

Disclosure of Personal Information by Telephone

Issue Date	Review Date	Version
March 2019	March 2024	2

Purpose

To provide staff with information regarding use of the telephone when disclosing personal information relating to patients or staff.

Who should read this document?

All staff who handle confidential information relating to patients and/or staff.

Key Messages

This procedure provides staff with general principles to follow when disclosing personal information by telephone as well as information relating to:

- Bogus Callers
- Third Party Disclosure
- Answerphone Messages
- Ward Password System

Core accountabilities

Owner	Information Governance Support Manager
Review	Caldicott and Information Governance Assurance Committee
Ratification	Senior Information Risk Owner
Dissemination (Raising Awareness)	Information Governance Support Manager
Compliance	Information Governance Support Manager

Links to other policies and procedures

Information Governance Policy

Version History

V1.1	November 2013	Initial document following archive of APN – Disclosing Information by Telephone
V1.2	February 2014	Minor amendments to job titles
V2	March 2019	Full review

The Trust is committed to creating a fully inclusive and accessible service. Making equality and diversity an integral part of the business, will enable us to enhance the services we deliver and better meet the needs of patients and staff. We will treat people with dignity and respect, promote equality and diversity and eliminate all forms of discrimination,

regardless of (but not limited to) age, disability, gender reassignment, race, religion or belief, sex, sexual orientation, marriage/civil partnership and pregnancy/maternity.

An electronic version of this document is available on Trust Documents. Larger text, Braille and Audio versions can be made available upon request.

Standard Operating Procedures are designed to promote consistency in delivery, to the required quality standards, across the Trust. They should be regarded as a key element of the training provision for staff to help them to deliver their roles and responsibilities.

Section	Description	Page
1	Introduction	3
2	Definitions	3
3	Regulatory Background	3
4	Key Duties	4
5	Procedure to Follow	4
6	Dissemination and Implementation	6
7	Document Ratification Process	6
8	Monitoring and Assurance	7
Appendix 1	Information Sheet – Telephone Use on Wards	8

Standard Operating Procedure (SOP)

Disclosure of Personal Information by Telephone

1 Introduction

This SOP provides general advice to staff in respect of disclosing personal information over the telephone in order to minimise risks of inappropriate disclosure.

There may be circumstances that are not covered by this procedure as it cannot describe exact action to take in every eventuality, however staff should abide by the general principles outlined within this document to protect patient/staff confidentiality.

This procedure does not include whether or not a particular piece of information can be disclosed. For this to be determined, staff should familiarise themselves with the relevant information legislation.

Staff need to appropriately balance maintaining patient confidentiality against patient care at all times.

2 Definitions

Personal Information

Factual information or expressions of opinion, which relate to a living individual who can be identified from that information.

Confidentiality

Information is only disclosed to individuals who are authorised to receive it by individuals who are authorised to release it. Disclosure is determined on a need to know basis.

3 Regulatory Background

Data Protection Act 2018 and the General Data Protection Regulation (GDPR) 2018

Data Protection legislation covers the way organisations process personal data of living individuals.

Common Law Duty of Confidentiality

Information is only disclosed to individuals who are authorised to receive it by individuals who are authorised to release it. Disclosure is determined on a need to know basis.

Caldicott Report

The seven Caldicott Principles when using personal information are:

- Justify the purpose
- Only use if absolutely necessary
- Use the minimum required
- Access on a need to know basis
- Everyone must understand their responsibilities
- Understand and comply with the law
- The duty to share information can be as important as the duty to protect confidentiality.

4 Key Duties

All staff have a duty to protect patient/staff confidentiality in line with the relevant legislation. This procedure is designed to help staff maintain their obligations.

5 Procedure to Follow

General Principles

If staff are asked for personal information over the telephone, they should ask themselves the following questions:

1. Can you be sure who you are speaking to?
2. If so, are they entitled to the information?
3. Are you authorised to disclose the information?
4. What is the minimum information required?

When making telephone calls, staff should ensure that they have the correct telephone number.

Staff should ensure they are happy the person on the other end is who they say they are. Questions can be asked to confirm identity, such as checking name, address, date of birth and GP details. There is no definitive method of proving identity; instead staff should assure themselves as much as reasonably practicable that the person is genuine. If there is any doubt, then the caller could be telephoned back to verify authenticity.

When dealing with other healthcare partners, such as other hospitals, government agencies and GP surgeries, it is good practice to ring switchboard numbers and ask for the required person, than to use a direct dial number.

Staff are encouraged to prepare for future telephone conversations by enquiring about preferred contact numbers and whether messages can be left with third parties.

If at any time, staff are unsure whether or not to disclose information, then they should inform the caller that they will take their contact details and telephone them back and seek advice from their Line Manager.

Eavesdropping

Staff must always be mindful of who is around and potentially able to listen to telephone conversations. The risk should be reduced as far as reasonably practicable, for example asking visitors to wait in the waiting areas rather than at the nurses' station when making telephone calls.

Bogus Callers

If staff are at all suspicious about a caller, then no information should be provided to them. External companies often pose as internal departments in order to gain information about patients/staff. Suspicion should be raised if callers are reluctant to provide their names or their contact telephone number appears to be an invalid extension number. When questioned further, the caller usually hangs up.

Legitimate callers will appreciate the need to respect patient/staff confidentiality and will usually not object to staff validating authenticity.

If a bogus call is received, then it should be logged as an incident on the Trust incident reporting system, Datix and the Information Governance team informed so that other staff can be alerted.

Answer Phone Messages

It is preferable not to leave answer phone messages if possible. However, if there is a need to do so, then the information relayed should be the minimum necessary. This can even be limited to name and telephone number only. Staff should bear in mind that landline telephones are usually shared by several members of the household, whereas mobile numbers usually pertain to individuals.

Third Parties

There may be occasions where third parties (relatives/friends) answer a telephone call made to a patient and the patient is not available. In this situation, a brief message asking the patient to return the call can be left with the third party. It is preferable to keep this information to the minimum possible, for example, not providing the specialty name or even in some situations, the call originating from the hospital.

In extenuating circumstances where providing information to the patient is time critical, staff can be satisfied that there would be no breach in confidentiality and it is in the patient's best interests, it is acceptable to leave a more detailed message with a third party, for example, informing a patient about a next day appointment for an urgent referral. The balance of maintaining patient confidentiality against providing patient care should be risk assessed on a case by case basis. Staff should always seek guidance from their Line Managers.

Ward Password System

There may be circumstances when relatives/friends of patients are not able to attend the hospital and therefore rely on obtaining information by telephone. A password can be provided to ensure the security of the information.

The patient (or next of kin if patient unable) should confirm in person, the names and telephone numbers of relatives/friends authorised to receive information by telephone.

A password should then be agreed between the ward staff, patient, next of kin and relative/friend and documented in a secure location, for example the patient's casenotes. The staff member arranging this should ensure that all other ward staff are aware.

When the friend/relative telephones for information, they should firstly be asked to confirm the password before any information is provided.

6 Document Ratification Process

The design and process of review and revision of this procedural document will comply with The Development and Management of Formal Documents.

The review period for this document is set as default of five years from the date it was last ratified, or earlier if developments within or external to the Trust indicate the need for a significant revision to the procedures described.

This document will be approved by the Caldicott and Information Governance Assurance Committee and ratified by the Senior Information Risk Owner.

Non-significant amendments to this document may be made, under delegated authority from the Senior Information Risk Owner, by the nominated author. These must be ratified by the Senior Information Risk Owner and should be reported, retrospectively, to the Caldicott and Information Governance Assurance Committee.

Significant reviews and revisions to this document will include a consultation with named groups, or grades across the Trust. For non-significant amendments, informal consultation will be restricted to named groups, or grades who are directly affected by the proposed changes.

7 Dissemination and Implementation

Following approval and ratification, this procedural document will be published in the Trust's formal documents library and all staff will be notified through the Trust's normal notification process, currently the 'Vital Signs' electronic newsletter.

Document control arrangements will be in accordance with The Development and Management of Formal Documents.

The document author(s) will be responsible for agreeing the training requirements associated with the newly ratified document with the Senior Information Risk Owner and for working with the Trust's training function, if required, to arrange for the required training to be delivered.

8 Monitoring and Assurance

This procedure is underpinned by the Information Governance Policy.

All breaches of confidentiality must be reported on the Trust Incident Reporting System, Datix. Staff should also notify their Line Manager and the Information Governance Team.

Incidents will be managed in line with the Information Governance Serious Incident Requiring Investigation SOP.

Staff that breach confidentiality may be subject to disciplinary action in line with the Trust Performance and Conduct Policy.

9 Reference Material

Data Protection Act 2018/General Data Protection Regulation (GDPR)

(<https://ico.org.uk/for-organisations/guide-to-the-general-data-protection-regulation-gdpr/>)

Information Sheet

Telephone Use on Wards

This information sheet is designed to assist ward staff with disclosure of information by telephone.

Care must be taken to ensure that confidential information is not overheard by an unauthorised person as much as reasonably practicable. Be mindful of who is around and potentially able to listen to telephone conversations.

If you are asked for patient identifiable information over the telephone, ask the following questions:

- Can you be sure who you are speaking to?
- If so, are they entitled to the information?
- Are you authorised to disclose the information?
- What is the minimum information required?

Password System on Wards

There may be circumstances when relatives/friends of patients are not able to attend the hospital and therefore rely on obtaining information by telephone. A password can be provided to ensure the security of the information.

