Photographs in Medication Administration Policy
(Replaces Policy No. TPCL/016 V.4)

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EXECUTIVE SPONSOR  Chief Medical Officer
POLICY AUTHORS     Chief Pharmacist
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                    Social Worker
                    Consultant Psychiatrist

KEY POLICY ISSUES:

- This only relates to adults.
- The use of patient photographs affixed to drug charts to reduce medication errors relating to patient identification.
- Unless in Forensic Service, patients will be able to decline to have their photograph taken for use in reducing medication errors and / or released to the Police.
- The Policy also addresses the use of such photographs as a means of ID when a person goes missing and is believed to present a serious risk to themselves or another person.
- Only one printed photograph of the patient taken for this purpose will be in existence at any one time within the Sussex Partnership NHS Foundation Trust with the digital image being destroyed immediately after the photograph has been printed.
- On discharge or if another photograph is needed, the original photograph will be given to the patient or destroyed in their presence.

If you require this document in another format such as large print, audio or other community language please contact the Corporate Governance Office on 01903 843041 or email: policies@sussexpartnership.nhs.uk
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Using Photographs in Medication Administration Policy

1.0 Introduction

The use of patient photographs in mental health is widespread to reduce medication errors due to misidentification.

As taking a photograph is an intrusion of privacy, this policy sets out essential governance to ensure a consistently acceptable approach.

The Policy also addresses the use of such photographs as a means of ID when a person goes missing and is believed to present a serious risk to themselves or another person.

The term “patient” has been used throughout this document, but equally refers to service users and clients.

1.1 Purpose of policy

Medication errors can have serious consequences for patient care. One of the high-risk errors is to administer medication to the wrong patient. This risk is significantly increased when patients with similar names are on a ward or temporary staff who are unfamiliar with the ward or unit, are employed. Unlike acute hospitals, where patient name tags are used, mental health and learning disability inpatient and residential units have avoided using them to reduce institutionalization. An alternative approach to reducing the risks of misidentification is to have a photograph of the individual on the patients drug chart.

Using photographs will also assist when a person is reported to the Police as missing from an inpatient setting, who is believed to present a serious risk to themselves or another person. Sussex Police advise that the first few hours are critical in the safe return of a vulnerable person, and access to a current photograph would be of great benefit.

1.2 Scope of Policy

This policy applies to photographs taken specifically for the purposes of reducing the risk of a medication error. The policy applies trust-wide.

1.3 Principles

1.3.1 Taking and using a patient’s photograph constitutes an invasion of privacy and so should only be undertaken with the patient’s informed consent and even then only when there is a justifiable and lawful purpose to taking the photograph.

1.3.2 In the case of patients who are capable of giving informed consent, explicit informed consent is necessary before the photograph is taken and refusal of consent must be respected. Consent may be given to use a photograph to reduce medication errors but not for use by the Police (in accordance with section 4.11 below), or may be given for both purposes.
1.3.3 It must be made clear to the patient that, while the Trust regards this procedure as potentially beneficial in the delivery of high quality care, it is not a prerequisite to receiving care. Failure to explain this may render any consent given invalid and lay the Trust open to challenge on the issue of failure to respect human rights.

1.3.4 In the case of patient’s who lack capacity to give informed consent then the procedure for making “Best Interests” decisions laid down in the code of practice to the Mental Capacity Act 2005 should be followed in deciding whether to take a photograph.

1.3.5 The primary purpose of this policy is to provide a photographic means of identification to avoid medication errors. A secondary purpose may be to provide a photograph to the Police in the circumstances set out in section 4.11 below.

2. Policy Statement

The Trust is committed to delivering the safest possible services. The use of patient photographs in mental health is used in medication administration to minimise the risk of misidentification leading to a medication error. Photographs taken for use in medication administration may also be used when a vulnerable patient goes missing when in the first few hours a clear description of the patient is useful to the Police.

3. Duties

Chief Executive Officer
To ensure a fit for purpose policy, based on best practice, is in place and reviewed every two years or sooner if predicated by learning or legislative change.

Chief Pharmacist
To ensure the Policy is referenced to national best practice. To ensure pharmacy staff are working with clinical colleagues to implement the Policy.

Deputy Director of Social Work – Principal Social Worker
To ensure the Policy is consistent with mental health law including the Mental Capacity Act.

Matrons
To ensure consistent implementation of the Policy across all inpatient facilities.

4. Procedure

4.1 Individual patients must always have the reason for taking their photograph explained to them. Unless they are a forensic inpatient, where for security reasons there is a compulsory requirement, they will have the right to refuse. They will also have the right to have their photograph returned to them at a later date should they change their mind after originally giving their consent.

4.2 Only one printed photograph will be in existence at any one time. The photograph will be taken with a digital camera and printed immediately. The digital image will then be immediately deleted from the camera’s memory in the presence of the patient so that no additional prints can be made.
4.3 The photograph will be stapled to the front of the main drug chart in the box provided and will subsequently be transferred to the next chart each time it is rewritten.

4.4 Where a patient has more than one drug chart in current use, only one of these will have a photograph attached.

4.5 When a chart has to be sent or taken to the Pharmacy Department in order for medication to be dispensed, the photograph will remain attached. However, where charts are photocopied and/or sent by fax to the Pharmacy Department, ward or unit staff will ensure that the photograph is obscured so that no duplicate images are produced.

4.6 The photograph will be returned to the patient upon discharge by the nurse involved in the discharge process, or will be destroyed in their presence if preferred.

4.7 Any patient who significantly changes their appearance whilst an inpatient (e.g. removal of beard) should have a new photograph taken (in line with point 2 above) and the old photograph destroyed or returned to them. Consent will need to be given again prior to a new photograph being taken.

4.8 A patient may request to have a new photograph taken and this request should be respected. The old photograph should be destroyed or returned to them.

4.9.1 A patient may indicate at any point that they wish to change his or her sex. At this point it should be discussed with them when they would like a new photograph. The patient doesn’t need to be under medical supervision for gender reassignment when they make this choice. Their care team should be supportive of these decisions.

4.9.2 The photograph will not be used for any other uses except identifying the patient at the time of medication administration and when a truly vulnerable patient or forensic patient is reported as missing. The photograph will be on the patient’s drug chart and it will be considered to be the patient’s property. Any additional usage can only be given with the patient’s full consent.

4.10.1 All patients will be given a leaflet explaining the reasons for the photograph and reassuring them that the decision as to the disposal of the photograph upon discharge will be theirs. (See Appendix 1 for leaflet.)

4.10.2 Staff must ensure that patients who consent to their photograph being taken for medication purposes are truly giving their informed consent and not merely acquiescing to a request. This means that the patient is able to demonstrate that they understand the information given to them and can articulate back their reasons for agreement or refusal.

4.10 Rights of Refusal and Freedom of Religion
Other than in forensic units, where the process is compulsory, all patients have the right to refuse, although they should be encouraged to comply with this policy. However, patients must not be coerced or pressurised to comply and the discussion and decision should be recorded in the patient’s Care notes. People may refuse to have a photograph taken for religious
purposes, for example some Amish people believe that it violates the Ten Commandments. These beliefs should be respected and cultural sensitivity shown within photography where a person for religious reasons refuses to remove items of religious dress (e.g. head scarves) or requires the photographer to be the same gender.

**Patients Lacking Capacity**

Where there is a reason to doubt a patient’s capacity to consent to their photograph being taken, a capacity assessment should be undertaken using the FACE assessment tool. This FACE form will guide staff through the assessment process. If a patient is assessed as lacking capacity to make this decision, staff should consider whether the decision can be made at a later date where the patient may regain capacity to make this decision. If the decision cannot be delayed or there is no prospect of the patient regaining capacity to make this decision, a ‘Best interests’ decision should be made by either a doctor or senior nurse. This must be in accordance with the Mental Capacity Act and again fully documented in patient’s Care notes. The FACE form provides guidance on how a ‘Best interests’ decision should be documented and who should be consulted.

4.11 **Providing Photographs to the Police**

In relation to providing the photograph to the Police, the following considerations apply:

4.11.1 In the case of a person capable of giving informed consent, the photograph should only be provided if the person explicitly consented to its use in this way (subject to point 3 below).

4.11.2 In the case of a person who lacks capacity to give informed consent then the photograph should only be provided as part of a “Best Interests” decision under the Mental Capacity Act 2005. This is a separate decision to the one which resulted in the photograph being taken and must take account of all the circumstances in which the release of the photograph is being sought (subject to point 3 below).

4.11.3 Notwithstanding the above, photographs taken in this way form part of a confidential record and can be disclosed in the usual circumstances where Trust staff may disclose information without the patient’s consent. Specifically:

- Where the patient is at risk of serious harm
- Where a third party is at risk of serious harm
- In order to prevent or detect serious crime
- If a statutory duty of disclosure exists
- If ordered to disclose by a court

If a photograph is given to the Police they must be told to destroy it and any copies made, once it is no longer needed to identify the missing person.
5.0 Development, Consultation and Ratification

Original consultation:
Acute Care Forum
A number of patient groups were asked to comment
Drugs and Therapeutics Committee
The first version was also updated twice in quick succession following feedback once implemented between February 2008 and November 2008. Reviewed December 2012 and July 2015 and ratified via CPF. Reviewed July 2017 and the matrons and Deputy Director of Social Work – Principal Social Worker and Deputy Director and General Manager of Forensic Health Care Service were consulted before ratification by the CPF.

6.0 Equality and Human Rights Impact Assessment (EHRIA)

This policy has been equality impact assessed in accordance with the Trust’s policy for the development and management of procedural documents.

7.0 Monitoring Compliance and Effectiveness

Reported medication errors relating to medicines administered to the wrong patient will be reviewed against policy implementation.

8.0 Dissemination and Implementation of Policy

This policy will be uploaded onto the Trust website by the Governance Support Team. Publication will be announced via the Drugs and Therapeutics Newsletter to all staff.

9.0 Document Control including Archive Arrangements

It will be the responsibility of the sponsor and the author of this policy document to ensure that it is kept up to date with any changes to legislation, national or local policy. This policy will be managed in accordance with the Organisation wide policy for the development and management of procedural document (034/2008/Corporate) (Andrea – is this the latest version?). The Governance Support team will be responsible for archiving early versions.

10.0 Cross Reference

This policy must be read in conjunction with the Trust’s Patient Identification Policy.
Information leaflet and consent or decision form for the photographing of adult inpatients to reduce the risk of medication errors and for use when a vulnerable adult goes missing

It is Trust’s policy that all adults admitted to our inpatient units are ideally photographed. There are two reasons for this:-

1. To reduce the risk of medication errors caused by patients being wrongly identified.

2. To assist in the early identification and return of missing vulnerable patients.

The Trust recognises the sensitivity of this issue, but this process enables us to run a safe and effective service and to assist the Police in every possible way at times when vulnerable patients are missing.

While we recommend that all in-patients have their photograph taken you have the right to refuse and your refusal will not affect your care in any way. You can also agree to have your photograph taken for the use of reducing medication errors but refuse to have it released to the Police. You can also change your mind at a later date and have the photograph destroyed or have a new photograph taken to replace the original at a later date.

Only one printed photograph will be in existence at any one time. The photograph will be taken with a digital camera and printed immediately. The digital image will then be immediately deleted from the camera’s memory in your presence so that no additional prints can be made.

Upon discharge from the unit the photograph will be returned to you or destroyed in your presence.

We appreciate your co-operation with this policy and reassure you that the photograph will only be used for the reasons above and not for any other purpose. Should you be unhappy about the need to have your photograph taken, or wish to refuse, please talk to your Primary Nurse who will explain the reasons to you in more depth.

Thank you for your co-operation.
PHOTOGRAPHING OF ADULT INPATIENTS CONSENT OR DECISION FORM

Patient Name…………………………………………………………
Date of Birth………………………………………………………….
Ward / Unit………………………………………………………….

Part 1 - Patient has the capacity to consent

The policy on the photographing of adult inpatients has been explained to me by:

Staff member’s name…………………………………………………
Position……………………………………………… Ward……………….

Consent to photograph being used in relation to medication

I confirm that I understand the risks and benefits of this policy. I agree/do not agree* to my photograph being taken and used to ensure the safe administration of medication (*delete as appropriate)

I understand that I have the right to withdraw my consent at any time.

Signed (patient)…………………………………………………………
Date……………………………………………………………………
Witnessed by (staff) …………………………………………………
Staff Signature ……………………………………………………………

Consent to photograph being used by the Police.

I agree/do not agree* to my photograph being taken and used to assist the Police in locating and supporting me if I am at serious risk of harm (*delete as appropriate).

I understand that I have the right to withdraw my consent at any time.

Signed (patient)…………………………………………………………
Date……………………………………………………………………
Witnessed by (staff) …………………………………………………
Staff Signature ……………………………………………………………