HSC OP: 52.15, Consent and Release to Use Image or Information

PURPOSE: The purpose of this Health Sciences Center Operating Policy and Procedure (HSC OP) is to establish a standard in obtaining faculty, staff, student, or patient consent and release for TTUHSC to use image(s) and/or information.

REVIEW: This HSC OP will be reviewed on September 1 of each even-numbered year by the Asst. Provost for Student Services, the Vice President for Human Resources, the Institutional Privacy Officer, and the Institutional Compliance Officer, with recommendations for revisions forwarded to the President by November 1.

POLICY/PROCEDURE:

1. General. This policy applies to all TTUHSC Schools, educational and other activities, and areas owned, operated and/or provided by TTUHSC. It does not apply to uses of Image(s) or information for patient treatment or payment purposes (as defined under HIPAA).

2. Definitions.
   a. Consent – means a written document signed by a faculty, staff, student, or patient (or by an authorized legal representative) agreeing to allow Image(s) and/or information to be taken and/or used as set forth in Attachment A, “Consent and Release to Use Image or Information”. Signed Consent forms shall be maintained respectively in Human Resources, Student Affairs, Communications and Marketing, Medical Records or Classroom Support.
   b. Images – means likeness or image(s) including, but not limited to, photographs, videotaped images, audio recordings, and digital or other images of any kind or nature.

3. Consent Process. As required under this Policy, before taking images of faculty, staff, students, or patients, for purposes other than patient treatment or payment, a consent shall be obtained from the individual (or authorized legal representative) using Attachment A.

   Individuals under the age of 18 years and adults who are unable to make an informed decision or make their decision known, require permission to be granted by their parent, legal guardian, or authorized legal representative using Attachment A.

   This Consent only allows TTUHSC to take and/or use images or information for the purposes approved on the Consent form.

   a. Obtaining Consent. A TTUHSC employee, or appropriately delegated person, is responsible to discuss the Consent with the individual (or authorized legal representative) to include the:
      • purpose of obtaining images or information, and
      • proposed use(s) of the images or information (examples include: commercial, marketing, educational, or promotional purposes).

   b. Revocation of Consent: Individual (or authorized legal representative) may revoke a Consent as set forth in the form. Revocation or withdrawal can happen at any time but must be in writing and sent to the TTUHSC Institutional Privacy Officer and/or local campus Regional Privacy Officer. Any revocation or withdrawal of consent does not affect any information used or disclosed prior to receipt of written notice of revocation or withdrawal. No further use or disclosure shall be made of the images and/or information after a written revocation is received from the individual (or authorized legal representative).
4. **Documentation of Abuse and Neglect of Patient(s).** Reportable cases of actual or suspected abuse and neglect do not require written Consent from a patient (or authorized legal representative) before obtaining images of and/or information about the patient for required reporting purposes. The images and/or information must be treated as sensitive in nature and secured as stated below, and may be submitted to an investigating agency pursuant to an appropriate authorization or court order.

5. **Security and Storage.** All images or information shall be stored in a secure manner that protects the individual’s privacy in accordance with federal and state laws. Respective areas will be responsible for security and storage of images or information.
   
a. Images and/or information of a sensitive nature shall be stored in a secure location within the medical record or elsewhere such as secure locations including, but not limited to, secured envelope, locked file, or restricted access file within an electronic medical record or other electronic file within TTUHSC network. Images and/or information of a sensitive nature **shall not** be stored on a non-TTUHSC owned or controlled device or network, i.e. shall not be stored on personally owned computers, laptops, external hard-drives, flash drives, etc., or cloud-based storage unless approved by TTUHSC IT Security.

6. **Equipment Used to Obtain TTUHSC Images or Information.** Only equipment owned, leased, or controlled by TTUHSC or its affiliated schools or hospitals shall be used to obtain images and/or information pursuant to this policy. TTUHSC employees, representatives or agents, including Business Associates, shall not use personal recording devices including, but not limited to, cell phones, cameras, flash drives, video recorders, etc. to take or store images and/or information for or on behalf of TTUHSC.

7. **Responsibility to Report.** TTUHSC employees and TTUHSC affiliates have a duty to report known or suspected violations of this policy. TTUHSC OP 52.04 Report and TTUHSC Internal Investigations of Alleged Violation; Non-Retaliation.

8. **Right to Change Policy.** TTUHSC reserves the right to interpret, change, modify, amend or rescind this policy in whole, or in part, at any time without the consent of employees.

Attachment A
Attachment A (Spanish Version)