

Guidance for Doctors: Filming Patients for Television Programmes

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1. Doctors who take part in or facilitate television programmes which involve the filming of consultations with, or treatment of, their patients must personally obtain from those patients consent to the recording and broadcast of consultations or treatment. Where possible this should be in writing. Consultations which take place in the presence of a film crew, or recordings of consultations which are shown to an audience may otherwise be regarded as breaches of confidentiality. A doctor must never participate in, or give assistance to, the recording of a patient who does not wish to be filmed.
2. Doctors who participate in the filming of consultations have special responsibilities for those patients. They must ensure that the interests and well-being of patients are preserved, and take precedence over the public interest in the making of a television or other programme. This applies to all patients, but doctors should be particularly vigilant where mentally ill or disabled patients, the seriously ill, children, or other vulnerable people are concerned.
3. When obtaining consent doctors must ensure, as far as they are able, that:
 - a. The patient understands that purpose of the recording and the circumstances in which it will be shown, as well as the contents and nature of the programme as a whole.
 - b. If the patient wishes to place restrictions on the use in additional television programmes, of the material which is to be recorded, the scope of the restrictions is clearly agreed with the programme makers, in writing, before filming begins.
 - c. Consent forms and any explanatory material are in a style which can be readily understood by the patient (translations should be provided where necessary).

d Patients understand that they may withhold consent to being filmed, or withdraw consent during the filming, without in any way affecting the treatment provided by, or their relationship with, the doctor. If a patient withdraws consent during filming, or the doctor believes the recording may be damaging to the patient's interests, the doctor must take reasonable steps to see that the filming stops, for example by suspending the consultation and seeking a written assurance from the programme makers that the recording will not be screened.

e Patients should be left in no doubt that, after the filming process has been completed, programme makers may not accept the withdrawal of consent to screen the recorded material.

f Where a patient suffers from a mental disability or is for any other reason unable to give consent, agreement to filming should be sought from a close relative or carer. In the case of children who lack the understanding to consent on their own behalf, the consent of a parent or guardian must be obtained. The doctor should ensure that the person giving consent also understands the rights of patients explained above.

4. In order to fulfil these requirements, doctors will usually need to discuss with programme makers the arrangements for filming patients. They should explain clearly their responsibilities for patients and satisfy themselves that programme makers will abide by the doctor's or patient's judgement about when filming is inappropriate, and respect patients' decision to withhold consent to recording of a consultation. When possible this agreement should be confirmed in writing between programme makers and doctors.