**Longton Health Centre Confidentiality**

All information held at the organisation is deemed confidential and this includes hard copy and electronic formats. Volunteers have no direct access to confidential information held by the organisation. This particularly relates to patient identifiable information.

Access to patient information can only be sought if the patient is agreeable to this. In these instances, written permission must be given by the patient.

Should a volunteer overhear confidential information when volunteering as an active PPG member, the Practice Director must be notified at the earliest opportunity. The matter must not be disclosed to any other person or parties.

**Definitions**

* Confidentiality is a set of rules that limits access or places restrictions on the use of certain types of information. It is usually executed through confidentiality agreements and policies
* Safeguarding means protecting a citizen’s health, wellbeing and human rights enabling them to live free from harm, abuse and neglect

**Induction of PPG members**

All members of the PPG will be provided with an induction by Longton Health Centre. The induction will include this confidentiality policy and will reiterate its importance to both patients and staff.

The PPG member will also be briefed on the PPG confidentiality policy which outlines the key responsibilities of the group. Longton Health Centre will ensure that the PPG member is committed to agreeing to this policy and understands the confidentiality guidelines.

The PPG member will be briefed on the consequences of breaking this policy and be made aware of the legal implications of breaking the Data Protection Act 2018 / UK General Data Protection Regulations

**Responsibilities**

Safeguarding issues are to be reported immediately to the Practice Director

All information relating to organisation staff and patients is considered to be confidential. This includes verbal, documented and electronically stored information and data.

Any unauthorised disclosure will be considered to be a breach of confidentiality. This will result in disqualification from volunteer status and may involve law enforcement if deemed appropriate.

**Confidentiality guidelines for PPG members**

Activities in relation to your work in the PPG should be discussed only with authorised staff. This should be on a ‘need to know’ basis. These discussions will be held with the utmost of discretion and in a private setting. Confidential information should never be discussed in public. This includes public meetings.

Requesting information from a patient in the waiting room should be discreet and, if in doubt, speak to the Practice Director about obtaining a private room.

Patients should be given privacy to complete questionnaires to ensure that their answers are held with discretion. Questionnaires should be in the custody of and accountable to the PPG member once complete.

When using electronic devices, care should be taken to ensure that other conversations within the organisation cannot be accidentally transmitted at the same time.

Ensure that passwords and logins for authorised computer systems are protected at all times. Do not use private computer devices to store organisation, patent or staff data and ensure that confidential waste is disposed of in the most appropriate manner.

For the avoidance of doubt, contact the Practice Director for details.

PPG members will not:

* Behave contrary to the guidelines/best practice stated above
* Disclose confidential information to any unauthorised persons
* Copy confidential information for any unauthorised use or reason
* Remove confidential information from the organisation premises
* Take custody of confidential information when not authorised to do so

**Summary**

This policy applies to all volunteer members of the PPG at this organisation. Volunteers are considered to be individuals who are not employed by the organisation and have no contractual responsibilities.

**PPG Confidentiality and Declaration Agreement**

|  |  |  |  |
| --- | --- | --- | --- |
| **First name** |  | **Last name** |  |

I confirm that I:

* Have read and understood the Confidentiality and Declaration Agreement for PPG members
* Have been fully briefed by an authorised member of organisation staff. I have had an opportunity to ask any questions
* Understand the content of this Confidentiality and Declaration Agreement. I have been given a copy of the PPG guidelines for my own use
* Am responsible for being aware of the nature and importance of confidentiality and understand that the consequence of any breach associated to me may mean the termination of my PPG member status within the organisation

**Signatures**

I confirm that the practice has have briefed the PPG member signed below in accordance with the Confidentiality Policy and Declaration Agreement for Volunteers.

**Signed on behalf of Longton Health Centre**

|  |  |
| --- | --- |
| **Signature** |  |
| **Print full name** |  |
| **Date** |  |

I agree to adhere to the PPG Confidentiality and Declaration Agreement.

**Signed by the PPG member:**

|  |  |
| --- | --- |
| **Signature** |  |
| **Print full name** |  |
| **Date** |  |