of 18 years. Please ensure that you are familiar with these.

You may also refer to the University of Manchester [Safeguarding Policy](#).

Document control box	
Policy/procedure title	Guidance on Ethics – Confidentiality and Duty of Care
Date approved	August 2019
Approving body	
Implementation date	August 2019
Version	V.1.1
Supersedes	V.1.0
Previous review dates	June 2024, June 2025
Next review date	June 2026
Policy owner	Dr Ruth Bromley, Academic Lead for Ethics, MBChB Programme