PURPOSE:

Outlines how Parkland takes action to protect the privacy of patients receiving care in Parkland facilities, in regards to photographs and films.

SCOPE:

All Parkland Health & Hospital System ("Parkland") facilities, including but not limited to hospitals, ambulatory surgery centers, clinics, and all corporate departments/divisions.

PROCEDURE:

1. General

   A. Under federal and state constitutional law, there is no expectation of privacy for individuals, whether patient, visitor or staff in the public areas of the healthcare facility.

   B. However, with permission, patients receiving care or treatment at Parkland Health & Hospital System have the option to be photographed or filmed. The patient, guardian or other responsible person prior to photographing or filming must sign the appropriate hospital consent form.

   C. Adult or Child Protective Services may photograph without consent of legal guardians.

   D. Photographs or films of a patient may be taken by a family member/designee and/or attorney if the patient or legal guardian has given his/her consent and it does not interfere with patient care.

   E. Photographs or films may be taken by the family, legal guardian/designee so long as it does not interfere with the operation of the unit or patient care.

   F. Photographs may be taken by media, for media or marketing communications purposes, if the patient or guardian has signed the appropriate hospital consent form.

Formerly known as Admin 12-07.
For information about this document, call Legal Affairs.
G. Other patients and their families/visitors should not be included in any photographs and or recordings.

H. Staff members may refuse to be photographed or filmed.

I. Treatments, medical procedures and equipment should not be photographed without Institutional Risk Management Services or Legal Affairs approval.

J. Faculty, residents or students may use photographs and recordings containing Protected Health Information (PHI) in lectures, case presentations, or in other classroom settings for educational purposes for students, residents, and other faculty within the university/hospital setting. However, to the extent practical, PHI should be redacted and/or removed.

K. Faculty, residents, or students may not use photographs or recordings containing PHI in external settings, such as conferences, seminars, and the like, unless specifically authorized to do so by the patient.

3. If a patient, family member or visitor is taking pictures or recording despite objections from the patient, a family member, or staff:

A. Ask the individual to stop photographing or recording immediately as it interferes with patient care (please note that “interference with patient care” includes activities that impact the privacy of other patients in the area).

B. If the individual refuses to stop, isolate the individual(s) in a single occupancy treatment room or waiting room.

C. Should visitors refuse to stop, ask them to move to the nearest waiting area or available conference room.

D. If patients or visitors refuse to move, contact the Dallas County Hospital District Police Department (DCHDPD) for assistance in escorting them to the nearest appropriate area.

E. If the photography or recording reaches a level that would constitute inappropriate photography, contact the DCHDPD to file a police report.

Formerly known as Admin 12-07.
For information about this document, call Legal Affairs.
1) An example of inappropriate photography would include but is not limited to photographing or recording patients in various stages of undress or patient information.

2) Please note: Unless a police officer believes that an offense against the laws of the United States or the state of Texas has occurred and it is supported by probable cause, the police officer is unable to arrest the individual, or search, seize or destroy an individual’s personal property (for example, cell phones, video recorders, cameras, or images) without due process of law.

4. Questions concerning request for photography or filming shall be referred to Institutional Risk Management Services or Legal Affairs.

**EQUIPMENT:**

N/A

**DEFINITIONS:**

N/A

**REFERENCES:**

The Joint Commission, Comprehensive Accreditation Manual for Hospitals, Standard RI.01.03.03 (2014).

Formerly known as Admin 12-07.
For information about this document, call Legal Affairs.