

Category: Communications	
Title: Release of Patient/Client Information to the Media and Public	Reference Number: COM-120
Approved by: PHSA Board of Directors	Last Approved: August 26, 2010 Last Reviewed: August 26, 2010

1. SCOPE/PURPOSE

The Provincial Health Services Authority (PHSA) has developed the following policy to encourage accuracy and consistency in news coverage and dissemination of public information. The Release of Patient/Client Information policy provides a clear description of responsibilities and key procedures to be followed in response to requests for information about patients and clients by the media or public and complements related media interaction policies.

2. BACKGROUND INFORMATION

PHSA was established in December 2001 to unite eight pre-existing provincial agencies: BC Cancer Agency, BC Centre for Disease Control, BC Children's Hospital and Sunny Hill Health Centre for Children, BC Mental Health Society (Riverview), BC Provincial Renal Agency, BC Transplant Society, BC Women's Hospital & Health Centre, and Forensic Psychiatric Services Commission. PHSA is also responsible for planning, coordinating, monitoring and, in some cases, funding specialized and provincial health services delivered through the geographically-based health authorities. Its overall role is to create a more coordinated and accountable provincial health system.

PHSA Communications was originally integrated to provide service and support for all corporate, agency and service roles. In 2010, further integration with communications areas serving regional health authorities in the Lower Mainland was implemented. The Lower Mainland Communications (LMC) consolidated team now serves PHSA, Vancouver Coastal Health, Providence Health Care and Fraser Health, under the leadership of VCH. Communications officers are based at PHSA corporate and some PHSA agency locations.

3. POLICY

PHSA and its agencies act in accordance with the Freedom of Information and Protection of Privacy Act. Patient/client information, including confirmation of admission, treatment, condition or confirmation of death, is not released outside of the PHSA agency in question unless the release is authorized in writing by patient/client consent, parent/family/guardian consent, subpoena, legislative authorization, search warrant or court order, or unless the release of information regarding Forensic Psychiatric Services Commission clients is deemed necessary in the interests of public safety.

In the cases of patients/clients under the age of 19 and where the terms "parent," "family" and/or "guardian" are used for the purposes of obtaining consent to release information to the media and/or public, the patient/client's written consent can be substituted and deemed to be adequate if, in accordance with the provisions of the Infants Act, the patient/client has provided informed consent to treatment at a PHSA agency. PHSA Communications staff in the agency concerned will consult with physicians/appropriate health professionals to determine whether the patient/client is capable of understanding the implications of release of personal information, and if his/her consent to release information is informed. In the case where patient/client consent is obtained, efforts will be made to inform parents/family/guardians of the patients' intent to release information, unless the patient/client explicitly requests that his/her

parents/family/guardians not be informed.

At no time will information regarding a patient/client's prognosis be released by PHSA. Separate policies exist that apply to publication or presentation of patient information or photographs for academic purposes.

4. PROCEDURE

4.1 All media requests for patient/client information and/or interviews should be directed to and handled by PHSA/LMC communications staff during normal business hours or on an on-call basis outside of these hours using the PHSA Communications pager (604.871.5699/as of July 2010)..The agency administrator on call is consulted as required. If a relative or close associate of patient/client or family calls requesting patient/client information, Communications may give contact information or a message from caller to patient/client or other family member for response.

4.2 PHSA/LMC communications staff coordinate the participation of any authorized spokespersons in releasing patient/client information on behalf of a PHSA agency. Only authorized spokespersons may release patient/client information to the media and public. Communicators staff serving PHSA will advise corporate communications and the Ministry of Health Services/Ministry of Healthy Living and Sport (as appropriate) Public Affairs Bureau of media requests – and action taken – at the earliest opportunity.

4.3 Police requests to withhold patient information from the media will be honoured.

4.4 When completed, signed media permission forms will be filed in the communications department of the PHSA agency involved.

4.5 After written consent has been obtained, PHSA (LMC) Communications staff will provide only the following information to the media and/or public on request:

- complete name of patient/client
- patient/client's age
- patient/client's community of residence (but not street address)
- verification of patient/client's hospitalization or confirmation of treatment at the facility
- admission and discharge dates (if applicable i.e. if in hospital)
- patient/client's general condition (following standard terminology as described below)

4.6 Further authorization will be obtained by PHSA Communications staff from the patient/client or his/her parent/family/guardian before responding to any requests for more specific information about a patient/client. The names of attending staff or physicians are released only with the consent of the staff member or physician.

4.7 The term "stable" shall not be used alone to provide a condition report.

GOOD: Vital signs are stable and within normal limits. Patient/client is conscious and comfortable; indicators are excellent.

FAIR: Vital signs are stable and within normal limits. Patient/client is conscious but may be uncomfortable; indicators are favourable.

SERIOUS: Vital signs may be unstable and not within normal limits. Patient/client is acutely ill; indicators are questionable.

CRITICAL: Vital signs are unstable and not within normal limits. Patient/client may not be conscious; indicators are unfavourable.

4.8 When patient/client is being maintained on life-support awaiting organ donation, and where parent/family/guardian consent has been given to release information about the patient/client's condition, the condition shall be reported as critical until such time as death is pronounced. PHSA will decline to comment on whether or not they are potential or actual organ donors. After next of kin

have been notified, death may be confirmed subject to the provisions of procedures nos. 10 and 11 below.

4.9 PHSA acts in accordance with the Human Tissue Gift Act when responding to inquiries regarding organ/tissue donation. The Human Tissue Gift Act permits individuals (or their parent/family/guardian) to disclose only that information which pertains to themselves to the media and/or public, or to PHSA Communications with consent to release it to the media and/or public. Otherwise, the Human Tissue Gift Act forbids the disclosure of any identifying information about any person:

- a. Who has given or refused to give consent to transplantation;
- b. With respect to whom consent has been given; or
- c. Into whose body tissue has been, is being or may be transplanted

In the Human Tissue Gift Act, "tissue" includes an organ, but does not include any skin, bone, blood constituent, or other tissue that is replaceable by natural process or repair. This policy is in compliance with Provincial/Federal Acts.

4.10 Death will be confirmed only after the next-of-kin have been notified, and specific cause of death is not released without the consent of the family/parent/guardian.

4.11 In cases of proactive releases, special interest, and with prior consent from the patient/client or his/her family, PHSA Communications may release information to update the media about the condition or treatment of the patient/client. Such releases are developed in consultation with the patient/client's family, physicians, other caregivers and/or the administrator on call as appropriate, including identification of spokespersons.

4.12 PHSA Communications ensures the security of all patient/client information collected for the purposes of release, or potential release, to the media and/or general public. All such releases of patient information by PHSA Communications are recorded, including:

- a. Method and date of release
- b. Name and affiliation of person to whom it was released
- c. Name of person releasing the information
- d. A description of the information released

These records are stored for a minimum of one year.

4.13 During an internal or external disaster or crisis situation, release of patient/client information will continue to be governed by existing PHSA policy.

REFERENCES:

Appendix A – Media Permission Form
COM-110 - Public and Media Relations Policy

Policy Created on: April 20, 2004

Revision Dates:

- August 26, 2010