

# University Health Network Policy & Procedure Manual Administrative – Media Relations

## Policy

University Health Network (UHN) ensures that patient privacy is: protected, in compliance with the Personal Health Information Protection Act (2004); the integrity of the organization and its employees and physicians is maintained; and, media inquiries are managed effectively with timely and accurate responses.

This policy applies to all types of media (including newspapers, radio and television) inquiries, and to all UHN employees, medical staff, volunteers and any other individual affiliated with the organization.

The policy covers most situations but, if a situation is not specifically addressed, employees are required to make decisions based on the individual's right to privacy about all aspects of his/her care and the presence within a UHN Hospital. No member of the media has a "right to know" about anything that happens at UHN concerning patients, staff or volunteers, unless specific consent has been obtained and the individuals involved clearly understand and have authorized the release of information or images to the media.

## Directing Inquiries

All inquiries from the media, including requests for interviews, are to be referred to [Public Affairs & Communications](#).

- During business hours (0900 to 1700 hours), make direct inquiries to Public Affairs & Communications at (416) 340-4636.
- After business hours, make direct inquiries to the on-call Public Affairs & Communications contact through Locating at (416) 340-3155.

The site administrator-on-call must consult the on-call Public Affairs & Communications contact as soon as possible when a situation develops that may have a media impact.

## Hospital Spokespersons

For general news, Hospital news, labour relations or medical activities, the spokesperson will be the president and/or Public Affairs & Communications staff members or other staff members or physicians, as decided by the Public Affairs & Communications Department, in consultation with the president.

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Section	<b>Public Affairs &amp; Communications</b>	Revision Dates	<b>08/05; 08/10; 10/10</b>
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Outside of business hours, contact the on-call Public Affairs & Communications contact. In the absence of the president and/or the administrator-on-call, he/she will give the necessary approvals and/or take appropriate action.

All news items/releases are to be released and approved only through Public Affairs & Communications, whether they be appointments, special events, Hospital activities, medical activities, research findings, labour relations, etc.

### **Letters to the Editor, Opinion Pieces & Editorials**

Occasionally, UHN staff, physicians or volunteers may be asked to write an opinion piece or may wish to have their individual views published in the media, which is acceptable if the opinion is clearly their own with no implication that the organization shares the view. If the individual wishes to use his/her UHN designation, the piece should be read and approved by Public Affairs & Communications.

### **No Comment**

UHN is responsive and open to media inquiries, ensuring the media receives accurate and prompt information. However, there are instances where UHN cannot comment publicly on sensitive matters that could compromise the reputation and/or privacy of patients or staff. These are issues around staff departures or any other issue such as fraud or inaccuracy in clinical trials where comment could lead to litigation and inquiries into unconfirmed allegations of ethical, administrative, or other wrongdoing. Media queries about any of these must be immediately brought to the attention of Public Affairs & Communications.

### **Release of Information/Responding to Inquiries**

The release of medical information will be in accordance with the Personal Health Information Protection Act (2004) and Hospital policies relating to privacy, information security and media relations.

If the patient is conscious and able to communicate rationally, he/she must be offered the option, at the first reasonable opportunity, whether or not to give information to the media. If the patient is unconscious or unable to communicate rationally, the decision must be made by the legal substitute decision-maker.

The designated spokesperson is the only individual who is permitted to release information about a patient's condition. That person may include a patient's family member, the patient's physician or a Public Affairs & Communications staff member. A report of the patient's condition to the media will be prepared by a Public Affairs staff member, with the patient or substitute decision-maker's approval.

To ensure that the patient's condition is not jeopardized, the designated spokesperson should get the approval of the patient's physician or, if not available, an alternative medical supervisor, such as the nurse manager.

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Approved By	<b>Vice-president, Public Affairs &amp; Communications</b>	Page	<b>2 of 5</b>

## Police & Accident Cases

Police and accident cases of public record are cases that have been reported or are reportable to the public authorities such as police, fire or ambulance services. These include accidents that occurred on the street or in other public places, or where a patient was brought to UHN by police, fire or ambulance services, and the individual's identity is already known to the media because of the circumstances of the accident.

In these cases, provided the next-of-kin has been notified, the authorized Hospital spokesperson will be a Public Affairs and Communications staff member, the nursing administration coordinator or the administrator-on-call. This spokesperson may provide the media with the following information without the patient's express consent:

<b>Details</b>	Report name (sex and time of arrival may not be reported).
<b>Patient Condition</b>	Report condition as good, fair, serious or critical.

It is important to note that this information will only be given if the media member already knows the name of the patient. Information would **not** be provided about "the person involved in a boating accident near Peterborough" (as an example).

Information about the care of the individual, such as the nature of the accident, injuries or illness, or the name of the attending physician, may not be disclosed without the express consent of the patient.

<b>Attending Physician</b>	If the attending physician agrees, his/her name may be provided to the media <b>with patient consent</b> for the purpose of obtaining additional medical information only. It must not be published without the physician's personal consent.
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Special consideration is required in the release of information relating to the death of a patient to protect the privacy of patients and next-of-kin.

<b>Deaths</b>	<p>In non-police cases, the attending physician is responsible for notifying the next-of-kin (as indicated by the patient). When this has been done, the Hospital may confirm (if requested by the media) the fact of death. The specific cause of death may not be released by the Hospital beyond "natural causes" unless such additional information is authorized by the next-of-kin.</p> <p>In cases where death has been or should be reported to a coroner, including deaths resulting from accidents, media inquiries as to the cause of death should be referred to the Coroner's Office.</p>
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Approved By	<b>Vice-president, Public Affairs &amp; Communications</b>	Page	<b>3 of 5</b>

## Cases of Public Interest &/or Prominent Personalities

Cases of public interest and/or prominent personalities will be handled by Public Affairs & Communications or the administrator-on-call. The extent of information provided is limited to the information outlined for [police and accident cases](#).

If the patient is conscious and able to communicate rationally, he/she must be asked permission as to whether or not to give information to the media. If the patient is unconscious or unable to communicate rationally, the decision must be made by the next-of-kin.

Whenever possible, Hospital authorities will attempt to assist the media to obtain permission for the release of information. If the individual has his/her own public affairs or communications staff, it is the Hospital's preference to rely on that individual to handle media calls. In all cases, however, the physician's consent must be obtained before any such additional information is solicited from the patient.

## Cases Involving Transplantation/Organ Donation

Cases involving transplantation/organ donation will be handled by Public Affairs & Communications or the attending physician.

The attending physician is, at all times, the primary source of information about the patient. Legislation does not permit identification of the donor, recipient or next-of-kin. If a patient is considered a potential donor, the patient's condition is described as "critical" despite medical proceedings to prepare him/her for surgery. A transplant may be confirmed only when completed.

In compliance with the Trillium Gift of Life Network Act (1990), no person shall disclose or give to any person any information or document whereby the identification of any person:

- who has given or refused to give consent;
- with respect to whom a consent has been given; or
- into whose body tissue has been, is being, or may be transplanted, may become known.

## Media on Site

Members of the media must be escorted through the site by a staff member of Public Affairs & Communications or another UHN employee or physician as designated by Public Affairs & Communications.

Media must report to one of the main lobby information desks. When a Public Affairs & Communications representative and/or a UHN employee or physician is not present, members of the media must wear media identification or a visitor's badge as provided by Public Affairs & Communications.

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All requests for filming or photography should be directed to Public Affairs & Communications. Provided that there is no objection on medical grounds and if an individual from UHN or a patient agrees to have his/her image used, a consent form must be completed, signed and witnessed. If the patient is incapable of providing informed consent, then the individual charged with making the decision on his/her behalf may provide consent. The consent form will remain with Public Affairs and Communications or be added to the patient's health record. (See [Consent for Patient Photography](#) policy 3.20.002.)

If the media wishes to photograph/film medical equipment that is hooked up to a patient's room, then the patient's consent is required. If the patient is incapable of providing informed consent, the substitute decision maker may provide consent on his/her behalf. The consent form will remain with Public Affairs & Communications or be added to the patient's health record. (See [Consent for Patient Photography](#) policy 3.20.002.)

Media must agree to the conditions listed in the [PhotoGraphics – Clinical Photography Request/Consent](#) (Form D-2471) and sign the form. Breach of any conditions will jeopardize requests for future filming or photography.

The approval of the surgeon-in-chief **and** the surgeon performing the operation must be obtained prior to filming or photographing procedures in the operating room (OR). It is normal practice to obtain observer privileges for members of the media 48 hours in advance of attendance in the OR. (See [External Observers and Authorized Guests in Clinical Areas](#) policy 1.40.019.)

Photographs or film footage may not be taken of unconscious patients without prior documentation of consent.

## Social Media

**Note:** Journalists, patients, family members and visitors are increasingly using social media, such as Twitter and Facebook, to provide information. In addition, most individuals have access to digital cameras in their cell phones and images may be captured throughout the hospital.

UHN wishes to assist patients and their families in their desires to document their experiences while in the Hospital. However, patients and their families should not photograph or film other patients, the family members of other patients, or Hospital staff without the express permission of these individuals. People in hospital have the expectation of privacy during their admission, and UHN staff must do what they can to protect that privacy by making all patients aware of the restrictions on cell phone use, digital camera use and video use.

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Approved By	<b>Vice-president, Public Affairs &amp; Communications</b>	Page	<b>5 of 5</b>