

Hamilton Medical Centre

Communications Policy, including Electronic Communications

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Policy

Our practice is mindful that even if patients have provided electronic contact details, they may not be proficient in communicating via electronic means and patient consent needs to be obtained before engaging in electronic communication. Electronic communication includes email, facsimile and Short Message Service (SMS).

Communication with patients via electronic means is conducted with appropriate regard to privacy.

It is important for patients telephoning our practice to have the urgency of their needs determined promptly. Our practice team try to obtain adequate information from the patient to assess whether the call is an emergency before placing the caller 'on hold'. Our team members are trained during induction, and on an ongoing basis, to recognise urgent medical matters and the procedures for obtaining urgent medical attention, and when to escalate a telephone call to a member of the medical or clinical team.

Patients of our practice are able to access a member of our medical or clinical team by telephone to discuss their clinical care. When telephone communication is received, the urgency and nature of the call is gathered to determine if the call will be transferred immediately or if a message will be taken for the call to be returned. In non-urgent situations, patient calls should not interrupt consultations with other patients. Our practice team members are aware of each practitioner's policy on accepting and returning telephone calls.

Patient messages taken for follow-up by a general practitioner or other practice team member are documented for their attention and action or, in their absence, for the designated person who is responsible for that absent team members' workload. This is done using the messaging system within Best Practice software and automatically saves into the patient record.

Only a member of the medical or clinical team can provide treatment or advice over the telephone. Patients are advised through information contained in the practice information sheet, detailed fee list and on our website and from the practice team member receiving the call, if a fee will be incurred for the telephone advice to be provided.

Procedure

Our practice's primary reason for communicating electronically to patients is to issue appointment reminders and we verify the correct contact details of the patient at the time of the appointment being made. Our practice also uses email and fax largely to distribute documents of a sensitive nature, such as prescriptions, referrals, requests and results. Before any email of this nature is sent, written or verbal informed consent is given by the patient to our staff, and this is recorded in the patient file.

Whilst not encouraged, our practice allows patients an opportunity to obtain advice or information related to their care by electronic means, but only where the general practitioner determines that a face-to-face consultation is unnecessary and that communication by electronic means is suitable. Our practice will only provide information that is of a general, non-urgent nature and will not initiate electronic communication (other than SMS appointment reminders) with patients. Any electronic communication received from patients is also used as a method to verify the contact details we have recorded on file are correct and up to date.

Communication with patients via electronic means is conducted with appropriate regard to privacy. Before obtaining and documenting the patient's consent, patients are fully informed through information contained on all new patient information sheets, on our website, of the risks associated with electronic communication in that the information could be intercepted or read by someone other than the intended recipient.

When an email message is sent or received in the course of a person's duties, that message is a business communication and therefore constitutes an official record. Patients are informed of any costs to be incurred as a result of the electronic advice or information being provided, and all electronic contact with patients is recorded in their health record.

All members of the practice team are made aware of our policy regarding electronic communication with patients during induction and are reminded of this policy on an ongoing basis. They are made aware that electronic communications could be forwarded, intercepted, printed, and stored by others. Each member of the practice team holds full accountability for emails sent in their name or held in their mailbox, and they are expected to utilise this communication tool in an acceptable manner. This includes, but is not limited to:

- Limiting the exchange of personal emails
- Refraining from responding to unsolicited or unwanted emails
- Deleting hoaxes or chain emails
- Email attachments from unknown senders are not to be opened
- Virus checking all email attachments
- Maintaining appropriate language within electronic communications
- Ensuring any personal opinions are clearly indicated as such, and
- Confidential information (e.g. patient information) must be encrypted.

Our practice reserves the right to check an individual's email accounts as a precaution to fraud, viruses, workplace harassment or breaches of confidence by members of the practice team. Inappropriate use of the email facility will be fully investigated and may be grounds for dismissal.

The practice uses an email disclaimer notice on outgoing emails that are affiliated with the practice stating:

This email contains confidential information intended only for the use of the persons named above. If you are not the named or intended recipient, any disclosure, use or copying of the contents of this email is prohibited. If you receive this email in error, please contact us immediately by telephone on 0249611713. This email should then be deleted or returned. Thank you.

All members of the practice team are familiar with each medical and clinical team's policy of receiving and/or returning telephone calls.

Important or clinically significant communications with or about patients are noted in the patient's health record, and we have provisions for patients' usual general practitioners to be contacted after-hours for life threatening or urgent matters or results.

All telephone messages received are returned in a timely manner.