

# What can Doctors Expect from the new Medical Council Guidelines?

## Abstract:

This summer the Medical Council published the new Draft Guide to Professional Conduct and Ethics for Medical Professionals for consultation and the final version is expected to be published shortly. The new guide will set out the principles of good professional practice that all doctors registered with the Medical Council in Ireland are expected to follow under the four pillars of professional identity, partnership, practice and performance. The 8<sup>th</sup> edition in its draft form represents a significant departure from the 7<sup>th</sup> Edition and, with further, work will hopefully provide the medical profession with more detailed guidance and clarity in many important areas of practice such as patient nutrition and hydration, conscientious objection, restraint, maintenance of medical records, confidentiality, consent, doctors in management and leadership roles, managing conflict of interest, concerns about colleagues. The guide will make clear the huge expectations that society places in the medical profession in Ireland, unfortunately it will not ensure that sufficient resources are provided to medical profession to meet those expectations nor will it protect doctors from frivolous complaints that can temporarily label a doctor as 'not in good standing'. Only adequate resourcing of the healthcare system and a review of the complaints system can address those issues.

On the other hand, the new guide will attempt to address some of the more modern issues facing the medical profession as a result of advances in information and communication technology.

The draft gives sensible guidance on the use of social media reflecting positions of national and international medical bodies.<sup>2,3</sup> Doctors are advised not to contact patients through social media sites and that it's not a good idea to friend a patient either. The guide reminds doctors that social media sites can't guarantee confidentiality so the general rules applying to doctor-patient confidentiality apply and information or images from which patients might be identified should not be published on-line. It's best to avoid discussing individual patients on social media sites at all and even if doctors are sharing experiences within a closed professional network, patient information must be anonymised and the sites security and privacy settings should be checked. The final guide should also recommend that Doctors should regularly check that information about themselves on social media or other internet sites is factually correct.

The guide also provides some advice for medical professionals on the use of telemedicine for the treatment of patients. The guide requires doctors providing telemedicine services in Ireland to be registered with the Medical Council. It also requires doctors to seek patient consent to a telemedicine consultation and to protect a patient's privacy and confidentiality. Telemedicine has advantages particularly in the management of chronic disease or where the distance between the patient and physician is an issue, however the guide, in its draft form, fails to recognise some of the pitfalls of telemedicine, unfortunately, telemedicine services can be open to abuse if neither the patient nor the doctor can be identified and can lead to an incorrect diagnosis or non-compliance with clinical guidelines<sup>4,5</sup> if physical examination cannot be carried out. In general, international ethical guidance on the use of telemedicine<sup>4,5</sup> would also recommend that telemedicine be employed primarily in situations where the physician cannot be present within a safe time period and should only take place if the doctor has an existing professional relationship with the patient or has an adequate knowledge of the presenting problem to enable the doctor to exercise proper and justifiable clinical judgement. In all cases the physician and patient must be able to identify each other reliably. Doctors should ensure patients are also able to use the services and inform patients of any issues that might arise if they are relying on relatives or others to transmit data.

Guidance on aspects such as social media and the use of telemedicine are welcome additions to the Guide to Professional Conduct and Ethics for Medical Professionals as is regular revision of the guidelines on all aspects of professional practice. With some extra work doctors can expect the new guide to provide greater clarity on the issues affecting modern medical practice in Ireland.

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## References

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5. WMA, Statement on the Ethics of Telemedicine, 2007 (<http://www.wma.net/en/30publications/10policies/t3/>)

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