

Livewell Southwest
Audiovisual Recordings Policy

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Review: May 2019

Notice to staff using a paper copy of this guidance

The policies and procedures page of the intranet holds the most recent version of this guidance. Staff must ensure they are using the most recent guidance.

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	<ul style="list-style-type: none"> • Taking and using audiovisual and audio images of patients: guidance from the Medical Ethics Department. British Medical Association 2004. • Regulation of Investigatory Powers Act 2000. • Freedom of Information Act 2000. • Data Protection Act 1998. • Human Rights Act 1998. • www.cla.co.uk/copyright_information/copyright_information
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Document review history

Version no.	Type of change	Date	Originator of change	Description of change
1	Ratification	August 2007	Information Governance Lead	New document.
2	Review and update	April 2011	Health & Safety Security Manager	Reviewed and updated to include recordings taken for patient identification purposes.
3	Major changes	October 2014	Information Governance Lead	Updated to include the recording of clinical sessions by people who use our services and staff.
3.1	Reviewed no changes	April 2016	Information Governance, Records, Policies & Data Protection Lead.	Updated to Livewell.

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Audiovisual Recordings Policy

1 Introduction

- 1.1 Photography and video recordings can be a valuable part of assessing and evidencing a patient's condition. Recordings taken using devices owned by the organisation which illustrates a patient's condition or an aspect of treatment, form a part of the patient's health record and are protected in the same way as any other health record.
- 1.2 This policy has been separated into five key sections.
- Audiovisual recordings and clinical functions including patient identification purposes.
 - Audiovisual recordings by people who use our services, members of the public and staff.
 - Covert recordings.
 - Audiovisual recordings via Closed Circuit Television (CCTV).
 - Legislation and information security.
- 1.3 **Note:** The document frequently refers to other guidance and law. This is a deliberate approach to ensure staff work in compliance with the most up to date legal requirements and guidance.

2 Purpose and scope

- 2.1 The purpose of this policy is intended to assist staff in the recording, safe and effective use, storage, disposal and sharing of audiovisual recordings.
- 2.2 This policy applies to audiovisual recordings that are made by, taken by or are the responsibility of Livewell Southwest (LSW) in which any person appears or can be identified, whether patient, staff, visitor or any other person having business with LSW excluding public access events. Photographs giving carers information about the person's communication signals which are not part of the patient record are exempt from this policy.
- 2.3 Recordings taken by local media/higher education institutions are not subject to this policy, as they will retain the image, permissions and copyright.

3 Definitions

- 3.1 **Audiovisual recordings** is the term used for originals or copies of audio recordings, photographs and other visual images of people who use our services, staff or visitors that may be made using any recording device, including mobile phones.

- 3.2 **Personal identifiable data** is information about a person which would enable that person's identity to be established by one means or another. This might be fairly explicit such as an unusual last name or isolated postcode, or small pieces of different information which if taken together could allow the person to be identified. Personal data can be held in the following formats:
- Computer files, including emails.
 - Databases and spreadsheets.
 - Paper files or recordings.
 - Microfiche.
 - CCTV, pictures and audio.
- 3.3 **Sensitive personal data** is usually treated confidentially and whose loss or misdirection could impact adversely on individuals, the organisation, or on the wider community. It is defined in the Data Protection Act 1998 (DPA) where personal information contains details of:
- Health or physical condition.
 - Racial or ethnic origin.
 - Political opinions.
 - Religious beliefs.
 - Trade union membership.
 - Sexual life.
 - Criminal convictions.
- 3.4 **Corporate information** relates to the business activities of the organisation and in particular, information relating to funding and contracts.
- 3.5 **Confidentiality** is a duty of confidence that arises when one person discloses information to another person where it is reasonable to expect that information to be held in confidence.
- 3.6 **Copyright** is defined by the Copyright Licensing Agency as one of the main types of intellectual property. It is the exclusive right to prevent others from reproducing or copying another's work without permission. Any original work would qualify for copyright status automatically and it does not have to be registered for this to apply. Whilst the work itself is covered by copyright, ideas are not.
- 3.7 **Implied consent** is the legal term which states that by doing something you are giving your consent for something to happen. An example is an appointment made with a physician by a patient; it is implied that by making the appointment the patient gives consent to the physician to make a diagnosis and offer treatment or to refer them to the local hospital to see a specific Consultant.

- 3.8 **Explicit consent** is the term used to describe an agreement for something to happen and is given freely, without pressure. It is best practice to ensure that explicit consent is recorded in written format to ensure there is no ambiguity at a later date.
- 3.9 **Secondary purpose** is when information is not used for direct care and medical purposes. Generally this could be for research purposes, audits, service management, commissioning, contract monitoring and reporting facilities. When personal identifiable data is used for secondary use this should be limited and de-identified so that the secondary uses process is confidential.

4 Duties and responsibilities

- 4.1 The **Chief Executive** has overall responsibility for the strategic direction and operational management, ensuring that the organisation complies with all legal, statutory and good practice guidance requirements.
- 4.2 The **Senior Information Risk Owner (SIRO)** [Director of Professional Practice, Safety & Quality] is responsible to the Board for ensuring information risk policy is developed, implemented, reviewed and its effect monitored.
- 4.3 The **Caldicott Guardian** [Medical Director] has responsibility to ensure that patient identifiable data is safeguarded.
- 4.4 The **Information Governance Lead** monitors and evaluates the organisation's compliance with Information Governance standards as directed by the Department of Health (DH).
- 4.5 **Data Owners/ Information Asset Owners** are responsible for key sets of information held manually and electronically. A register of Data Owners is held centrally by the Risk Department.
- 4.6 The **Local Security Management Specialist (LSMS)** will offer specific advice and training with regard to surveillance recording processes and equipment.
- 4.7 All **LSW employees** and anyone else working for the organisation e.g. agency staff, honorary contracts etc. who use and have access to LSW information must understand their personal responsibilities for Information Governance and comply with legislation. All staff must comply with LSW policies, procedures and guidance.

5. Audiovisual recordings and clinical functions including patient identification purposes

5.1 Introduction

5.1.1 There are many situations where recordings may be taken for clinical, education, research, media or information purposes. This policy seeks to clarify the procedures for ensuring safe practice, privacy, dignity and confidentiality of all participants in such recordings.

5.1.2 Filming or photographing anyone (who is identifiable) for any purpose without consent is a violation of that person's privacy. In all cases of recording, care must be taken to respect the dignity, ethnicity and religious beliefs of the person using our service. Please note, all recordings must be screened for identifiable patients who may be directly recorded, indirectly recorded (reflections etc.), or audibly recorded.

5.2 Recordings made as part of a patient's care, including investigation or treatment of a condition

5.2.1 Six categories are identified that do not require consent under this policy and may be used for research, audit or teaching (General Medical Council 2013), ensuring that they are not labelled in such a way that identifies the patient.

- Images of internal organs or structures.
- Images of pathology slides.
- Laparoscopic and endoscopic images.
- Recordings of organ functions.
- Ultrasound images.
- X-rays.

5.2.2 Health professionals must ensure that they make clear in advance that photographic or audiovisual recording will result from the procedure.

5.2.3 Any of the recordings listed in 5.2.1 may be disclosed for secondary purposes without seeking consent provided that, before use, the recordings are anonymised e.g. by the removal or coding of any identifying marks such as writing in the margins or an X-ray.

5.2.4 Audiovisual images of people who use our services must be taken using LSW approved recording equipment only.

5.3 Confidentiality and consent

5.3.1 Recordings made for clinical purposes or an aspect of treatment, form a part of that patients clinical record. The same standards of confidentiality and the same requirements for consent to disclosure apply.

5.3.2 Verbal permission is a minimum requirement for recordings made for clinical purposes, ensuring that an entry is made in the patient's clinical record to this effect. However, local practices may require written consent (within Mental Health Services this may be seen as best practice).

5.3.3 In order to ensure that the patient's right to confidentiality is preserved, LSW requires completion of an **Audiovisual Recording Request and Consent Form** (Appendix A) for all recordings taken, except for those recordings used for patient identification purposes, for which a **Consent Record for Patient Identification** should be completed (Appendix B).

5.3.4 This allows for three levels of consent.

Level One : Audiovisual recordings for the patient record and/or education in a clinical setting including recordings made for patient identification.

Level Two : Teaching.

Level Three : Publication.

5.3.5 Ensure that a copy is filed in the patient's record. This should be signed by the patient and staff member and scanned into SystemOne and checked for accuracy. At this point the original may be securely destroyed via a brown bag or cross shredder.

5.3.6 It is important that consent is genuine and valid:

- a) Patients must be able to give consent i.e. they must understand and retain the information long enough to make a decision and be able to communicate their decision to others. If a patient does not have capacity to give consent, this can be sought from those with authority to act on behalf of the patient.
- b) Have been given all the information they need to make a decision for themselves. An outline brief when filming for non-clinical purposes is included as Appendix C.
- c) Must be acting of their own free will and not be under the influence of another person.
- d) Children or young people under 16 who have the capacity and understanding to give consent for a recording may do so. However, they should be encouraged to involve their parents/guardians in the decision making. Where a child or young person is not able to understand the nature, purpose and possible consequences of the recording, you must obtain consent from a person with parental responsibility to consent.

- 5.3.7 If any person (adult, child or young person) feels uncomfortable at any point during recordings they may withdraw consent even if they have signed a form. If staff feel at any point during recording that patients are uncomfortable or in any kind of distress they should immediately ask the person if they wish the recording to stop and intervene as necessary. If the patient decides that they are not happy for any recording to be used, it must be destroyed. However, patients must receive full information on the possible future uses of the recording. In particular regarding electronic publication where it may not be possible to withdraw it once it is in the public domain.
- 5.3.8 Recordings that are made for treating or assessing a patient must not be used for any other purpose other than the patient's care, or the audit of that care without the express consent of the patient, with the sole exception of recordings from which there is no possibility that the patient might be recognised.
- 5.3.9 If a patient is likely to permanently be unable to give or withhold consent for a recording to be made, and where the recording is for educational/research purposes, the matter should be referred to LSW's Governance Directorate. You must not make any use of the recording that might be against the interests of the patient. In the situation where a recording is required for clinical treatment only, the requesting person should sign the form with a brief explanation on the consent form and in the patient record.
- 5.3.10 Recording without consent may be prescribed in certain circumstances such as, for example, suspected non-accidental injury of a child, adult abuse where it is unlikely that the parent, guardian, carer will give consent and the recording of injuries is to the patient's benefit. Consultant level authority is required in such cases.
- 5.3.11 A patient's image may not be altered in **any** way to achieve anonymity in order to avoid the need for consent. Blacking out of the eyes in a facial photograph is not an acceptable means of anonymising the image.
- 5.3.12 If a patient dies before retrospective consent can be obtained, material by which the patient is identifiable can only be released in accordance with due consideration of the Access to Health Records Act 1994 and Freedom of Information Act 2000.
- 5.3.13 If LSW becomes aware that a consenting patient has subsequently died; permission should be sought for any new use outside the terms of the existing consent. In this instance the consent of both the personal representative and the next of kin is required.

6. Audiovisual recordings by people who use our services, members of the public and staff

6.1 Requests to record meetings and clinical sessions

- 6.1.1 Occasionally people who use our services or other individuals may ask to record a meeting or a clinical session for private use. Individuals are allowed to make recordings of their clinical session for domestic purposes only (personal, family or household affairs). However, each case should be considered on its own merits to establish if it is appropriate to allow the recording to take place. Examples of when it may be considered appropriate are when discussing advice where the recording will be used by the patient as a memory jog or to aid their therapy. Examples of when it may not be considered appropriate are where references are made to third party information, or group run sessions where there are third parties present. People who use our services should be advised that clinical sessions are fully documented and a written copy can be provided to them.
- 6.1.2 If a member of staff is unsure whether to consent to the recording they should seek advice from LSW's Caldicott Guardian (Medical Director).
- 6.1.3 When a request is agreed, the patient should be discouraged from making their own recording. Livewell Southwest should offer to make the recording and give a copy to the patient to ensure the copy is accurate and unchanged. The patient must consent in writing to be recorded, be advised that the recording is only for personal use and advised that the organisation accepts no responsibility for the safekeeping of the copy once it has been handed to the patient (see Appendix A).
- 6.1.4 If the patient goes on to put that information in the public domain, for example on Facebook, then that is considered a form of processing and they would be subject to the Data Protection Act. They would need to comply with the Act for any third party data they capture (see definitions for personal identifiable data and sensitive personal data in 3.2 and 3.3) which would involve obtaining consent. If no consent was obtained the member of staff concerned should notify LSW's Caldicott Guardian immediately. LSW's Caldicott Guardian will promptly request that the information is removed from the public domain. If the patient refuses to comply with such a request then this may be reported to the police for investigation.
- 6.1.5 Please note that separate patient facing guidance will be developed to provide them with more detail about their rights with regard to recording consultations.
- 6.1.6 Consent from employees must be sought to record one to one sessions, appraisals, sickness, capability, disciplinary or similar sessions as these are personal meetings. If consent is not forthcoming then the recording should not take place. Note that consent does not have to be sought when recording meetings such as staff meetings/formal meetings as attendees are not attending the meeting in a personal capacity. However, as a matter of

courtesy and good practice attendees should be made aware that the meeting is being recorded.

6.2 What happens if people who use our services, members of the public and staff see someone recording without permission?

If anyone is found to be making a recording or taking photographs without permission, the individual should be advised this contravenes the right to confidentiality of any individuals being recorded, their human rights and is against LSW's Security Policy and the incident may be reported to the police for investigation. Please note that this is unlikely to apply to 6.1.1 where individuals are allowed to make recordings of their clinical session (if appropriate) for domestic purposes.

If the individual refuses to stop recording they may be asked to leave the premises.

6.3 Non clinical audiovisual recordings and photographs of staff, people who use our services and members of the public

6.3.1 Audiovisual recordings and photographs may be taken of staff, people who use our services and members of the public for purposes not connected with the clinical care of patients or clinical training, for example, for use in media publicity, corporate publications, information leaflets or the LSW website.

6.3.2 In all cases consent should be obtained by completing the communications consent form attached as Appendix C. The consent form should be filed together with the audiovisual recording and photograph.

7. Covert recordings

7.1 If the making of a covert recording is discovered by a member of staff after the recording has been made, the individual should be instructed to return the recording to LSW for destruction. If it has already been published, for example on Facebook or YouTube, the person who published the recording should immediately remove it and notify LSW when this has been done. Where this has not taken place, the incident may be reported to the police for investigation and that legal action may be taken against them.

7.2 Regulation of Investigatory Powers Act 2000

7.2.1 Covert recordings should be undertaken only where there is no other way of obtaining information which is necessary to investigate or prosecute a serious crime, or to protect someone from serious harm. This might arise in cases where there are grounds to suspect that a child is being harmed by a parent or carer or serious criminal activity is taking place. Before any covert recording can be carried out, authorisation must be sought in accordance with the Regulation of Investigatory Powers Act 2000.

8. Audiovisual recordings via Closed Circuit Television (CCTV)

- 8.1 Livewell Southwest is the owner of CCTV systems. It uses video and continuous stream, hard drive recordings. It has an end of life replacement programme, ending video recordings and replacement with continuous stream hard drive recordings. The Local Security Management Specialist will consider all applications for the use of CCTV surveillance.
- 8.2 The sole purpose of the CCTV is to provide a safe and secure environment for the benefit of those who might visit or work in the area. Subject to the CCTV code of practice and the Human Rights Act 1998 (HRA), CCTV will not be used to invade the privacy of any individual, except such as in accordance with the law. In line with the code of practice, DPA and HRA, the CCTV systems will only be used for the following purposes at all times:
- a) To reduce the fear of crime.
 - b) To provide a safe environment for staff working on site and any members of the public with lawful reasons for being on our premises.
- 8.3 Any use of the CCTV system or materials produced, which are frivolous, or for private purposes will be a matter of gross misconduct and disciplinary action will be taken.
- 8.4 There is also a legal requirement to make sure all employees work to this code of practice and in accordance with the principles set out in the DPA.

9. Legislation and information security

9.1 Records management

- 9.1.1 Recordings of patients form a part of their medical records and must be held and maintained in a format that can be retrieved for the length of the retention period.
- 9.1.2 The Records Management: NHS Code of Practice 2006 stipulates the retention periods required for keeping audiovisual recordings. The retention period can vary according to the subject to which it relates. This retention period may be up to 30 years or longer; it is therefore crucial to ensure the integrity of that record. Please refer to LSW's Record Management Policy, and the Retention and Disposal Schedule which is available on the intranet for further guidance.
- 9.1.3 Since any medical record has to be available for disclosure if required, it is essential that every recording is properly logged in the patient record. If audiovisual recordings are used for supervision only and are not part of a clinical record and subsequently destroyed, this must be recorded in the patient's record.

- 9.1.4 In the case of photographic negatives and transparencies, these must be securely stored, filed and logically catalogued.
- 9.1.5 In the case of a digital picture file the original file, with no manipulation or additional compression applied, must be uploaded into the patient's clinical record on SystemOne. No copies must be retained other than in the persons record.
- 9.1.6 Staff undertaking storage and retrieval of digital images must be trained in these procedures to include integrity, quality of images, privacy and dignity, confidentiality, consent and have approved access via the Information Management and Technology (IM&T) service. Training will be available via the IM&T service, Tissue Viability or the Risk Management Department depending on the nature of the image required.
- 9.1.7 If an anonymised image is to be used for teaching purposes, then this should be destroyed once the image is no longer needed.

9.2 Copyright

- 9.2.1 Livewell Southwest holds the copyright of all recordings made. It is important that in any contract for publication the copyright in the recording remains with LSW and does not pass automatically to the publishers on first publication, otherwise LSW may be unable to protect the patient's interests by exercising control over further publication of the recording.
- 9.2.2 Those signing contracts with book or other publishers have a responsibility to delete from the contract any suggestion that the copyright will pass to the publishers.
- 9.2.3 Junior doctors and others acquiring copies of recordings in the course of their duties may retain these for teaching purposes, but must undertake only to use them within the terms of the original consent. Copyright and reproduction rights at all times remain with LSW.
- 9.2.4 All recordings of patients must be stored on LSW premises.

9.3 Subject Access Requests

- 9.3.1 Applications for audiovisual recordings will receive due consideration in accordance with the DPA, Freedom of Information Act 2000, Environmental Information Regulations 2004 and other laws that may apply in each case.
- 9.3.2 Data subjects may only see the images of themselves recorded by the system. Since the tapes will be indiscriminate in the recording of data it will be necessary to install, or otherwise have access to editing facilities in order to respond to requests for access to personal data.

9.3.3 Whilst the data stored from the CCTV systems is unlikely to fall within the remit of the DPA, requests for access to stored data will receive due consideration on a case by case basis. Requests made by an individual under the DPA should be made to LSW's Data Protection Service who can be contacted on 01752 (4)35111.

9.4 Release of audiovisual recordings to external stakeholders

9.4.1 Livewell Southwest may for any or more of the following purposes release audiovisual recordings:

- a) Providing evidence in criminal proceedings (e.g. Police & Criminal Evidence Act 1984, Criminal Procedures & Investigations Act 1996, etc.).
- b) Providing evidence in civil proceedings or tribunals.
- c) The prevention of crime.
- d) The investigation and detection of crime, this may include identification of offenders.
- e) Identification of witnesses.
- f) The Police may apply for access in accordance with an agreement with the owner where the Police reasonably believe access to specific recordings is necessary for the investigation and detection of a particular offence or offences or for the prevention of crime. The Police may obtain access under the provisions of the Police and Criminal Evidence Act 1984 (PACE). Access to recordings may be obtained in connection with civil disputes by court order or be extended to lawyers acting for defendants or victims in connection with criminal proceedings.

9.5 Records and human rights

9.5.1 Livewell Southwest acknowledges that this policy may affect human rights particularly relating to the use of CCTV footage and Article 8 of the Human Rights Act: Right to respect for private and family life. This is a restricted right and only for the legitimate purposes of security, public safety, prevention of crime and disorder and of the protection of the rights of others.

9.6 Records and disability access

9.6.1 If an individual is visually impaired or has difficulty understanding content of the audiovisual image, LSW will make reasonable adjustments to assist them in describing or understanding what any image contains. A friend or legal advisor may accompany disabled members of the public with legitimate reasons to view audiovisual recordings. Livewell Southwest, when possible will seek to make format changes that meet the needs of people with a disability; this might include for example increasing the size of a 6" x 4" image to a larger size.

10 Training implications

10.1 All training will be delivered and recorded in line with policies and procedures and within training standards set by LSW.

11 Monitoring compliance

- 11.1 All breaches of this policy should be reported in line with LSW Incident Reporting and Investigation policy.
- 11.2 On a routine basis a report on breaches of this policy shall be presented to the Information Governance Group. The information will enable the monitoring of compliance and improvements to be made to the policy. It will also be monitored through the annual submission of the Health and Social Care Information Centre Information Governance Toolkit.

All policies are required to be electronically signed by the Lead Director. Proof of the electronic signature is stored in the policies database.

The Lead Director approves this document and any attached appendices. For operational policies this will be the Locality Manager.

The Executive signature is subject to the understanding that the policy owner has followed the organisation process for policy Ratification.

Signed: Director of Professional Practice, Quality and Safety.

Date: 10th May 2016

Appendix A: Audiovisual recording request and consent form

Consent level	
NHS Number	
Name of person to be recorded	
Address	
Diagnosis	
Details of views required (if applicable)	
Inpatient or outpatient	
Date of next appointment (if applicable)	
Name of Consultant or Department Head	
Department	
<p>If the recording is not made by the Medical Photography Department please state who made the recording and ensure that it is stored in the patient's record.</p>	

Level One – audiovisual recordings for patient record and/or education in a clinical setting (see Audiovisual Recordings policy).			
Patient Record	<input type="checkbox"/>	Education in a Clinical Setting (where patient cannot be recognised)	<input type="checkbox"/>
Level Two – Teaching audiovisual recordings where written consent is required (for completion by the person responsible for the request in consultation with the person to be audiovisually recorded). Please select relevant boxes below.			
Teaching LSW Staff	<input type="checkbox"/>	Other (please specify below)	<input type="checkbox"/>
Teaching – general public	<input type="checkbox"/>		
Level three – Publication (select relevant boxes below)			
Professional textbook	<input type="checkbox"/>	Public display/exhibition	<input type="checkbox"/>
Professional journal	<input type="checkbox"/>	Public broadcast	<input type="checkbox"/>
Web based publishing	<input type="checkbox"/>	Poster for professional/scientific meeting	<input type="checkbox"/>
Patient information	<input type="checkbox"/>		
Please select relevant boxes below			
Digital image	<input type="checkbox"/>	Black/White print	<input type="checkbox"/>

Colour print	<input type="checkbox"/>	Digital video	<input type="checkbox"/>
Other (please specify)	<input type="checkbox"/>	Other:	

Consent for audiovisual recording

To be signed by person responsible for the request.

I confirm that the audiovisual recording requested is for use as selected above.

Signed _____

Print Name _____

Position _____

Date _____

To be signed by the person to be audiovisually recorded.

I understand I will be given a copy of this recording if I have requested it for my personal use and accept that I am responsible for keeping my recording safe, destroying it when I have no further use for it and that Livewell Southwest has no responsibility for it once it is given to me.

In the case of an adult who does not have capacity, to be signed by representative/carer.

In the case of a young person under 16 to be signed by parent/guardian.

Where the person to be recorded is aged under 16 and understands the implications of consent they may sign the consent form.

Signed _____

Print Name _____

Date _____

Appendix B: Consent record for patient identification

Name:

NHS No:

Date of birth:

Patient Identification

To aid identification and maintain your safety whilst receiving services it will be required for staff to take your photograph and attach it to your clinical record.

The reasons your photograph is required are:

1. Audiovisual identification by staff especially with regard to the administration of medication.
2. To maintain your safety and security.
3. In the event you may go missing from the service and there are concerns regarding your safety, your photograph may be released to the police and any other relevant agency that may be directly involved in your safety.
4. Your photograph will be kept on your clinical record as this forms part of your clinical record. All photographs taken by Livewell Southwest (LSW) staff will be stored, used, distributed according to the Data Protection Act 1998 and your confidentiality will be maintained at all times.

I can confirm that it has been explained to me and I understand that my photograph could be released to other agencies if there are concerns for my safety.

Explained by:
(print name) _____ Signature _____

Designation _____ Date _____

If this form is completed by a representative / carer of the patient due to patient lacking capacity, their name and signature should be entered in the section below.

I agree* / do not agree* (**delete as appropriate*) to having my photograph taken.

Patient name _____

Signature _____

Date _____

Appendix C: Consent form to photograph, film or record

- The individual should be made aware what the photograph/film/tape is to be used for.
- The pictures may be used for other publicity purposes and could be seen by a wider general public.
- Images may be used for Livewell Southwest publications, other publications to support health related work, on the Livewell Southwest website or websites belonging to relevant departments within the organisation.
- The individual has the right to withdraw their consent for a photograph to be used, but withdrawal of consent should be made to Livewell Southwest in writing.
- They will receive no payment from the organisation for agreeing to be photographed, filmed or taped.
- Complete and return form to Communications Team, Livewell Southwest, 200 Mount Gould Road, Plymouth, PL4 7PY.

Consent to be photographed/filmed or taped

I confirm that I have agreed to be photographed/filmed and/or interviewed and I give my permission for Livewell Southwest to discuss my case and share any relevant images with the media group.

I understand that this material may be used and/or shared at any time in the future by the media group taking the photograph/footage/interview or by Livewell Southwest in printed publications or on their external website.

I understand I may withdraw my consent for any audiovisual to be used at any time and that I should inform the organisation in writing. I understand that I will receive no form of payment for agreeing to be filmed, photographed or recorded.

Please complete in capitals

Full Name _____

Ward/Dept. _____

Address _____

Postcode _____

Signed * _____ Date _____

*(*To be signed by person having parental responsibility in the case of a minor)*

To be completed by Communications Team

Name of Media Group: _____

Purpose of film/footage/interview: _____

Dealt with by: _____ Date: _____

Video Brief
Title of project:
Working title of film
Details of the title:
Commissioned by
The name of the person who commissioned the programme:
Delivery format
E.g. video, documentary, film:
Purpose
Why the production company are making the programme?
Audience
Who will be able to see the programme?
Who will be able to use the programme?
Duration
How long the programme lasts?
Key messages
What kind of messages are going to be put across? Themes that are important to the organisation?
Tone, look and feel
What effect do we want the programme to bring out from the audience? What feelings will this programme evoke?
Delivery date
Details of when the programme will be shown:
Client contact
Main contact details of the production company:

Appendix E

You can use your mobile device in this area.



Please be aware that although you can use your mobile device, taking pictures, video or sound recordings of any person, patient, visitor or staff member is prohibited on all Livewell Southwest premises without prior permission. Any distribution of such recordings may be in breach of the Data Protection Act 1998 and could lead to prosecution.

Mobile devices are not allowed in this area.



To minimise disturbance and to protect the privacy and dignity of others the use of mobile devices and other internet enabled devices are not allowed in this area. This includes the use of video and camera facilities which without appropriate permission will breach the requirements of the Data Protection Act 1998. Any such use may leave you open to legal proceedings.