

Subject PHOTOGRAPHY, VIDEO RECORDING AND / OR AUDIO RECORDING OF PATIENTS	Attachments <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Key words Photographs, Photography, Videotaping, Video recordings, Audiotaping, Recording, Film, Filming, Media	Number RH-RI-AD-50-05-16
Category Ethics, Rights Responsibilities (RI)	Effective Date June 2010
Manual RH Administration	Last Review Date June 2015
Issued By RH Administration	Next Review Date June 2018
Applicable This Policy applies to the HealthPartners family of organizations.	Origination Date
	Retired Date
Review Responsibility Patient Care Committee, Medical Records Committee, Integrity and Compliance	Contact Patient Rights Committee

I. **PURPOSE**

The purpose of this policy is to ensure that photographs, video images and audio recordings are made, stored, used and disclosed in a manner that protects the privacy rights of patients, preserves the integrity of the recordings / images and supports their appropriate use for clinical, educational, quality and other purposes.

II. **POLICY**

Photographs or Other Recordings can be vital components of patient care, staff education and other health care operations. Therefore, Photographs and Other Recordings may be made for the following purposes, some of which will require prior written authorization by the patient, as described below:

- Identification of patient (authorization *not* required);
- Diagnosis or treatment of that patient (authorization *not* required)
- Education, diagnosis or treatment of another patient (authorization required);
- Internal teaching and education (authorization required);
- Organizational performance or quality improvement (authorization required);
- Community (external) education, including teaching or publication (authorization required);
- Promotion, marketing, public relations, or advertising (authorization required);
- Created by media representatives (authorization required);
- Third party request by Law Enforcement (authorization or court order required)
- Other purposes as identified in this policy or thereafter.

When this policy requires Authorization, the following forms shall be used, as applicable:

- Authorization for Photography, Video Recordings or Other Recording, or
- Permission to Use and Disclose My Information in Connection with a Media Visit, or
- Permission to Use My Information (for promotion, marketing, public relations, or advertising).

III. **PROCEDURE(S)**

- A. If a Photograph or Other Recording is to be made for any purpose other than the patient's own identification or treatment, the following procedures apply:
- If an Authorization is required under this policy, the patient or the patient's surrogate decision-maker must sign the Authorization before any Photograph or Recording is made.
 - The signed Authorization form must be placed in the patient's medical record (See Organizational Privacy Standards for Photography, Videotaping and Other Recordings of Patients and Members)
 - In cases where the patient is unable to sign the Authorization and no surrogate decision-maker is available, Photography or Recordings may take place under the following conditions only:
 - i. The Photograph or Other Recording remains in the facility's possession and may not be used for any purpose until and unless an Authorization is obtained.
 - ii. If the Authorization is not received, the Photograph or Other Recording must be destroyed (or, in the case of a photograph or video recording, the non-authorizing patient's image is removed from the photograph or recording).
 - The Authorization must fully describe how the Photograph or Other Recording may be used or disclosed by the organization. If the Photographs or Other Recordings will be used or disclosed for purposes not described in a previously-signed Authorization, an additional Authorization must be obtained from the patient prior to the use or disclosure for that purpose.
 - The patient or the patient's surrogate decision-maker who signed the Authorization may request cessation of Photography or Recording at any time.
 - The patient or the patient's surrogate decision-maker who signed the Authorization form may rescind the Authorization for use up until a reasonable time before the Photograph or Recording is used.
- B. Signs shall be posted in the Emergency Department stating that recording may be occurring when services are being provided.

To protect the security and integrity of clinical images from the moment of capture, specific approved devices and processes are mandated by this policy, as follows:

- Facility owned devices / memory cards may be used
- Personally-owned devices may be used only when images are captured within software installed and managed by HealthPartners IS&T.
- In the case of recordings made by an authorized third party, that party's equipment may be used.
- If there is a need for specialized equipment to be used that is not owned by the facility, special permission and prior approval will need to be obtained by the Vice President of Integrity and Compliance.

Personal cell phones and cameras are not be used for clinical images otherwise. Clinical images should never be stored on a personal device.

- C. All Photographs and Other Recordings must be stored securely, either in a patient's record or in another secure manner.
- D. Any request from the media must be directed to Corporate Communications, who will also obtain a signed Agreement for Media Visit and Recording at HealthPartners, as needed.
- E. Any Photographs or Other Recordings related to promotion, marketing, public relations or advertising shall be handled through Corporate Communications.
- F. If Law Enforcement requests a Photograph or Other Recording of the patient, the patient must give verbal consent to the presence of the Law Enforcement Officer or the patient can sign an authorization form allowing the presence of Law Enforcement. However, if the patient does not consent to the presence of Law Enforcement, a court order should be obtained except for in emergency situations.
- G. Photographs or Other Recordings taken before the adoption of this policy must:

-
- Be used and disclosed only in accordance with this policy (i.e., an Authorization must be obtained prior to subsequent use or disclosure for any purpose other than for treatment or patient identification); and
 - Be stored in accordance with this policy.

DEFINITIONS

“Authorization” means a form prescribed by this policy authorizing the organization to make a Photograph or Other Recording and to use the photograph or other recording in accordance with instructions on that form.

“Photographs or Other Recordings” means any photography, video, visual or audio images made or recorded digitally, on film or on tape, or using similar media, when created / made by HealthPartners staff for HealthPartners purposes. Unless otherwise noted, this Policy applies whether or not the photographs, images and records are individually identifiable.

V. COMPLIANCE

Failure to comply with this policy or the procedures may result in disciplinary action, up to and including termination.

VI. ATTACHMENTS

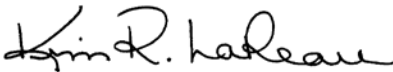
- Authorization for Photography, Video Recordings and Audio Recordings (300-000-314)

VII. OTHER RESOURCES

Organizational Privacy Standards: Photography, Videotaping and Other Recordings of Patients and Members

Legal Medical Record Matrix

VIII. APPROVAL(S)



Vice President, Care Delivery Systems

IX. ENDORSEMENT

Patient Care Committee: June 2015