



## Confidentiality Declaration

I understand that all information about patients held by COMMISCEO PRIMARY CARE SOLUTIONS is strictly confidential, including the fact of a patient having visited any one of the locations where services are delivered by the organisation.

I will abide by the confidentiality guidelines set out below:

My individual responsibility for safeguarding the security and confidentiality of information relating to patients; their relatives and carers and that of staff and colleagues. I understand that details from which a patient or member of staff may be identified, or information of a sensitive or privileged nature must not be talked about or sent outside of the Organisation without the permission of the person, or for purposes that are listed under the Data Protection Act 1998, and at all times to comply with the requirements of the Data Protection Act 1998.

I fully understand my obligations and the consequences of any breach of confidentiality on my part. I understand that a breach of these obligations may result in dismissal and that any breach, or suspected breach, of confidentiality by me after I have left the Company's (Commisceo Primary Care Solutions) employment will be passed to the organisations lawyers for action.

I fully understand my responsibilities to have read and understood any advice and guidance on confidentiality published by the governing body/ bodies (General Medical Council / Nursing & Midwifery Council) with whom my professional qualifications are registered.

Print name: \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_