

Protecting the confidentiality of medical records in the theatre environment

Sir,

Patients share information with medical staff on the assumption that it will be kept confidential, and clinicians, as the recipients of this information, have a professional and ethical responsibility to ensure that it is shared appropriately.

The Caldicott review (Department of Health, 2013) defined a data breach as any failure to meet the requirements of the Data Protection Act. This includes unlawful disclosure or misuse of confidential data and inappropriate invasion of people's privacy. Further it recommends that in cases when there is a breach of personal confidential data, the individual or organization legally responsible for the data must give a full explanation of the cause of the breach with the remedial action being undertaken and an apology to the person whose confidentiality has been breached.

The World Health Organization (2009) surgical safety checklist ensures that theatre staff are aware of vital information before surgery, e.g. planned surgery, site of surgery, anaesthetic and sur-

gical concerns. It is often necessary for medical personnel to refer to patient records during the course of surgical procedures and theatre staff may be asked to assist in providing this information. At such times, access to the notes is a clinical necessity, but unnecessary access to patients' notes must be avoided. Most theatre staff will have, on occasion, noticed other theatre personnel accessing a patient's notes and reading information pertaining to the patient's past medical history but which is not necessarily pertinent to the procedure being performed. This may, for instance, include looking at photographs, past correspondence and investigations. The authors are concerned that this constitutes a breach of patient confidentiality.

Confidentiality is an obligation of all staff and everyone should be aware of their responsibilities (NHS England, 2014). As health-care professionals we share the responsibility for safeguarding access to patients' records and ensuring that this is on a 'need to know' basis.

While the introduction of electronic patient records is a step in the right direction health-care professionals must be aware of the security and patient confidentiality issues relating to systems they use (Association of Anaesthetists of Great Britain and Ireland, 2003). Unnecessary access to patient records still may persist,

especially where there is personal interest or gain, e.g. friends or family members, or celebrities (Adams, 2008).

The authors' intention is to highlight the responsibility of theatre staff in protecting the confidentiality of medical records in the theatre environment and to suggest that they should play a more active role in this regard.

Sarah McCormick/Sandeep Kapur
CT2 Anaesthetics/Consultant Anaesthetist
Department of Anaesthesia
Dudley NHS Foundation Trust
Russells Hall Hospital
Dudley DY1 2HQ
(sarah.mccormick@dgh.nhs.uk)

- Adams G (2008) Medical secrets of Hollywood stars sold by hospital staff. www.independent.co.uk/news/world/americas/medical-secrets-of-hollywood-stars-sold-by-hospital-staff-886109.html (accessed 30 November 2014)
- Association of Anaesthetists of Great Britain and Ireland (2003) Theatre Efficiency. www.aagbi.org/sites/default/files/theatrefficiency03.pdf (accessed 14 April 2015)
- Department of Health (2013) Information; To share or not to share? Government response to Caldicott Review. www.gov.uk/government/uploads/system/uploads/attachment_data/file/251750/9731-2901141-TSO-Caldicott-Government_Response_ACCESSIBLE.PDF (accessed 14 April 2015)
- NHS England (2014) Confidentiality Policy. www.england.nhs.uk/wp-content/uploads/2013/06/conf-policy-1.pdf (accessed 14 April 2015)
- World Health Organization (2009) Safe Surgery. www.who.int/patientsafety/safesurgery/en/ (accessed 13 April 2015)

Forthcoming case reports

Congenital extrahepatic portosystemic shunt

Neonatal meningitis caused by *Salmonella agama*

Silent bladder perforation

Inverse takotsubo cardiomyopathy in a young woman investigated by non-invasive coronary CT angiogram

Lower limb lymphoedema and obesity: a much neglected association

Visual hallucinations: I can't believe what's happening in front of my eyes

Muscle wasting, bone pain, and cognitive decline: a unifying diagnosis

