



Audio & Video (Social Media Apps) Usage Policy

This procedural document supersedes: CORP/COMM 23 v.1 – Audio/Digital Recording on Trust Premises and in Trust Meetings Policy

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Amendment Form

Version	Date	Brief Summary of Changes	Author
Version 2	10 July 2020	 Change policy title to Audio & Video (Social Media Apps) Usage Policy Amendments to include policy statements on the use of and the lawful access to video recording and streaming in relation to trust business, including participants consented notification and their options Amendments throughout to reflect on 'Current Data Protection Legislation' as defined in the General Data Protection Regulation (GDPR) 2016 and the Data Protection Act (DPA) 2018 Note title change 	Roy G Underwood Fiona Dunn
Version 1	21 August 2013	- This is a new document.	Maria Dixon and Roy G Underwood

Contents

1.	INTF	ODUCTION	4
	1.1	Public Meetings (on or off of Trust Premises)	4
	1.2	Meetings involving the Public or Staff where recording is necessary and informed	4
	1.3	Staff meetings through Social Media Platforms	5
	1.4	Clinical Dictation (for Medical Notes, Letters and Reports)	6
2.	NOT	ES FOR GUIDANCE	6
3.	PRO	TECTING PERSONAL DATA	7
4.	TRA	NING	7
5.	EQU	ALITY IMPACT ASSESSMENT	8
6.	моі	NITORING	8
7.	ASSO	DCIATED TRUST PROCEDURAL DOCUMENTS	9
8.	REFE	RENCES	9
APP	ENDI	X 1 - EQUALITY IMPACT ASSESSMENT – PART 1 INITIAL SCREENING	10

1. INTRODUCTION

The Doncaster & Bassetlaw Teaching Hospitals NHS Foundation Trust (The Trust) is committed to being open and transparent in the way it conducts its decision making. Recording¹ what is said is permitted and expected at many meetings, some of which are either open to the public, or with members of the public.

Generally minutes of meetings are taken in long or shorthand, and then typed up for ratification as a 'true and accurate record²' of what was said. Where digital or analogue audio or video recordings are made³, to aid the minutes or notes of the meetings, then whether or not the typed up version is 'word for word', or a 'précis', will depend on the audience and its agreed expectations.

The Trust understands that some people who attend meetings may not wish to be recorded; however, where this method is employed in the proper running of its business, the Trust will apply the following rationale:

1.1 Public Meetings (on or off of Trust Premises)

The Trust will either inform those attending verbally or it will supply signs which will be deployed at any meeting all or part of which is to be recorded.

Recording methods may include:

- Analogue Audio Recording only (limited opportunity)
- Digital Audio Recording only
- Digital Video & Audio Recording only
- Digital Video & Audio Streaming

The Chair of the meeting has absolute discretion to stop or suspend recording if in their opinion continuing to do so would prejudice proceedings at the meeting.

1.2 Meetings involving the Public or Staff where recording is necessary and informed

The Trust will only make audio or video (digital) recordings of meetings in limited circumstances. The fact that a meeting is being recorded should be made known to all parties to the meeting to give them the opportunity to leave the meeting or to remain silent and/or off camera as appropriate; this

¹ Recording may be on audio or digital media depending on circumstance and location

² The record is usually a précis or an abridged version of what individuals or the group/committee actually say

³ The digital or analogue recording will be kept safe and not deleted or overwritten until after it is either transcribed and then ratified by a relevant committee or meeting attendees. In some circumstances, attendees may request a copy of the audio or digital recording and this should be facilitated within the Law; here the Freedom of Information Act 2000 or the GDPR/Data Protection Act 2018 might apply depending on the nature of the content.

is known as 'fair processing' under 'current data protection legislation' as defined in the General Data Protection Regulation (GDPR) 2016 and the Data Protection Act (DPA) 2018⁴. Only Trust approved Apps should be used to make recordings.

Important procedural note: Members of the public⁵ or staff are not normally permitted to make any ad-hoc recording on any media in connection with Trust business⁶ when on site on any of the Trust's premises or in a member of the public's home.

1.3 Staff meetings through Trust Approved Social Media Platforms

Increasingly, many of the Trust's meetings utilise Social Media Platforms including Microsoft Teams, StarLeaf etc., and on occasion they might also include recording those meetings, including the audio and video content. These records – so long as they exist – will be dealt with in line with the 'Current Data Protection Legislation'. Meeting chairs⁷ should be consulted before any recordings are deleted.

Meeting Chairs:

- 1. Please ensure that you make everyone in the virtual meeting:
 - a. aware of the confidential nature of discussions that might arise in any given meeting and therefore their individual duty of confidence in that respect
 - b. aware if there is any need by the chair to initiate a recording of that meeting
 - c. aware of the Trust's expectation that
 - i. they must not record the meeting on any other media
 - ii. they must not take snapshot images of any part of the meeting
 - iii. they must not take photographs or video recordings of the meetings on another digital media for any purpose
 - iv. they must take reasonable steps to ensure that their own and other parties' privacy and confidentiality is not breached; this may include being mindful
 - of other people sharing the same room
 - of sound travelling through open doors and windows
 - of what the camera and microphone may pick up in the background
 - that use of a headset or headphones may be preferable to using the inbuilt speakers and microphone on PC and laptop equipment
 - to keep microphones muted unless speaking
 - v. disciplinary proceedings may be enacted against anyone who breaches personal or sensitive trust confidences in line with Common Law and associated Trust Employment Contracts and Policies
- 2. All participants in on-line meetings should familiarise themselves with the points above.

⁴ These digital or audio recordings will be kept safe and not deleted or overwritten until they have been transcribed and then ratified by the clinician or member of staff who made the recording.

⁵ Local & National Press, the Police, and the Media may be exempt in certain circumstances

⁶ Participants can ask for copy of recorded meetings - where they exist - and they should do that through the meeting chair, and at the earliest opportunity. Records should be kept i.a.w. Trust Policy CORP/ICT 14, and principally the <u>NHSD Records Management CoP</u>.

⁷ Meeting chair or an appointed deputy

1.4 Clinical Dictation (for Medical Notes, Letters and Reports)

Much of the Trust's audio and video recordings relate to patients. These records – so long as they exist – will be dealt with in line with current data protection legislation. See Footnote 6.

2. NOTES FOR GUIDANCE

Recordings should not be edited in a way that could lead to misinterpretation or misrepresentation of the proceedings or infringement of the Trust's values or in a way that ridicules or shows a lack of respect for those in the recording.

Where meetings are held and recorded - which include members of the public - then access to copy by members of the public should be made provided on request where they are not already routinely published through the trust website: www.dbth.nhs.uk.

The Trust would expect any recording in breach of these rules to be investigated by the Trust Data Protection Officer/Head of Information Governance.

Recording and reporting on the Trust's business through any digital/video media is subject to its Constitution and the Law, and it is the responsibility of those doing the recording and reporting to ensure compliance.

Much of our work involves us in one way or another, whether on or off any of the Trust's premises, in having access to confidential and/or sensitive information. Often this can be personal information about staff or patients; indeed the bulk of the Trust's dictated letters and reports are derived from digital or analogue recordings made by clinicians about their patients.

We trust our staff to respect these confidences, and to look after these recordings until they are no longer required. It is very important in the instance of making the recording as part of a formal complaint resolution that any recordings – as with any other complaints records - are held in line with complaints policy⁸.

We have produced this Policy in order to reinforce not only to our staff, but also to others with whom we do our work, how seriously we treat this matter.

⁸ CORP/COMM 4 – Complaints, Concerns, Comments and Compliments Resolution and Learning

3. PROTECTING PERSONAL DATA

This Policy also bounds Trust staff to comply with Statutory Requirements:

- i) Data Protection Act 2018
- ii) General Data Protection Regulation (GDPR) 2016
- iii) Copyright, Designs and Patents Act 1988
- iv) Computer Misuse Act 1990
- v) Health Records Act 1990
- vi) Freedom of Information Act 2000
- vii) Human Rights Act 1998

And with relevant Trust Policies where 'personal data' are recorded.

Any personal data processing associated with this policy will be carried out under 'Current data protection legislation' as in the Data Protection Act 2018 and the General Data Protection Regulation (GDPR) 2016.

For further information on data processing carried out by the trust, please refer to our Privacy Notices and other information which you can find on the trust website: <u>https://www.dbth.nhs.uk/about-us/our-publications/information-governance/</u>

4. TRAINING

Statutory & Essential Training (SET) is now **MANDATORY** for **ALL** Trust staff.

Staff, including Volunteers, must complete their SET Information Governance (IG) training at least annually, and this will be recorded on their ESR Training Record.

Some staff, like Volunteers and Locums etc., may not have an ESR training record however, that does not mean that they are excluded from the same levels of training expected of 'employed staff' who have the same or similar access to the Trust's Confidential and Sensitive Information Assets.

5. EQUALITY IMPACT ASSESSMENT

The Trust aims to design and implement services, policies and measures that meet the diverse needs of our service, population and workforce, ensuring that none are disadvantaged over others. Our objectives and responsibilities relating to equality and diversity are outlined within our equality schemes. When considering the needs and assessing the impact of a procedural document any discriminatory factors must be identified.

An Equality Impact Assessment (EIA) has been conducted on this procedural document in line with the principles of the Equality Analysis Policy (CORP/EMP 27) and the Fair Treatment For All Policy (CORP/EMP 4).

The purpose of the EIA is to minimise and if possible remove any disproportionate impact on employees on the grounds of race, sex, disability, age, sexual orientation or religious belief. No detriment was identified. (See Appendix 1)

6. MONITORING

Monitoring of this Policy will be through staff fliers and Survey Monkey.

What is being Monitored	Who will carry out the Monitoring	How often	How Reviewed/ Where Reported to
Staff will be asked specific questions about what Social Media platforms they have been engaged with and what their individual experiences were in relation to: a) Trust staff meetings	The Information Governance Group	6 monthly	Results will be analysed by The Information Governance Group, and then promulgated through BUZZ
b) Other organisations meetings			

7. ASSOCIATED TRUST PROCEDURAL DOCUMENTS

CORP/ICT 9 - Information Governance Policy

CORP/RISK 30 – Risk Identification, Assessment and Management Policy

CORP/RISK 15 - Serious Incidents (SI) Policy

PAT/PA 14 - Photography and Video Policy

CORP/EMP 4 – Fair Treatment for All Policy

CORP/EMP 27 – Equality Analysis Policy

CORP/COMM 4 – Complaints, Concerns, Comments and Compliments Resolution and Learning

8. **REFERENCES**

- The Human Rights Act 1998
- The General Data Protection Regulation (GDPR) 2016
- The Data Protection Act (DPA) 2018
- Laws relating to libel and defamation.
 - Defamation Act 2013
 - o https://en.wikipedia.org/wiki/Defamation
- Trust Policy PAT/PA 14: Photography & Video Policy

APPEN	DIX 1 - EQUA	LITY IMPACT ASS	SESSMENT – PART 1 IN	ITIAL SCREENING	
Service/Function/Policy/Project, Strategy	-	ecutive Directorate Department	Assessor (s)	New or Existing Service or Policy?	Date of Assessment
Audio & Video (Social Media Apps)	Digital Transfo	ormation in	Roy Underwood:	Existing Policy	6/4/2020
Usage Policy - CORP/COMM 23 v.2	cooperation with the		DPO/Head of Information		
	Corporate Secretariat		Governance		
1) Who is responsible for this police	:y? Name of Divi	sion/Directorate: Fina	ance / Digital Transformation		
2) Describe the purpose of the ser personal data whatever the med		policy / project/ strat	egy? To define the trust polic	y for all audio and video recording	of patient or staff
3) Are there any associated object	ives? Data Prote	ction Act 2018/GDPR/	DH Records Management Coo	de of Practice	
4) What factors contribute or detr	act from achievii	ng intended outcomes	? IG Training		
5) Does the policy have an impact Maternity/pregnancy and r	- ·		r, gender reassignment, sexu	ual orientation, marriage/civil part	nership,
If yes, please describe c	urrent or planne	d activities to address	the impact [e.g. Monitoring,	consultation]	
6) Is there any scope for new mea	sures which wou	Id promote equality?	NO		
7) Are any of the following groups	adversely affect	ed by the policy? NO			
Protected Characteristics	Affected?	Impact			
a) Age	No				
b) Disability	No				
c) Gender	No				
d) Gender Reassignment	No				
e) Marriage/Civil Partnership	No				
f) Maternity/Pregnancy	No				
g) Race	No				
h) Religion/Belief	No				
i) Sexual Orientation No					
8) Provide the Equality Rating of t	ne service / func	tion /policy / project /	/ strategy − tick (✓) outcome box		
Outcome 1 🗸 Outcome 2	Outc	ome 3	Outcome 4		
*If you have rated the policy as having an ou		is necessary to carry out a	detailed assessment and complete o	a Detailed Equality Analysis form in Appen	ıdix 4
Date for next review: March 2023					
Checked by: Fiona	Dunn	Date: Jul	y 2020		