

Confidentiality Policy for Health and Wellbeing Department

September 2024

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1.0 Policy

1.1 Maintaining Confidentiality

The Health and Wellbeing Department has an obligation to take reasonable precautions to protect personal and sensitive information obtained through or stored in any medium, whilst recognising the extent and limits of confidentiality.

Confidentiality is an important part of the Health and Wellbeing service. For doctors to feel comfortable exploring issues relating to their training experiences and concerns, they need a safe place to discuss pertinent information, without fear of that information being inappropriately shared.

From the outset, those engaging with the service will be given information explaining how personal information will be handled. This information will explain that in some cases, there are exceptions to confidentiality. This policy aims to explain confidentiality and its limitations with regard to the interactions with the Health and Wellbeing.

1.2 Limits of Confidentiality

Maintaining confidentiality must be balanced with the following three conditions:

- Risk of harm to self or others is not indicated.
- Providing best care and ensuring that patient safety remains a priority and is not compromised.
- The integrity of the training programmes is maintained.

Therefore, in the following circumstances, the Health and Wellbeing department will be required to break confidentiality in order to protect patients, Trainees (if at risk of self-harm) and the integrity of the training programme. The following are the circumstances whereby breaking confidentiality would be considered:

1. Risks of harm to:
 - a. Patients
 - b. Self
 - c. Others
2. Risk to the integrity of training or training progress
 - a. Unprofessional behaviour
 - b. Long period of absence which maybe unexplained
 - c. Reasonable adjustments in the case of disability
 - d. Referral to health and wellbeing via NSD/Associate Director

1.3 Informed Consent

Informed consent will be sought (generally in writing) prior to the sharing of sensitive information. However, in the event of perceived harm to self or others, the duty to protect will supersede informed consent. See appendix at the end of this document.

1.4 Record Keeping

Interactions with the health and wellbeing department via any medium will be recorded. Information recorded will (at the very least) include:

- Date of interaction
- Name of person
- Reason for engagement
- Issue category
- Action to be taken

Data regarding health and wellbeing referrals will be stored confidentially and in line with GDPR policy. Health and wellbeing information will be stored separately from the Trainee's main training file and will only be accessed via secure access server. Access will be granted only to those who work directly in the health and wellbeing department and who need access in order to carry out their duties.

All written communication sent to the Health and Wellbeing personnel (via post or e-mail) is kept and is subject to Data Access. For that reason, we encourage strictly professional interactions and due consideration that any written information containing people's name and data is subject to Data Access.

For audit or research purposes, data will be anonymised.

Numerical data on service usage will be provided as part of the regular reporting within RCPI.

1.5 Minimising Intrusions on Privacy

Minimal information germane to the purpose for which the communication is made is included in written and oral reports and consultations.

2.0 Further Information

All questions relating to the execution or interpretation of this policy should be referred to the Health and Wellbeing Department.

3.0 Review

This Policy shall be subject to review every three years from the date of approval of this document by the Training Committee

Approved By:	Date
Training Committee	September 2024
Review	
Review by Training Committee	September 2027

RCPI is GDPR compliant should you have any queries on GDPR please contact dataprotectionofficer@rcpi.ie.

4.0 Appendix

Authorisation to Release/Exchange Confidential Information Form

Overview

The Health and Wellbeing department in RCPI has been established in order to support Trainers and Trainees through psychological difficulties, promote psychological health and prevent ill health where possible. When the Health and Wellbeing Department is informed of a person's condition such as a major depressive episode, they work closely with Trainers and NSDs to ensure that the Trainee has access to special accommodation and support. For example, adjustment around call rota, flexible training, leave, access to additional training & resources, coaching, mentoring.

If a trainee is struggling to meet the training requirements due to an illness/disability but chooses not to disclose this to the Health and Wellbeing Department, access to the support given in the example above might not be offered.

How will this information be used?

I understand that RCPI's Health and Wellbeing Department uses this information to better understand my circumstances with regards to my training or my access to health and wellbeing support. I understand that the RCPI uses this information to appropriately align the requirements of the training programmes that I wish to undertake/continue.

Consent

1. I understand that I do not have to consent for the release or exchange of confidential information regarding my health and wellbeing.
2. I (name) _____ (RCPI number) _____
_____ hereby provide my consent for the release or exchange of confidential information regarding my psychological and/or physical health.
3. I understand my obligation to inform the Medical Council of any illness which could be a risk to patients or which could seriously impair my judgement. I understand that if I have not already done so and where appropriate, the RCPI might be obligated to inform the Medical Council of my illness.
4. I have notified the Medical Council regarding my illness:

☐ Yes
☐ No
☐ Not applicable/appropriate
5. I am giving consent to
_____ release to:
_____ obtain from:
_____ exchange with:

6. the following information pertaining to myself:
_____ treatment summary
_____ history/intake
_____ diagnosis
_____ psychological test results
_____ psychiatric evaluation/medication history
_____ dates of treatment attendance
_____ other (specify) _____
7. This consent will automatically expire one (1) year after the date of my signature as it appears below, or on the following earlier date, condition, or event (i.e. I am no longer on the training programme) _____

8. I understand I have the right to refuse to sign this form, and that I may revoke my consent at any time (except to the extent that the information has already been released). I do understand that the Health and Wellbeing Department, once aware of information about me, cannot become unaware of it and that the RCPI is compliant with GDPR in relation to my data.

Name: _____

RCPI ID Number: _____

Medical Council Number: _____

Date: _____

Date of Birth: _____

Signature: _____

RECORD OF AUTHORISATION EXTENSIONS

I hereby confirm that I have reviewed this consent form and agree to its extension for an additional:

Check One:

_____ 1 year

_____ Other (specify) _____