

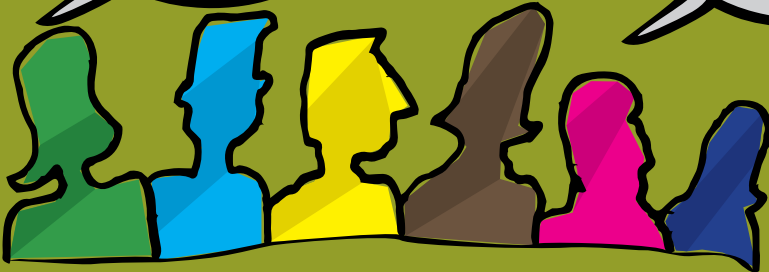
Working with your doctor: useful information for patients



WHAT SHOULD
I EXPECT?

HOW DO I
CHANGE
MY GP?

WHAT IF
SOMETHING
GOES WRONG?



Comhairle na nDochtúirí Leighis
Medical Council



Contents

Purpose of the booklet	5
Chapter 1 – The informed patient	6
Partnership	6
What your doctor needs to know	7
Your medical history	7
Your doctor will give you information	7
'Patient Safety First' leaflet	8
Trust and respect	8
Actively take part	9
Your values and beliefs	9
Test results	9
Transfer information	9
Plan end-of-life care	9
Allow students to learn	9
Think about how your condition affects others	9
Chapter 2 – Doctors who may treat you	10
General Practitioners (GPs)	10
Hospital doctors	10
Consultants	10
Non-consultant hospital doctors	10
Interns	11
Community-based doctors	11
Doctors in other roles	11
What to consider when choosing a doctor	12
Telemedicine	12
What can I do if a GP is not accepting new patients?	12
My doctor says I will need to find a new doctor. Is that ethical?	13
Is it ethical for a doctor I have never seen to refuse to see me?	13
What happens if I move to a new area or want to change my GP?	13
Who is responsible for notifying patients and moving medical records if a doctor is retiring, deceased or the practice is being transferred?	13
My doctor is moving away. Can you help me find him/her?	14

Chapter 3 – What should I expect from my doctor?	15
How will you be involved?	15
Giving or refusing consent to treatment	15
Consent where a patient has difficulty understanding or communicating	16
Choosing to have a chaperone present during intimate examinations	17
Privacy and confidentiality	17
How information about you is shared	17
Keeping yourself informed	18
Using the internet	18
Second opinions	18
Medical records	18
If things go wrong	19
Chapter 4 – The Medical Council’s role	20
Registration with the Medical Council	21
Specialties in medicine	21
Complaints	22

Purpose of the booklet

This booklet aims to help you get the best health care through working in partnership with your doctors and other health professionals. It explains the different types of doctors that might treat you, what you can expect from them and how you can work with them to improve your care. The booklet also explains the Medical Council's role and provides help if you are looking for information about health and health care.

This booklet has been written for patients and the public. It is not part of the Guide to Professional Conduct and Ethics, which sets out the standards of care that patients should expect from their doctor.

Chapter 1 – The informed patient

This chapter explains how you can contribute to your own health care. When you take a role in your own care and decisions about your treatment, you can improve your healthcare experience. You may see improvements in your health too.

Partnership

Partnership – doctors and patients working together – is one of the three pillars of good professional practice. These pillars form the basis of our Guide to Professional Conduct and Ethics.¹

Partnerships are based on good communication, trust and mutual respect.

Good communication is important for doctors to diagnose and treat you effectively. Doctors need to understand your:

- medical history;
- symptoms;
- lifestyle;
- preferences; and
- beliefs.

To help your doctor to do this, you should answer their questions fully and honestly. You should be as clear as you can when giving information about your health, your concerns or worries, and your expectations.

¹ www.medicalcouncil.ie/News-and-Publications/Reports/Guide-to-Professional-Conduct-and-Ethics-8th-Edition-2016-.pdf

What your doctor needs to know

Your medical history

Doctors will usually want to know your medical history. This includes:

- your previous illnesses and conditions; and
- knowing if you've been in hospital before and why.

It also includes information about your parents and family members, particularly if any conditions or illnesses are common in your family;

- **Your health, symptoms, and any medication you are taking**
Medication includes over-the-counter and herbal remedies. You should describe your symptoms and any concerns you have about your health to your doctor.
- **Other information about you**
If your doctor knows your social circumstances and your lifestyle, it can help them understand your overall health better. Answer questions honestly. Tell your doctor anything that is important to you and that might affect decisions about your treatment.

Your doctor will give you information

Doctors will also give you information. They should explain clearly your diagnosis and treatment options, and advise you on how to take any medications they have prescribed.

Listen carefully and ask for any extra information you need about your:

- health;
- treatment options; or
- medicines.

Make sure you ask about anything that is unclear or confusing.

'Patient Safety First' leaflet

You might find it helpful to read the HSE leaflet Patient Safety First: It's safer to ask.² This has useful advice and tips, such as:

- write down questions before your appointment so you don't forget to ask for advice or information you need;
- bring a list of medications you are taking;
- make notes during the consultation; and
- take a family member or friend with you so they can help you to ask questions and remind you about anything you have missed or forgotten.

Tell your doctor if you want to:

- change your treatment plan;
- look at other options; or
- get a second opinion from another doctor about your diagnosis or treatment.

Trust and respect

Trust and mutual respect are important in any partnership. Your doctor should provide you with good care and treatment. They should respect your dignity, privacy and choices. In return, you should keep appointments. If you cannot attend, tell your doctor.

You should agree a treatment plan with your doctor. It is important for your health and to protect others around you that you take medication as instructed and complete your treatment, even if your symptoms have disappeared.

² www.hse.ie/eng/services/yourhealthservice/focus/ask.html

Actively take part

Having an active role in your care improves your healthcare experience and benefits others. Ask questions and follow your treatment plan.

Your values and beliefs

You should also discuss and make decisions about your care that match your values and beliefs.

Test results

Follow up on test results (don't assume no news is good news).

Transfer information

Make sure your new doctor has all the relevant information if your care is being transferred to another doctor or setting.

Plan end-of-life care

Make plans with your doctor about how you want to be cared for when you are nearing the end of your life.

Allow students to learn

Allow students to observe or take part in your care: this will help the next generation of doctors to gain knowledge and experience that will benefit patients and society in the future. However, you may wish not to allow supervised students to be present at consultations.

Think about how your condition affects others

Be aware of the effects of your behaviour if you have a condition or disease that may place others at risk. Ask about how your disease could be passed on to others. Follow advice to prevent spreading a disease or infection.

Chapter 2 – Doctors who may treat you

Doctors have a wide range of skills, experience and roles. This is reflected in the range of job titles they use. These are explained below.

General Practitioners (GPs)

Most patients go to their family doctor – called a General Practitioner (GP) – when they are concerned about their health. If a GP is registered in the Specialist Division of the Register, they have completed recognised specialist training in General Practice after they qualified as a doctor. This allows them to provide personal and continuing care to people in the community. If you do not have a GP, you can use the Find a GP³ facility on the Irish College of General Practitioners website.⁴

Your GP will refer you to a hospital if you have a health condition that needs specialist management or treatment. However, you can attend some specialist services, including emergency care and sexual health services, without a GP referral.

Hospital doctors

Hospitals employ doctors at all stages in their careers. Many of them work in teams of doctors with different levels of experience and expertise, as well as nurses and other health professionals. You may see several types of doctor, depending on your condition. The doctors in your hospital team may include:

Consultants

Consultants are doctors who have completed recognised specialist training and are entitled to work without supervision in the health service or in private practice. They are registered in the Specialist Division of the Medical Council Register.

Non-consultant hospital doctors

Non-consultant hospital doctors, for example, Senior House Officers, Registrars and Specialist Registrars are doctors undertaking specialist training in their field of practice (for example, surgery, psychiatry or anaesthesia). Training usually lasts from four to six years, depending on the specialty. During this time, they work in clinical practice under the supervision of a consultant, as well as learning from senior colleagues and studying.

³ www.icgp.ie/go/find_a_gp

⁴ www.icgp.ie

Senior House Officers are normally in the early stages of specialist training. Doctors practising in recognised training posts are registered in the Trainee Specialist Division of the Medical Council Register. If a Senior House Officer or Registrar is not practising in a recognised training post, they will be registered in the General Division of the Register.

Not all doctors finish their specialist training. These doctors continue to develop knowledge and experience throughout their careers, often specialising in an aspect of their chosen specialty. They will be part of a team led by a consultant and work to his or her direction. They will be registered in the General Division of the Medical Council Register.

Interns

Interns are doctors doing their training in the first year after they graduate from medical school. Graduates must successfully complete this year of work, which combines education and training with providing clinical care. Their work with patients is supervised. Interns are registered in the Trainee Specialist Division of the Medical Council Register.

Community-based doctors

Community-based doctors work in schools and residential facilities, as well as in prison, mental health and occupational health services.

Doctors in other roles

Some doctors do not work directly with patients. These include public health specialists, doctors in management roles and laboratory-based doctors. They are vital to healthcare provision, although patients do not usually meet them.

What to consider when choosing a doctor

Before choosing a doctor you will want to consider:

- **The doctor's registration status**
You can check this on our website. There are several kinds of registration, which are explained in Chapter 4. If you are looking for a doctor in private practice to provide a cosmetic procedure, for example, it is important to check that the doctor has specialist registration in plastic, reconstructive and aesthetic surgery;
- **Whether you can get to your surgery, hospital or clinic easily**
This is important for GP services (including home visits) or if you need to attend a clinic or hospital regularly or for care after a procedure or operation;
- **Whether practice arrangements suit your needs**
For example, appointment times and out-of-hours care.

Doctors must tell patients before a consultation and treatment what the costs are likely to be. Many doctors do this by showing a price list at their practice or on their website.

Doctors must be honest when advertising their services. The information they publish about their services should be factually accurate, evidence-based and not misleading.

Telemedicine

Telemedicine is the use of technology, such as telephones, websites, apps and Skype, to provide health-care services to patients. Your GP or hospital doctor may use telemedicine services as well as face-to-face consultations.

If you are thinking about getting treatment or advice using a telemedicine service from a doctor you have not seen before, you should check that they are registered with the Medical Council. Doctors based in other countries providing services to patients in Ireland using the internet or telephone should be registered with the Council. This means that they are required to have the same standards as other doctors practising in Ireland. The Council can take a complaint about their practice if you wish to make one.

Please note that telemedicine cannot replace the relationship with your GP or provide the benefits of face-to-face consultations and physical examinations, which make care safer and more effective.

What can I do if a GP is not accepting new patients?

Sometimes GP practices have a full list of patients and cannot take on new patients. In this case, you should go to another GP practice in your area. You can transfer to the GP of your first choice at a later date if they start taking on new patients again.

My doctor says I will need to find a new doctor. Is that ethical?

Sometimes a doctor-patient relationship breaks down. In those cases, it is best for the doctor and the patient to end the relationship. For example, you and your doctor may have long-standing disagreements about treatment. Doctors can also refuse treatment or require you to leave a practice if you have been physically or verbally aggressive to them or a member of their staff.

Doctors should not end the relationship because of their views about you, your lifestyle or beliefs, or only because you have made a complaint.

See the advice on the transfer of your medical records below.

Is it ethical for a doctor I have never seen to refuse to see me?

This will depend on the circumstances. For example, specialists generally see patients only when they have been referred to them by a GP. They may reasonably refuse patients who have not been referred. Also, some GPs may have a full list of patients and be unable to accept new patients.

Doctors must not refuse to see you because of their views about you, your lifestyle or your beliefs.

What happens if I move to a new area or want to change my GP?

If you want to change GP, you should approach a local GP practice and ask to register. You should provide details of your previous GP so that the transfer of your records can be arranged.

Who is responsible for notifying patients and moving medical records if a doctor is retiring, deceased or the practice is being transferred?

When you wish to change doctor, or if your doctor retires or leaves the area, your medical records can be transferred to another doctor. If your doctor plans to retire or stop practising, they should let you know beforehand. They should contact you to ask you to agree to transfer your records to your new doctor.

If your doctor dies, your records will usually be taken over by a doctor within the practice or an outside doctor who takes over the practice. Your records can also be returned to you to give to a new GP of your choice.

My doctor is moving away. Can you help me find him/her?

The Council does not provide doctors' addresses. If your doctor is moving away, they will help with the transfer of your records to another doctor (see question above).

Chapter 3 – What should I expect from my doctor?

The Council's Guide to Professional Conduct and Ethics⁵ sets out the standards of professional practice for doctors. It also provides more information about the topics in this Chapter.

As a patient you can expect doctors to:

- provide good care,
- treat you with respect,
- put your interests first,
- be honest and trustworthy,
- communicate clearly.

How will you be involved?

Doctors are expected to communicate clearly. This involves listening to and answering your concerns, and explaining medical conditions and treatments in a way that you can understand.

As a patient, it is up to you to make decisions and choices about your care and treatment.

Giving or refusing consent to treatment

Doctors can only undertake medical investigations, examinations or treatment with consent. Consent is usually given by the patient, or for children under age 16, by their parent or guardian. Your doctor should help you to make decisions that are right for you by giving you information in a clear and easy-to-understand way. If you want, you can have someone present to support you during discussions about your condition and treatment.

Before asking for your consent, your doctor will explain what they propose to do and why. This includes:

- giving you information about your condition or illness and what might happen if it is not treated;
- explaining the different options for treatment;
- explaining what the investigation or treatment involves for each option;

⁵ www.medicalcouncil.ie/News-and-Publications/Reports/Guide-to-Professional-Conduct-and-Ethics-8th-Edition-2016-.pdf

- telling you about any common or serious side-effects of the investigations or treatments. This includes telling you if treatments will be painful and how pain will be treated;
- informing you about any common or serious risks that go with the treatment.

The amount of information the doctor gives you will depend on how much information you want, the type of condition you have and the treatment involved.

You are entitled to refuse any investigation, examination or treatment. At any stage, you can change your mind and withdraw your consent, or agree to a treatment that you previously refused.

If you agree to a procedure, you will be asked to make this clear by:

- telling the doctor you agree; or
- showing consent by your actions, for example, holding out your arm for your blood pressure to be taken; or
- signing a consent form.

Consent where a patient has difficulty understanding or communicating

Some patients have conditions, such as dementia or learning disabilities, which affect their ability to understand information and to make or communicate decisions. Doctors must carefully assess these patients and provide additional support to help patients make decisions for themselves.

If a patient cannot understand enough to choose, a relative or carer with legal authority to make decisions for patients can give or refuse consent. If there is no one with legal authority to make decisions, doctors must decide what treatment is in the patient's best interests.

More information about the consent process is available in our Guide to Professional Conduct and Ethics⁶ and in the HSE's National Consent Policy.⁷

⁶ www.medicalcouncil.ie/News-and-Publications/Reports/Guide-to-Professional-Conduct-and-Ethics-8th-Edition-2016-.pdf

⁷ www.hse.ie/eng/about/Who/qualityandpatientsafety/National_Consent_Policy/

Choosing to have a chaperone present during intimate examinations

Doctors will help you feel at ease when they examine you. They do this by explaining to you why you need the examination and what it involves. They must also offer you a chaperone⁸ before performing an intimate examination. This is to make sure the examination is being conducted appropriately. Intimate examinations usually involve the breasts, genital area or rectum. It is up to you to decide if you would like a chaperone to be present during the examination. If no chaperone is available, you can choose to put off the examination to a later date or to go ahead without a chaperone present.

If you ask your doctor for a chaperone and your request is refused, you should ask to be examined by another doctor.

Privacy and confidentiality

Your doctor will keep a record of your health and treatment in your medical records. Your records may include visual and audio recordings, and information given by third parties, such as relatives.

Your doctor must keep your records confidential. It is up to you to tell your doctor who they can share information with or include in consultations. This means you should tell your doctor if you want family members to be given information or to be present during consultations, or if you don't want family members involved or informed.

Sometimes, your doctor may by law have to reveal certain information.⁹

How information about you is shared

Information about you is shared confidentially within the health-care team providing your care. Members of these teams may include nurses, physiotherapists and support staff who contribute to your care. Knowing about your health and treatment helps them to care for you safely and effectively.

Information about you is also shared when responsibility for your care is handed over from one professional to another. This happens when:

- your GP moves, retires or dies (see Chapter 2);
- when you are referred to a specialist;

⁸ Chaperone: A person such as a nurse or family member who accompanies a doctor during the physical examination of a patient of the opposite sex.

⁹ For further information, see A Guide to Professional Conduct and Ethics, paragraph 31 'Disclosure without Consent' at www.medicalcouncil.ie/News-and-Publications/Reports/Guide-to-Professional-Conduct-and-Ethics-8th-Edition-2016-.pdf

- when new teams of doctors and nurses are involved in your care if you are in hospital.¹⁰

At these times, information about you and your care will be shared with those taking over your care. Also, when you are discharged from hospital, your consultant will send information about your treatment and care to your GP.

Keeping yourself informed

Using the internet

If you want to find out more about your health or an illness, you can ask your doctor to direct you to trustworthy sources. These might be provided by charities, medical organisations or government bodies. Much of the information is available online. However, you should be cautious about using the internet to get information without advice from a doctor or other health professional. Some websites are unreliable or misleading, or misrepresent facts. Following such advice could put you at risk.

Second opinions

If you are unhappy about a proposed treatment plan or want to be reassured about it, you can get a second opinion from another doctor. Your doctor will usually be willing to recommend a colleague or refer you to another GP or specialist.

Medical records

Your medical records will be kept by your GP practice, or the hospital or clinic providing your care. They will be held while they are relevant to your care and for at least eight years after the last treatment you received.

You are entitled to see your medical records, except in rare cases where your doctor believes this is likely to cause you serious harm. Your doctor may charge a small fee to cover the costs of providing copies of your records. Before giving the records to you, doctors must remove any information that relates to other people, unless these people have agreed that you can see it.

¹⁰ This is sometimes referred to as a 'clinical handover'.

If things go wrong

Medical care can be complex and difficult. This means that patients may not get better, despite getting the best treatment. Sometimes doctors make mistakes, causing patients harm, or things go wrong that are no-one's fault. In either case, you are entitled to an honest, open and prompt explanation of what happened, how it will be investigated and the steps that will be taken to help prevent it happening again.

Sometimes you may disagree with your doctor about the right treatment for you. If you cannot agree, your doctor may arrange for a wider discussion with independent doctors or others to try to resolve the matter.

If you want to make a complaint about your doctor's behaviour or practice, you usually start by first raising the issue with the doctor or hospital/clinic. If you are not happy with the outcome, you can make a formal complaint to the doctor. For more serious issues, you can complain to the Medical Council (see Chapter 4).

Chapter 4 – The Medical Council’s role

The Medical Council was set up by law to regulate doctors in Ireland. Its main duty is to protect the public by promoting the highest professional standards for doctors in the Republic of Ireland.¹¹ To do this, the Medical Council:

- maintains a Register of Medical Practitioners – the register of all doctors legally permitted to carry out medical work in Ireland. You can search for a registered doctor if you know the name or registration number of the doctor;¹²
- sets quality standards for medical education and training in Ireland;¹³
- oversees lifelong learning and skills development for doctors through its professional competence requirements;¹⁴
- promotes good medical practice;¹⁵ and
- considers complaints made against doctors. See our guidelines on how to make a complaint.¹⁶

The Council is made up of 25 members – 13 non-medical members appointed by the Minister for Health and 12 doctors.¹⁷ It receives no State support and is funded by doctors’ registration fees.

¹¹ Section 6 of the Medical Practitioners Act 2007

¹² www.medicalcouncil.ie/Public-Information/Check-the-Register/

¹³ www.medicalcouncil.ie/Education/

¹⁴ www.medicalcouncil.ie/Existing-Registrants-/Professional-Competence/

¹⁵ www.medicalcouncil.ie/Existing-Registrants-/Good-Professional-Practice/

¹⁶ www.medicalcouncil.ie/Public-Information/Making-a-Complaint-/Making-a-complaint-about-a-doctor.pdf

¹⁷ www.medicalcouncil.ie/About-Us/The-Medical-Council/

Registration with the Medical Council

The law requires doctors to register with the Medical Council before practising in Ireland.¹⁸ It sets out different types of registration for doctors depending on their experience and qualifications:

Intern registration – for doctors in the first year of practice after graduating with a medical degree. They work under supervision in hospitals recognised by the Medical Council. These doctors are registered in the Trainee Specialist Division of the register.

Supervised registration – for doctors working in supervised posts that have been approved by the Health Service Executive (HSE).

Trainee Specialist registration – for doctors on training programmes who work in posts provided by the HSE in conjunction with the national postgraduate training bodies.

General registration – for doctors who have completed one year's supervised work following graduation. They may practise independently without supervision but must not represent themselves as being specialists.

Visiting European Economic Area Registration – for doctors who are European Union (EU) citizens registered to practise medicine without supervision in another EU member state. They may practise medicine in Ireland on a temporary and occasional basis.

Specialist registration – for doctors who have completed specialist training. They may practise independently without supervision and may present themselves as specialists in one of the specialties recognised by the Medical Council.

Specialties in medicine

Doctors may specialise in general practice or in one of the specialties usually provided in hospitals. You can find a list of specialties and information on what doctors working in these areas of practice do on the Medical Council website.¹⁹

¹⁸ Section 43 of the Medical Practitioners Act 2007

¹⁹ www.medicalcouncil.ie/education/Speciality-Options/

Complaints

The Medical Council deals with concerns involving serious failings in doctors' practice that raise questions about whether they can practise safely. It can restrict a doctor's registration, meaning their right to practise medicine in Ireland would be curtailed or stopped.

The Medical Council regulates doctors only. It does not deal with complaints against nurses, dentists or other health-care professions, hospitals or clinics. The Medical Council cannot pay you compensation or help you make a claim for compensation.

We hope you found this booklet useful and that it has helped you understand how you can contribute to your own health care and what to expect from the different types of doctors.

We also hope that it has helped you understand more about our role as the Medical Council. If you have further questions about the Medical Council, please visit our website at: **www.medicalcouncil.ie**.

