Tennant Street Medical Practice

Privacy Impact Assessment CCTV

***Introduction***

Tennant Street Medical Practice installed CCTV surveillance equipment within the premises in May 2017.

The decision to install CCTV was taken at a Partners’ meeting in April 2017 following the official notification that Tennant Street Medical Practice was to provide use of their premises to host the Federation’s 7 Day Access service.

The immediate impact of this was that there would be a third party contractor staff with full access to the premises between 6.30 pm and 8 pm every weekday and for up to 3 hours on Saturday and Sunday every week when no incumbent TSMP staff were on site.

The premises would also be open to non-TSMP patients during these hours. Therefore the sole purpose of the decision for installation of CCTV was for security within the building and outside the main entrance.

***Method of surveillance***

Following discussion with and advice from the CCTV contractor it was agreed in the first instance to site cameras in all the areas of patient flow ie all three waiting rooms, consulting room corridors both upstairs and downstairs and the stairwells where fire doors are in situ for egress from the building in an emergency. It was identified that the fire doors could also allow ingress into the building and were a ‘weak spot’ in the security of the practice.

Staff-only areas are also covered by the security cameras, but only in corridors. No cameras were installed in offices or meeting rooms.

Cameras are capable of visual recording only.

There is also a CCTV camera installed on the external wall of the building to cover the main entrance area only. This specifically covers anybody entering or leaving the practice, but not the general public walking past.

In total 16 cameras were installed across the practice.

Notices advising the public that CCTV Surveillance was installed were displayed on notice boards in all three waiting rooms across the practice and in the main entrance.

***Method of Recording***

All recorded images are saved on a dedicated stand-alone computer which is not connected to the practice internal computer network.

The computer and screen are stored in the Hub Room off the downstairs clinical corridor. The Hub Room also stores the telephone and computer servers for the practice. The images are available to be viewed on the dedicated computer only.

The Hub Room is always double locked after use and the keys for access are only available either in the key storage unit in the Practice Manager’s office, which is in a secure area that is not accessible to the public, or in the Patient Services Manager’s office in a staff only area in a locked drawer.

Staff have no regular requirement to enter the Hub Room. Access to the Hub Room is only for 3 possible reasons:

* If NECS engineers require access to the server for IT maintenance reasons. All NECS staff are bound by a duty of confidentiality
* If telephony engineers require access to the telephone server. This is carried out with supervision of a senior member of practice staff.
* Requirement of senior practice staff to view CCTV recorded images.

It is believed, at the date of this document, that the hard drive of the dedicated computer will store images for up to 12 months. Once the hard drive is full the images will be overwritten by new images. However, once the hard drive is at capacity, TSMP will purchase a second external hard drive to transfer the images for a period of up to 2 years. The secondary hard drive will be stored on the practice premises in a secure area within a locked filing cabinet.

The decision to retain images for up to 2 years is to ensure that any incidents which may be discovered after a prolonged period of time will still be available if required. Any images that are likely to result in a police investigation or court case will be removed onto a data stick until such time as they are required. Once any investigation or court case has been completed and TSMP has been formally notified as such, the images on the data stick will be deleted.

***Viewing of Recorded Images***

There is no requirement nor intention for recorded images to be viewed at all unless there has been an incident that may require further investigation and a decision has been made that CCTV recorded images could support the investigation.

Examples of an incident:

* Theft of or damage to property
* Patients being abusive or aggressive

Following examination of the recorded images, any appropriate images will be copied from the computer hard drive onto a data stick. The data stick will then be stored in a locked drawer in the Practice Manager’s office until required for the furtherance of the investigation.

The images on the data stick will only be viewed by senior practice staff, except in exceptional circumstances (eg for purposes of identification of a person on the image) no other staff will have sight of the images.

Any person who is not involved directly in the incident will not, as far as possible, be included in downloaded images. Where it is not possible to remove a third party from the image a decision will be made at that time to mitigate any issues that may arise.

This may include:

* a decision that there is no requirement for the image to be viewed by any person outside of the practice
* the possibility of electronically anonymising the third party image
* a decision to request permission from the third party for their image to be included (this would only be in extremis when eg: where a police investigation or court may need access to the images)

***Right to view Images***

Patients and other visitors to TSMP have the right to request to view any stored images of themselves.

This must be presented as a Subject Access Request and TSMP reserve the right to refuse access to the images if third party visitors are clearly identifiable on the images.

If a third party (eg the police or a court) request images TSMP will provide the requested images if they are considered to be of use in an investigation. However the requesting body are responsible for their adherence to current legislation once the images have been formally handed over.