# THE ALNEY PRACTICE PATIENT PARTICIPATION GROUP ("PPG")

## **CONFIDENTIALITY POLICY & AGREEMENT**

#### INTRODUCTION

All information held at the Practice about patients, the Practice itself or the staff is confidential, whether verbal, held electronically or hard copy. This will apply to all members of the PPG committee (the "members") and any patients who assist them from time to time.

#### **POLICY**

- Members must not under any circumstances disclose patient information to anyone outside the Practice or its PPG.
- All information about patients is confidential; from diagnosis, to the fact of having visited the surgery or being registered at the Practice. This includes information about patients' families or others associated with them
- Members must not under any circumstances disclose other confidential information about the Practice to anyone outside the Practice unless with the express consent of a partner or the Practice Manager
- Members who suspect a breach of confidentiality must inform a partner or the Practice Manager
- Members remain bound by the requirement to keep information confidential even if PPG membership ceases. Any breach, actual or suspected, of confidentiality after leaving the PPG will be passed to the Practice's lawyers for action

#### **RESPONSIBILITIES OF MEMBERS**

All PPG members are individually accountable for their own actions, but also should work together as a team, with their elected Chair, to ensure that standards of confidentiality are upheld, and that improper disclosures are avoided

Additionally, The Alney Practice is responsible for ensuring that everybody on the PPG understands the need for, and maintains, confidentiality. This includes the Practice having overall responsibility for ensuring that systems and mechanisms are in place to protect confidentiality, and also having vicarious liability for the actions of those helping by being members of the PPG

## IF DISCLOSURE IS NECESSARY BECAUSE THERE MAY BE A RISK OF HARM

Taking a "Safeguarding" approach is the only guideline, in that if a PPG member becomes aware that a patient or another person is at risk of harm, or is simply concerned about this possibility, this must be raised immediately with the Practice Manager and a partner, so they will take appropriate action, and the PPG Chair informed

## THE ALNEY PRACTICE PATIENT PARTICIPATION GROUP

## **CONFIDENTIALITY POLICY AND AGREEMENT**

(To be signed by every PPG member)

### **Declaration**

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

I will abide by the confidentiality guidelines set out in the Policy and Agreement.

I have read this Policy and fully understand my obligations and the consequences of any breach of confidentiality. I understand that a breach of these obligations may result in me ceasing to be a member of the PPG.

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

Name:	(	please print)
Signature: <sub>-</sub>		
Date:		

Return the signed copy to the PPG Chair, either by email or by post. Contact the Chair direct for more details.