



Whilst in general terms confidentiality should be maintained by the buddy pairing, if serious issues/concerns arise then it may be necessary for this to be breached, for example in cases of serious concerns relating to patient safety, fitness to practice or serious concerns relating to a trainee's mental or physical health.

This policy serves as a guide to when the senior trainee of the pair needs to forego confidentiality. The General Medical Council states in Good Medical Practice ¹ that:

- You should be willing to take on a mentoring role for more junior doctors and other healthcare professionals
- You must support colleagues who have problems with their performance or health. However, patient safety is paramount and a clinician's primary priority in all situations

When breaching this confidential relationship, the junior trainee should be informed of the obligation to discuss the content of a conversation, including:

- Why the information needs to be disclosed
- Who should disclose this information and how this will take place
- If there is disagreement, outline what you are going to say, when and to whom

The pathway for escalation should be as follows, with further action taken as necessary.

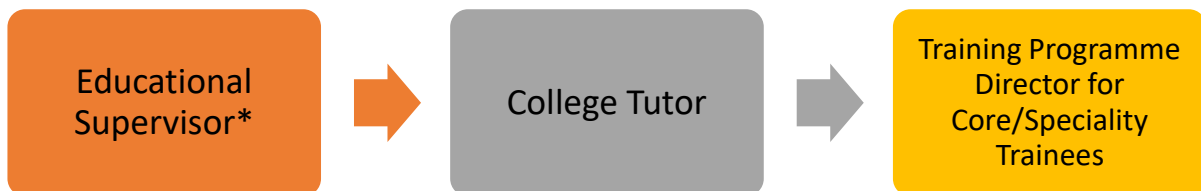


Figure 1- Escalation pathway for issues outside scope of informal buddying. *this can either be the junior or the senior trainee's educational supervisor.

Examples of Potential Reasons for Escalation

Patient Safety Concerns

GMC guidance states that 'Raising and acting on concerns about patient safety (2012) sets out our expectation that all doctors will, whatever their role, take appropriate action to raise and act on concerns about patient care, dignity and safety'². In addition, the GMC advises ²:

- Your duty to report overrides personal and professional loyalties
- You can raise concern without a burden of proof
- Whistleblowing is legally protected

When buddying you may come across situations where patient safety issues are raised. The issue should be discussed with the junior trainee and then this should be escalated following the flowchart in figure 1.

Fitness to Practice Concerns

The GMC define fitness to practice in the following ways ³:

1. To practise safely, doctors must be competent in what they do. They must establish and maintain effective relationships with patients, respect patients' autonomy and act responsibly and appropriately if they or a colleague fall ill, and their performance suffers.
2. But these attributes, while essential, are not enough. Doctors have a respected position in society and their work gives them privileged access to patients, some of whom may be very vulnerable. A doctor whose conduct has shown that he cannot justify the trust placed in him should not continue in unrestricted practice while that remains the case.
3. In short, the public is entitled to expect that their doctor is fit to practise and follows our principles of good practice described in Good medical practice. It sets out the standards of competence, care and conduct expected of doctors.

If you are concerned that a junior trainee's repeated conduct or health is resulting in patient safety concern, then this should be escalated following the flowchart in figure 1.

Concerns About a Trainee's Physical or Mental Health

Early recognition and access to support is of vital importance in cases where you are concerned about a trainee's physical or mental health. Many doctors experience a stress or burnout at some time in their career and if you think that this is happening to a trainee you are paired with then you may be able to discuss the issue with the trainee, offer support and most importantly signpost them to appropriate resources for further help. If these concerns are significant and beyond the scope of the buddy scheme, then this should be escalated following the flowchart in figure 1.

Acknowledgements

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References

1. GMC. Good Medical Practice. Domain three – Communication, partnership and teamwork www.gmc-uk.org/-/media/documents/good-medical-practice---english-1215_pdf51527435.pdf Page 15
2. GMC. Raising and acting on concerns about patient safety. www.gmc-uk.org/ethical-guidance/ethical-guidance-for-doctors/raising-and-acting-on-concerns/part-1-raising-a-concern#paragraph-7
3. GMC The Meaning of Fitness to Practice. Published April 2014 | Date for review April 2019. Code: GMC/MFTP/0414 www.gmcuk.org/media/documents/DC4591_The_meaning_of_fitness_to_practise_2541656_2.pdf