

TITLE

AUDIO AND VIDEO RECORDING DEVICES

SCOPE

Provincial: Continuing Care

DOCUMENT

HCS-281-01

APPROVAL AUTHORITY

Clinical Operations Executive Committee

INITIAL EFFECTIVE DATE

August 9, 2021

SPONSOR

Provincial Seniors Health and Continuing Care

REVISION EFFECTIVE DATE

Not applicable

PARENT DOCUMENT TITLE, TYPE, AND NUMBER

Not applicable

SCHEDULED REVIEW DATE

August 9, 2024

NOTE: The first appearance of terms in bold in the body of this document (except titles) are defined terms – please refer to the Definitions section.

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OBJECTIVES

- To establish consistent, principle-based, transparent parameters, and processes for:
 - maintaining a safe, respectful, and supportive environment in which to deliver care and services when an audio and video recording device (e.g., a device that can capture picture, video, and/or sound) is in use in a **patient's** room in a **designated living option**, while promoting the safety and well-being of patients, **families**, visitors, and **health care providers**;
 - responding to a patient and/or family's use of an audio and video recording device within the patient's room in a designated living option; and
 - the protection of patient privacy and to minimize impact on care activities when an audio and video recording device is in use.

PRINCIPLES

Alberta Health Services (AHS) is committed to building a culture of patient and family-centred care and protecting the rights of health care providers through advancing the *AHS Patient First Strategy*, the *AHS Our People Strategy*, and the *AHS Respectful Workplaces and the Prevention of Harassment and Violence Policy Suite*. Respecting patient autonomy and partnering with patients and families in the planning, delivery, and evaluation of health services enhances communication, collaboration, and safety.

Accordingly, this Guideline should be followed in the spirit of, and with a commitment to the following principles:

Honesty and transparency: Health care providers and health systems should promote openness and honesty while respecting the constraints of patient confidentiality;

Patient choice: Patients are active participants in their care, and should be empowered to make decisions about their own lives based on their values, preferences, and beliefs;

Limitations on curtailing of freedoms: The curtailing of individual freedoms to avoid harm to others should be limited to those which are proportionate, reasonable, and justifiable;

Patient safety: Health care providers aim to minimize risks to patients' physical and psychological well-being;

Exposure to harm: Patients, families, health care providers, and visitors should not be exposed to harm where it is reasonably avoidable; and

Protecting confidentiality: Maintaining patient confidentiality is essential in health care as an important part of respecting the dignity of patients and is a necessary requirement for a therapeutic relationship.

APPLICABILITY

Compliance with this document is required by all Alberta Health Services employees, members of the medical and midwifery staffs, students, volunteers, and other persons acting on behalf of Alberta Health Services (including contracted service providers as necessary).

ELEMENTS

1. Points of Emphasis

- 1.1 It is recognized that devices with audio and video recording or **streaming** capabilities are increasingly being used by patients and families within a patient's room to support opportunities for social connection.
- 1.2 This Guideline is intended for use in designated living options and applies to circumstances where an audio and video recording device is used within a patient's room for any purpose, and operated by the patient.
- 1.3 This Guideline does not apply to:
 - a) investigations by police agencies and designated living option operators for suspected criminal activities (e.g., **covert surveillance**); and
 - b) photos, audio, or video recordings of family events, celebrations, or activities outside of the patient's room.
- 1.4 If a family member or another individual is using an audio and video recording device on behalf of the patient for **ongoing monitoring**, it should be done in consultation with and with the written consent of the patient.

- 1.5 If a patient or family intends to post a video and/or audio recording containing images or sounds of other persons (e.g., other patients or health care providers) on social media or other websites, it should be done with the written consent of the other individuals in the recording.

2. Health Care Provider Responsibilities

- 2.1 Health care providers may refer to the AHS *Audio and Video Recording Devices in Resident Rooms: Information for Healthcare Providers* for more information and guidance on health care provider responsibilities.
- 2.2 When health care providers become aware that a new audio and video recording device is being considered or in use in a patient's room, they shall:
- inform the **accountable leader**;
 - not hinder nor participate in the purchase, installation, maintenance, or removal of the device;
 - not interfere with the device to stop or modify recording (unless requested by the patient or family, as appropriate);
 - notify the accountable leader immediately if they become aware of public sharing of audio or video recording or streamed content, alleged criminal event (e.g., theft), breach of privacy, or a safety or quality of care **concern**; and
 - inform the accountable leader of any concerns reported by others.
- 2.3 Health care providers should share any personal concerns they may have regarding the use of audio and video recording devices with the accountable leader.
- 2.4 Health care providers may support the patient with the device when requested by the patient or their family (e.g., assistance with a video call).
- 2.5 If a patient or family shares that they intend to post a video and/or audio recording containing images or sounds of other persons (e.g., other patients or health care providers) on social media or other websites, the health care providers shall inform the accountable leader of the patient's or family's intention.

3. Accountable Leader Responsibilities

- 3.1 The accountable leader shall inform the patient and their family upon admission of processes for the use of personal audio and video recording device use. Information should be provided via the AHS *Audio and Video Recording Devices in Resident Rooms: Information for Patients and Families*, resident handbook, service agreement, and/or documented conversation or other means.

- 3.2 The accountable leader should inform health care providers, patients, families, and visitors of the possibility of audio and video recording devices in use in patient rooms through facility signage.
- 3.3 When an accountable leader becomes aware that a new audio and video recording device is being considered or is in use, the accountable leader should engage in discussions to support the patient and family.
- a) The accountable leader should meet with the patient, their family and, where applicable, the **authorized decision-maker** to understand the need for an audio and video recording device (e.g., social connection, ongoing monitoring).
- (i) If an issue is identified related to care, safety, or quality, engage in discussion highlighting and exploring other potentially more supportive and effective avenues to resolve the issue.
- b) The accountable leader shall verify the following recommended processes are being followed, including but not limited to:
- (i) written consent has been obtained from the patient or **roommate-patient** (or from their authorized decision-makers as applicable), if the device is intended for ongoing monitoring; and
- (ii) review and verify device positioning protects the patient's privacy.
- If a roommate-patient is present, the accountable leader shall review the positioning of the device with the roommate-patient or their authorized decision-maker to ensure capturing sounds or images of the roommate-patient is avoided as much as possible.
- c) If an audio and video recording device does not follow the recommended processes outlined in Section 3.3 (b) above, the accountable leader shall take steps to support the individual using the device to align with the recommended processes, such as:
- (i) reviewing recommended processes for use with the individual who installed the device;
- (ii) stopping or repositioning the device until written consent is obtained; and
- (iii) removing the patient or roommate-patient from the recording area.
- d) If a patient or family shares that they intend to post video and/or audio recording containing images or sounds of other individuals (e.g., other patients or health care providers) on social media or other websites, the accountable leader shall obtain written consent from the individuals.

- (i) If an audio or video recording or stream is posted online or shared publicly without appropriate consents of individuals in the recording (e.g., other patients or health care providers), the accountable leader should discuss alternatives, including obtaining consents or removal of the recording, with the patient or family member.
- 3.4 When an accountable leader becomes aware that an audio and video recording device is being considered or is in use, the accountable leader should notify health care providers and respond to questions or concerns.
 - 3.5 Site, operational, or Zone leadership and other support services may be consulted as needed (e.g., Provincial Seniors Health and Continuing Care). Refer to the *AHS Audio and Video Recording Devices in Resident Rooms: Manager Tip Sheet*.
- 4. Concerns Resolution**
- 4.1 It is recommended for patients and families to resolve any concerns at the site level. If concerns are not resolved, patients and families may refer the complainant to contact the Patient Relations Department directly to address their concern (1-855-550-2555), in accordance with the *AHS Patient Concerns Resolution Process Policy and Procedure*.
- 5. Respectful Workplaces and Prevention of Harassment and Violence**
- 5.1 AHS does not tolerate audio or video recordings used as an act of disrespectful behaviour, **harassment**, threats, or **violence** to other patients or health care providers.
 - a) Health care providers and the accountable leader shall respond to any incidents of disrespectful behaviour, harassment, threats, or violence related to the use of audio and video recording devices per the *AHS Respectful Workplaces and the Prevention of Harassment and Violence Policy Suite*.

DEFINITIONS

Accountable leader means the individual who has ultimate accountability to ensure consideration and completion of the listed steps in the management of the *Audio and Video Recording Devices* Guideline. Responsibility for some or all of the components of management may be delegated to the appropriate level responsible administrative leader, but accountability remains at the senior level.

Authorized decision-maker means a person who has the broad authority to make decisions for the patient related to personal matters, which could include a guardian, an agent in accordance with a Personal Directive, a co-decision maker, or a minor's legal representative.

Concern means a written or verbal expression of dissatisfaction that may be related to:

- the provision of goods and services to a patient;
- a failure or refusal to provide goods and services to a patient; or
- terms and conditions under which goods and services are provided to the patient, by Alberta Health Services or by a service provider under the direction, control or authority of Alberta Health Services.

It may also include dissatisfaction with professional practice and/or an allegation of unprofessional conduct. The concern may be clinical or non-clinical and may be directed at any member of the organization or the organization as a whole. The concern may also include the dissatisfaction with an Alberta Health Services owned or operated facility.

Covert surveillance means the intentional concealed viewing or monitoring of a specific activity, area, or circumstance, for the purpose of capturing information related to a perceived safety or security threat or illegal activity. Covert surveillance should be conducted in conjunction with the police and/or AHS Protective Services.

Designated living option means publicly funded residential accommodation that provides health and support services appropriate to meet the patient's assessed unmet needs. The level of care is accessed through a standardized assessment and single point of entry process and consists of Designated Supportive Living Level 3 (DSL3), Designated Supportive Living Level 4 (DSL4) and Designated Supportive Living Level 4 Dementia (DSL4D) and Long-Term Care (LTC).

Disrespectful behaviour means comments or conduct that is rude, inconsiderate, or insensitive. Disrespectful behaviour includes behaviours that can be addressed and stopped by bringing them to the attention of the other individual. Disrespectful behaviour can also occur between two or more workers with both sides contributing to the discord. It is recognized that if disrespectful behaviour goes unaddressed, it can lead to harassment or violence.

Family(ies) means one or more individuals identified by the patient as an important support, and who the patient wishes to be included in any encounters with the health care system, including, but not limited to, family members, legal guardians, friends, and informal caregivers.

Harassment means any single incident or repeated incidents of objectionable or unwelcome conduct, comment, bullying, or action by a person that the person knows or ought reasonably to know will or would cause offence or humiliation to a worker, or adversely affects the worker's health and safety and includes discrimination and sexual solicitations or advances. Workplace harassment can include incidents that occur outside of the workplace or working hours, but are related to the workplace (for example, inappropriate phone calls, e-mails, social media posts, visits to a worker's home and incidents at luncheons or after work socials) or harassment from clients and service recipients. Harassment excludes any reasonable conduct of a manager/medical leader or supervisor in respect of the management of workers or a workplace.

Health care provider means any person who provides goods or services to a patient, inclusive of health care professionals, staff, students, volunteers and other persons acting on behalf of or in conjunction with Alberta Health Services.

Ongoing monitoring means situations where a patient or their family use an audio and video recording device to intentionally monitor the activity in the patient's room on a regular or

intermittent basis. These situations typically involve a device that is installed/secured more permanently somewhere in the room.

Patient means all persons, inclusive of residents and clients, who receive or have requested health care or services from Alberta Health Services and its health care providers. Patient also means, where applicable:

- a) a co-decision-maker with the person; or
- b) an alternate decision-maker on behalf of the person.

Roommate-patient means a patient sharing a room with another patient.

Streaming means the process of transmitting audio and/or video data over the internet with real-time or immediate viewing capability.

Violence means the threatened, attempted, or actual conduct of a person that causes or is likely to cause physical or psychological injury or harm, and includes domestic or sexual violence. It is acknowledged that harassment may become violence.

REFERENCES

- Alberta Health Services Governance Documents:
 - *Keeping Patients Safe from Abuse Policy (#1153)*
 - *Patient Concerns Resolution Process Policy (#PRR-02)*
 - *Patient Concerns Resolution Process Procedure (#PRR-02-01)*
 - *Recognizing and Responding to Hazards, Close Calls and Clinical Adverse Events Policy (#PS-95)*
 - *Respectful Workplaces and the Prevention of Harassment and Violence Policy (#1115)*
- Alberta Health Services Resources:
 - *Audio and Video Recording Devices in Resident Rooms: Information for Healthcare Providers*
 - *Audio and Video Recording Devices in Resident Rooms: Information for Residents and Families*
 - *Audio and Video Recording Devices in Resident Rooms: Manager Tip Sheet*
 - *Our People Strategy*
 - *Patient First Strategy*
 - *Personal Recording Devices in Resident Rooms: Information for Patients and Families Information Sheet (Provincial Seniors Health and Continuing Care)*

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