

# Audio-visual recordings (of patients and performers) policy



Category	Policy
Summary	This policy outlines BAPAM's principles and procedures relating to audio-visual recordings of performers for clinical and educational purposes. It applies to all such activity involving BAPAM, including formal collaborations between BAPAM and other organisations.
Valid from	1 October 2013
Version	1.0
Date of next review	October 2016
Approval date/ via	BAPAM Medical Committee
Distribution	BAPAM clinicians e-mail & online forum Staff e-mail and meetings Public website
Related documents	<i>Information Governance policy</i> <i>Patient Contract</i>
Author	Dr Deborah Charnock, Chief Executive
Further information/contacts	

## **BAPAM Audio-visual Recordings of Patients and Performers Policy**

### **1. Background**

This policy outlines BAPAM's principles and procedures relating to audio-visual recordings of performers for clinical and educational purposes. It applies to all such activity involving BAPAM, including formal collaborations between BAPAM and other organisations.

### **2. Scope**

This guidance covers audio-visual recordings made:

- in BAPAM clinics or other clinical settings involving BAPAM clinicians, practitioners and performer patients undertaken as part of the assessment, investigation or treatment of a performer's condition or illness (see 4. *Patient care*)
- for purposes such as teaching, training, research or advocacy which is not primarily designed to benefit the performer directly (see 5. *Secondary uses*)

'Recordings' means originals or copies of audio recordings, photographs, and other visual images of patients and performers made using any recording device, including mobile phones. This does not include written records or audio dictations of patient letters.

'Performers' refers to performing artists attending a BAPAM clinic as a patient or participating in a demonstration for BAPAM's health education and training activities

### **3. General principles**

#### ***Privacy, Dignity, Choice***

All recordings must be made with respect for the performer's privacy and dignity, and their right to make informed choices about their health care and their personal data (including images and voice recordings).

#### ***Informed Consent***

Consent must be obtained from performers in advance for all recordings in which they are identifiable.

Recordings will vary from simple photographs to visual and audio recordings of consultations. In all instances, performers and any other participants must be provided with information about the nature and intended use of any recorded material, including copyright, distribution and storage issues. The amount and format of the information provided will vary according to the nature of the recording and the preferences of the performer.

If a recording involves a consultation between a performer and a BAPAM clinician or practitioner for use as part of their *clinical care* (e.g. to demonstrate a physical feature, or to track changes over time), written consent should be obtained and a copy kept with the patient's medical record. Performers should receive a copy of the consent form for their own records. A template is attached.

Recordings for *secondary purposes* can range from photographs of training day audiences for publicity purposes, for which simple verbal information and consent would suffice, to an educational demonstration of an individual performer's health problem or performance practice, where a more formal consent process should be followed. In the latter case, the information should include:

- The purpose of the recording and how it will be used, including intended audience (e.g. health professionals, music teachers) and methods of distribution – e.g. BAPAM Journal; merchandise for educational institutions; free distribution via the internet (YouTube etc)
- How long the recording will be kept and stored (and by whom if it is the result of a collaborative project)
- Withholding and withdrawing consent: performers should be reassured that they may withhold or withdraw their consent during or immediately after recording, and that this will not affect the care they receive or their relationship with BAPAM.
- Performers and other participants should also be made aware that, once a recording is disseminated, particularly through electronic and broadcast media, withdrawal of consent and retraction of material may not be possible. If a performer wishes to restrict use of material, they should be advised to get agreement in writing from BAPAM and any others owners of the recording prior to recording.
- The information should also ensure agreement about ownership, copyright and intellectual property rights. In case of collaborations between BAPAM and other organisations or producers, a written contract may need to be developed
- Performers should receive a copy of any written consent they provide and of any recordings

#### **4. Recording assessments and consultations for an individual patient's care**

Recordings of BAPAM patient consultations can only be made with appropriate consent and where the maker(s) has/have authority to do so. This will be overseen by the CEO and Honorary Medical Director through the Medical Committee.

Visual recordings should be made using registered BAPAM equipment, or equipment provided by a host organisation (e.g. a hospital or GP practice) in accordance with their policies and procedures. Recordings taken on a clinician's personal device (camera, laptop, mobile phone, etc) represents a security risk and will only be authorised in exceptional, controlled circumstances. Patients are informed through our Patient Contract that they should provide written consent before visual recordings are made during a consultation.

Recordings made as part of a performer's care at BAPAM form part of their medical record, and should be treated in the same way as written material in terms of confidentiality and security.

#### **6. Recordings for secondary purposes**

Recordings intended for secondary purposes – including teaching, training, research and publicity – which involve real patients and performers must be handled with extreme care, with full consideration given to consent, privacy and dignity.

All plans for recordings of patients or performers for secondary purposes which involve BAPAM must be approved by the CEO and discussed through the appropriate advisory group (ETAG, SERAG). In the case of research projects, the plan should include Research Ethics Committee (REC) approval.

If a BAPAM patient has agreed to participate in a recording primarily for training or research purposes (see 5.), details should be kept securely with other documents relating to the management of the project.

Consent for access to BAPAM patients, premises and equipment for making recording is at the CEO's discretion.

When developing scripted scenarios from clinical experience, writers should ensure that the case is fully anonymised and that the content does not cause unnecessary distress or offence to participants or audience.

All recordings should include a disclaimer outlining the above. Where scripts and actors (i.e. a person taking on the role of a patient) are used, the disclaimer should state this, highlighting that the information is a fictional account based on clinical experience with diverse patients.

## **7. Related policies**

Equality & Diversity (particularly Privacy and Dignity); Data Protection and Confidentiality; Safeguarding.

More detailed guidance relating to clinical practice is outlined in the General Medical Council (GMC) guidelines [www.gmc-uk.org/guidance/ethical\\_guidance/making\\_audiovisual.asp](http://www.gmc-uk.org/guidance/ethical_guidance/making_audiovisual.asp)

## **8. Exemptions**

Recordings of images such as ultrasound and X-rays can be used without patient consent providing all patient identifiers are removed.

Clinicians' audio-recordings of patient letters are a routine part of patient care and therefore exempt from this policy.

BAPAM does not support video recordings of real patients using 'anonymisation' technology: if reliable anonymisation is required, the scenario should be scripted and recorded using actors.

Video recordings involving full nudity or sexual content are not permitted.

No recordings of vulnerable participants (performers under 18 years of age or lacking capacity to consent to involvement) can be undertaken for secondary purposes. Such recordings will be

restricted to situations where it is appropriate for one-to-one clinical care in line with our Safeguarding Policy and approved by the Medical Committee.

**Breach of Policy**

All BAPAM personnel (staff, clinicians, trainers) will receive a copy of this policy and will be required to comply as a condition of working at BAPAM. Breaches of the may constitute professional misconduct and could lead to a termination of contract and disciplinary action.

*Version 1.0 1 October 2013.*

*Review date October 2016*

**BAPAM Consent to audio-visual recording as part of clinical care**

Date: ...../...../.....

Place of Consultation: .....

Patient's name: .....

Clinician's name: .....

BAPAM clinicians aim to provide excellent advice to performers, including detailed information about their condition and recommendations for care. In some cases, the advice they provide may be enhanced through a recording of your consultation – a photograph, video, or audio recording. This can sometimes help demonstrate things to you and can be used to track your progress.

Any such recording is ONLY of you and your clinician during the consultation and should be made using BAPAM or a host organisation's recording equipment. Our clinicians are not authorised to use personal devices unless they have special permission from the BAPAM CEO and Medical Director to do so, and this should be shown to you.

Intimate examinations will not be recorded and recording equipment can be switched off at any time on request. All audio-visual recordings are carried out according to guidelines issued by the General Medical Council and outlined in *BAPAM's Audio-visual recording policy*. (A copy is available on the website)

Only those persons who have legal access to your medical records will have access to the recording. The recording will be stored in a locked cabinet and is subject to the same degree of confidentiality and security as your medical records. The recording will be erased as soon as practicable and in accordance with our records keeping policy.

Consent for recordings for education, training and publicity purposes are covered separately.

The Office and Clinics Manager is responsible for the security and confidentiality of recordings taken by BAPAM clinicians. If the recording is due to leave the premises (e.g. if you have consented for another clinician involved in your care to view the recording) it will be sent by appropriate secure delivery in accordance with BAPAM's Data Protection policy.

You do not have to agree to your consultation being recorded and you can change your mind at any time before, during or after the recording. This is not a problem, and will not affect your care in any way. If you consent to this consultation being recorded, please sign below. A copy of your form will be kept with your notes, and you can also be provided with a copy for your records.

**TO BE COMPLETED BY PATIENT**

I have read and understood the above information and give my permission for my consultation to be recorded as part of my clinical care.

**Signature of patient BEFORE CONSULTATION**

..... Date .....

**Signature of patient AFTER CONSULTATION**

..... Date .....

**Signature of BAPAM clinician**

..... Date .....