

SAMPLE

CONFIDENTIALITY AGREEMENT

(This sample draft undertaking may be used by GPs to ensure that practice staff and other persons working in this practice who may have access to confidential patient data or other business information, comply with privacy and security of information as required under legislation, including the Privacy Act 1988 (amended)).

I, (name) _____

understand that as a condition of employment by:

(name and address of doctor/medical centre)

I shall, neither during nor after the period of employment/engagement with the practice, except in the proper course of my duties or as permitted by the practice or as required by law, divulge to any person any confidential information concerning:

- patient personal, health and financial information;
- the business or financial arrangements or position of this practice or any related company; and
- any of the dealings, transactions or affairs of the practice or any related company.

The contractual arrangement between this practice and its employees/contractors is founded on trust. I undertake not to knowingly access any confidential information about the business of the practice, patients or patient medical information, unless such information is essential for me to properly and efficiently perform my duties. I am aware that these conditions extend to unnecessary discussion of confidential information within the practice. I understand that any breach of this trust will render me liable to disciplinary action, termination and/or civil proceedings.

I further undertake to inform my supervisor immediately if I become aware of any breach of privacy or security relating to the information I access in the course of my duties.

This restriction ceases to apply to any information or knowledge, which subsequently comes into the public domain by way of authorised disclosure.

All confidential records, documents and other papers together with any copies or extracts thereof in my possession will be returned to the practice on the termination of my employment.

Signed: _____ in the presence of

(name) _____

(signature) _____

(position) _____

Date: _____

