

# TELEPHONE & ELECTRONIC COMMUNICATIONS

**Our practice manages telephone calls, telephone messages, and/or electronic messages from patients.**

## Telephone communication

Patients of our practice can access a GP by telephone to discuss their clinical care. A GP will always be available during normal practice hours for emergency advice, however if a patient asks to speak to a GP, the staff member receiving the call should assess if the call is urgent and if so, put the caller through to the practice nurse for triaging in the first instance. In non-urgent situations, messages are taken for subsequent follow-up by the GP so that patient calls do not interrupt consultations with other patients.

Messages are sent to the GP via Best Practice messages for the doctor to action. The staff member must make sure that the message is assigned to the correct patient, with a detailed message including any names and dosages of medications and a contact telephone number.

The GP determines if advice can be given on the phone or if a face-to-face consultation is necessary always being mindful of clinical safety and will reply to the message with action taken or decision.

Messages relating to patients are linked to the patient's health record in Best Practice so there is a record of the correspondence. Our practice team documents each attempt to contact a patient in the patient's health record.

Non-medical staff do not give treatment, advice or results of tests over the phone unless directed to by a GP. If the caller is inquiring about pathology or imaging results, staff do not disclose any results but may read any annotations by the GP to the patient. If a GP has asked the nursing staff to phone a patient regarding a result, or wants them to make an appointment, this must be recorded in the patient's health record via contact notes by the staff member.

When phoning patients regarding an appointment or giving results – as per a GP's instructions – staff must use at least three patient identifiers. Messages cannot be left on voicemail/answer machines or with anyone else unless it is notated in the patient's health record that we have permission to do so by the patient.

All communications relating to patient care are noted in the patient's health record. If applicable, patients are advised if a fee will be incurred for phone advice.

Staff have been trained to triage urgent medical matters and the procedures for obtaining urgent medical attention – reception staff know when to put telephone calls through to a clinical staff member for clarification.

This practice prides itself on the high calibre of customer service we provide, especially in patient security, confidentiality and right to privacy, dignity and respect. Staff do not openly state a patient's name over the phone within earshot of other patients or visitors. Staff do not give out details of patients who have had consultations at this practice nor any other identifying details or account information – except as deemed necessary by government legislation or for health insurance funds. We do not disclose any personal information to anyone other than the patient.

If a person calls to ask if a family member or friend is or has attended our practice, they are advised that our practice abides by a strict privacy and confidentiality policy and therefore no such information can be disclosed – if the caller persists they can be transferred to the Practice Manager or a message left for the Practice Manager to return their call.

If the call is assessed as urgent the patient will be transferred to the practice nurse who will determine:

- whether the patient requires to speak with their GP immediately or
- if another GP could assist or
- if the patient requires us to phone 000

If non-urgent, three of the approved identifiers are used to prove the caller's identity:

- family and given names
- date of birth
- address
- gender (as identified by the patient themselves)
- patient record number, where it exists
- individual Healthcare identifier

A comprehensive phone answering message is maintained and our 'on hold' message provides advice to call 000 in the case of an emergency.

## Electronic Communication

When communicating with patients electronically our practice complies by:

- adhering to the [Australian Privacy Principles \(APP\)](#), the [Privacy Act 1988](#) and any state-specific laws
- clearly stating what content, the practice team can and cannot send using electronic communication (e.g. our practice requires that sensitive information is only communicated face-to-face by a medical practitioner or other appropriate health professional)
- informing patients that there are risks associated with some methods of electronic communications and that their privacy and confidentiality may be compromised
- obtaining consent from the patient before sending health information to the patient electronically (consent is implied if the patient initiates electronic communication with the practice)
- checking that the information is correct and that we are sending it to the correct email address, phone number, or person, before sending the information

- avoiding sending information that promotes products and/or preventive healthcare, because some patients can interpret this as an advertisement
- Electronic emails contain patient information are only sent with encryption to protect patient privacy

Patients who have consented to SMS correspondence are sent a reminder each morning via a text message to their mobile phone of their appointment time.

Staff and Patients using email/SMS or other forms of electronic messaging should be aware that it is not possible to guarantee that electronic communications will be private. All personal health information or sensitive information sent by email must be securely encrypted. The practice uses an email disclaimer notice on outgoing emails that are affiliated with the practice.