

# TELEPHONE APPOINTMENT – WIFE CALLING FOR RESULTS

**MODULE: WIFE CALLING FOR RESULTS** 

TARGET: ST1/2 GP TRAINEES STARTING GP PLACEMENTS

## **BACKGROUND**

The GMC duties of a doctor<sup>1</sup> clearly state that doctors must respect patients' right to confidentiality. In general practice it is very common for relatives or others to want to discuss a patient. It these situations it is important not to break confidentiality even inadvertently. GPs need to be confident to explain confidentiality to relatives in an easy to understand, jargon-free way.

## **MRCGP COMPETENCIES**

1	Communication and consultation skills - communication with patients, and the use ofrecognised consultation techniques
11	Maintaining an ethical approach to practice - practising ethically, with integrity and a respectfor diversity

## **MRCGP CURRICULUM**

1.	Being a General Practitioner
2.01	The GP Consultation in Practice

## **LEARNING OBJECTIVES**

To speak to relatives over the telephone without breaching confidentiality

# Specifically:

- o To know the rules around patient confidentiality
- o To be able to explain this to a patients relative

# **SCENE SETTING**

Location: GP surgery – telephone appointments.

Personal in scenario GP trainee and patient

Expected duration of scenario: 15 mins Expected duration of debriefing: 15 mins





# **DOCTOR BRIEFING**

You are a GP trainee in a GP practice placement. You are working through your morning telephone call list.

Your next call is:

Name	James Harris				
Reason for call	Please ring wife re: results				
Age	51				
Past medical history	Hypertension				
Social history / occupation	Engineer				
Repeat medications	Ramipril 5mg OD				
Allergies	Nil				
Last consultation	Annual review. BP125/75, doing well with healthy eating and exercise, discussed medications – taking, no problems. Annual Blood tests Dr Smith  Results: Glucose 5.5 U&E – normal				





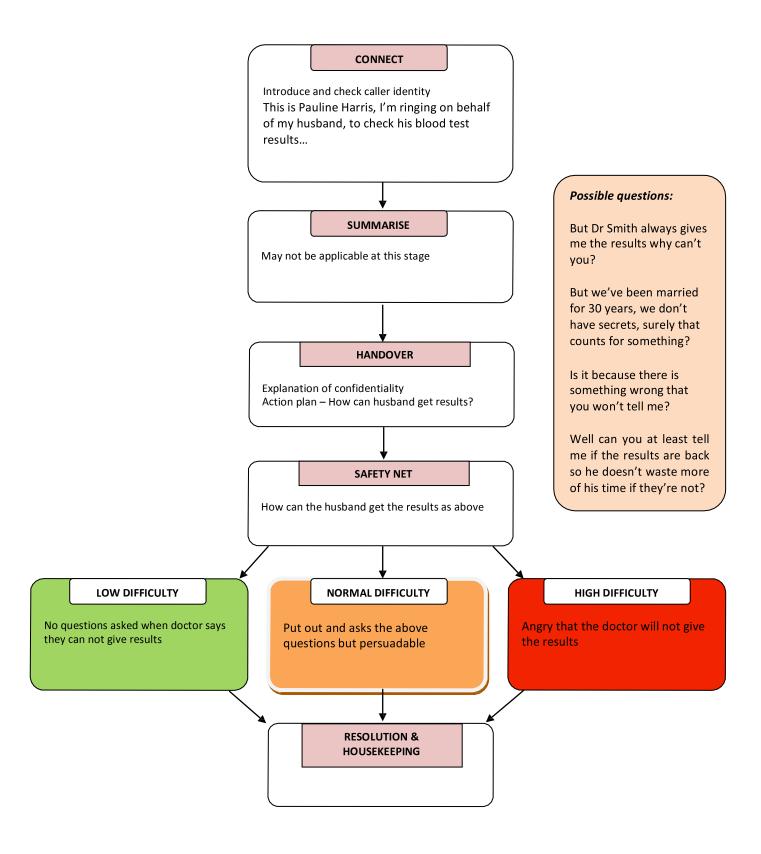
# PATIENT BRIEFING

Name	Pauline Harris					
Age	51					
Reason for telephone call	You are calling for your husbands test results. He saw the doctor last week for					
	his yearly blood pressure review and they wanted to check his sugar and his					
	kidneys.					
Opening statement	This is Pauline Harris, I'm ringing on behalf of my husband, to check his blood					
	test results.					
Information to give	He is at work so asked you to ring for the results. He works from 8 – 6pm and					
	finds it difficult to take time out to ring the doctors, he had to take a day off to attend the BP appointment.					
	Dr Smith (another GP) is always happy to give you the results so if this doctor isn't you want to know why.					
Information to give if asked	Your husband could be available for a booked telephone consultation if the					
_	surgery is open longer one evening.					
	Your husband does carry a work mobile and you could give the doctor the					
	number.					
Attitude	Initially matter of fact. If the doctor does not give you the results you are					
	initially a bit put out (but not angry). If the doctor gives a good explanation why they can't tell you, you will be understanding. If not you will remain annoyed.					
Possible questions to ask	But Dr Smith always gives me the results why can't you?					
the doctor	But we've been married for 30 years, we don't have secrets, surely that counts for something?					
	Is it because there is something wrong that you won't tell me?					
	Well can you at least tell me if the results are back so he doesn't waste more of					
	his time if they're not?					
Past medical history	N/A					
Social history / occupation	House wife					
Repeat medications	N/A					
Allergies	N/A					





# **CONDUCT OF SCENARIO**







# **DEBRIEFING - POINTS FOR FURTHER DISCUSSION**

## **HANDOVER**

How can you explain to a patient about confidentiality?

#### GMC - The duties of a doctor<sup>1</sup>

You MUST treat patients as individuals and respect their dignity. You must respect patients' right to confidentiality

# GMC guidance on confidentiality<sup>1</sup>

Confidentiality is central to trust between doctors and patients. Without assurances about confidentiality, patients may be reluctant to seek medical attention or to give doctors the information they need in order to provide good care.

Confidentiality is an important duty, but it is not absolute. You can disclose personal informationif:

- (a) it is required by law
- (b) the patient consents either implicitly for the sake of their own care or expressly for other purposes
- (c) it is justified in the public interest

Sharing information with a patient's partner, carers, relatives or friends: You should establish with the patient what information they want you to share, who with, and in what circumstances.

#### **Examples**:

This is Pauline Harris, I'm ringing on behalf of my husband, to check his blood test results...

'I'm really sorry Mrs Harris but I can't talk to you about someone else's tests. Doctors can't talk to anyone else about a patient unless that patient has said it's ok'

Dr Smith always gives me the results why can't you?

'Not talking to other people about a patient is really important to the trust between a doctor and a patient, and there are national guidelines to protect that trust'

But we've been married for 30 years, we don't have secrets, surely that counts for something?

'If your husband says it's ok to talk to you about results of tests then that would be fine, but I haven't met him so I can't assume that. There might be times when someone might not want a husband or wife to know a result first and I have to respect that and let the person choose for themself. In the same way I wouldn't talk to anyone else about your health unless you said it was ok. Lets think about how your husband can find out about results, does he have a work number? I could give him a ring, or we do have telephone or face-to-face appointments on Thursdays until 8pm and some Saturday mornings.'

Is it because there is something wrong that you won't tell me?

'I'm sorry I can't talk to you about results for someone else, that's the same whether results are normal or not'

Well can you at least tell me if the results are back so he doesn't waste more of his time if they're not?

'I'm sorry I can't discuss any of his record. Do you think any of the options I mentioned options might work for him?'

## **HOUSEKEEPING**

Any other reflections?

#### **RESOURCES**

- 1. GMC confidentiality 2009. http://www.gmc-uk.org/guidance/ethical\_guidance/confidentiality.asp
- 2. MPS Confidentiality http://www.medicalprotection.org/uk/booklets/medical-records/confidentiality
- 3. Neighbour R; The inner consultation: How to Develop an Effective and Intuitive Consulting Style. 2nd ed. Radcliffe Medical Press. 2004





## **GENERAL PRACTICE - SCENARIO 3 - HANDOUT**

## **LEARNING OUTCOMES**

To speak to relatives over the telephone without breaching confidentiality

Specifically:

- o To know the rules around patient confidentiality
- o To be able to explain this to a patients relative

## **MRCGP COMPETENCIES**

1	Communication and consultation skills - communication with patients, and the use of recognised consultation techniques
11	Maintaining an ethical approach to practice - practising ethically, with integrity and a respect for diversity

#### **MRCGP CURRICULUM**

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## **KEY POINTS COVERED**

#### **HANDOVER**

How can you explain to a patient about confidentiality?

# GMC - The duties of a doctor<sup>1</sup>

You MUST:

Treat patients as individuals and respect their dignity

Respect patients' right to confidentiality

# GMC guidance on confidentiality<sup>1</sup>

Confidentiality is central to trust between doctors and patients. Without assurances about confidentiality, patients may be reluctant to seek medical attention or to give doctors the information they need in order to provide good care.

Confidentiality is an important duty, but it is not absolute. You can disclose personal information if:

- (a) it is required by law
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Sharing information with a patient's partner, carers, relatives or friends:

You should establish with the patient what information they want you to share, who with, and in what circumstances.

### **Examples:**

This is Pauline Harris, I'm ringing on behalf of my husband, to check his blood test results...

'I'm really sorry Mrs Harris but I can't talk to you about someone else's tests. Doctors can't talk to anyone else about a patient unless that patient has said it's ok'

Dr Smith always gives me the results why can't you?





'Not talking to other people about a patient is really important to the trust between a doctor and a patient, and there are national guidelines to protect that trust'

But we've been married for 30 years, we don't have secrets, surely that counts for something?

'If your husband says it's ok to talk to you about results of tests then that would be fine, but I haven't met him so I can't assume that. There might be times when someone might not want a husband or wife to know a result first and I have to respect that and let the person choose for themself. In the same way I wouldn't talk to anyone else about your health unless you said it was ok. Lets think about how your husband can find out about results, does he have a work number? I could give him a ring, or we do have telephone or face-to-face appointments on Thursdays until 8pm and some Saturday mornings.'

Is it because there is something wrong that you won't tell me?

'I'm sorry I can't talk to you about results for someone else, that's the same whether results are normal or not'

Well can you at least tell me if the results are back so he doesn't waste more of his time if they're not?

'I'm sorry I can't discuss any of his record. Do you think any of the options I mentioned options might work for him?'

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# GENERAL PRACTICE – SCENARIO 3 – PRE-TEACHING QUESTIONNAIRE

Please ring the score that reflects your views:

	1 Agree strongly	2	3	4 Neither agree nor disagree	5	6	7 Disagree strongly
I can safely assess a cough over the telephone	1	2	3	4	5	6	7
2. I know what questions to ask a patient with a cough in order to decide whether they need further review	1	2	3	4	5	6	7
3. I can confidently discuss with patients why antibiotics don't help viral URTIs	1	2	3	4	5	6	7
4. I can give clear safety netting advice over the telephone to a patient with a cough							





# GENERAL PRACTICE – SCENARIO 3 – POST-TEACHING QUESTIONNAIRE

Please ring the score that reflects your views:

	1 Agree strongly	2	3	4 Neither agree nor disagree	5	6	7 Disagree strongly
I can safely assess a cough over the telephone	1	2	3	4	5	6	7
2. I know what questions to ask a patient with a cough in order to decide whether they need further review	1	2	3	4	5	6	7
3. I can confidently discuss with patients why antibiotics don't help viral URTIs	1	2	3	4	5	6	7
4. I can give clear safety netting advice over the telephone to a patient with a cough	1	2	3	4	5	6	7





# GENERAL PRACTICE – SCENARIO 3 – TRAINEE FEEDBACK

	Overall score out of 5: The scenario covered material that was useful and relevant to me (1 = strongly disagree, 5 = strongly agree)	
Will	you use the information / ideas from this scenario? If yes how will you us	sethem?
Hov	v could this scenario be improved for future participants?	
Oth	er comments?	
Oth	er comments.	





# GENERAL PRACTICE – SCENARIO 3 – FACILITATOR FEEDBACK

What went particularly well during this scenario?
What did not go well, or as well as planned?
Why didn't it go well?
with the go well:
How could the scenario be improved for future participants?

