



OTAGO MEDICAL SCHOOL  
*Te Kura Hauora o Ōtākou*

## **Students Viewing Patients' Health Information**

Students should only have access to, or be provided with, a patient's health information if the patient consents, or if they are involved in that patient's care.

Student involvement in a patient's care should, in so far as reasonably possible, proceed on condition of the patient's consent. It is not always feasible to gain explicit consent from a patient before students become involved in their care. In such situations, patients should be made aware of the students' involvement as soon as is practically possible and given the opportunity to decline student involvement in their care.

Where ever students are involved in patient care, steps should be taken to ensure patients are aware of the students' presence, and to inform them that they are free to decline student involvement. Communication with patients could be from the consulting doctor, through conversation with reception staff, using physical signage, putting information on a practice website, and/or information patients are given on registration with a practice.

There is an expectation that clinical supervisors will use their discretion in not allocating patients to students without permission where there might be doubt about patient consent to involvement in teaching, or when the patient is known to, or could reasonably be expected to be known to, the student. If a student is introduced to a patient and realizes they are in some way personally connected to a patient they should speak to the supervising doctor about this, and where appropriate be excused from their care.

When a student is involved in caring for a patient they should have access to or be provided with all the information needed to fulfill their role properly. They should not access or be provided with health information that is not relevant to the care they are involved in providing. Patients have a right to privacy, and clinical teachers and students should remain sensitive and alert to the potential harms of misusing patient information.

In the secondary care setting, there are DHB-wide policies in place. Information is provided to patients on multiple occasions, indicating that patient records may be handled and viewed by a range of people as part of their care, including non-clinicians and students. The policies make clear that clinical information is used for purposes other than direct clinical care, e.g. audit, teaching and research.

Example of signage for waiting room:

This is a university affiliated teaching practice. Clinical students are part of the health care team, seeing patients and viewing clinical records. Your assistance in teaching students is

greatly appreciated. You have the right to decline involvement in teaching students – please notify [receptionist/nurse].

The above is in accordance with the Health Information Privacy Code 1994. Students and doctors should be aware of the requirements of this Code when collecting, using and communicating health information.

*This policy has been developed in response to comments from the offices of the Privacy Commissioner & Health and Disability Commissioner.*

Produced by the Professional Practice Sub-committee  
Endorsed by MCC: 7 December 2018