

UMass Memorial Medical Center

Policies/Procedures and/or Guidelines Manual

1015 Contact with the News Media

Effective Date: 3/24/2006

I. PURPOSE

This policy establishes the policy and procedures for UMass Memorial Medical Center (UMMMC) workforce members to follow in handling requests by the news media for information and interviews, including requests for information about patient conditions.

II. SCOPE:

This policy applies to all UMMMC workforce members, and to all calls of inquiry from the news media.

III. DEFINITIONS:

Authorization – a document signed and dated by the patient or authorized representative that permits release of specified protected health information to a specific person or entity for a specified purpose. A valid authorization includes an expiration date or event.

Authorized representative – a Health Care Agent, Guardian, administrator or executor of the estate or authorized next-of-kin. A Health Care Agent is an adult to whom authority to make health care decisions has been delegated under a Health Care Proxy in accordance with Massachusetts State Law. A guardian is an individual appointed by a court to make decisions on behalf of an incompetent person. In the absence of a Health Care Agent or Guardian, the statutorily established order of next-of-kin is as follows: spouse, children of legal age, parent(s), sibling(s) of legal age, grandparent(s) and aunt/uncle/first cousin of legal age.

Confidential information – data/information (both patient health and business-sensitive) that is not freely disclosed; private information that is entrusted to another with the confidence that unauthorized disclosure that would be prejudicial to the individual or facility will not occur.

News Media – reporters, photographers, producers, directors, videographers and researchers working for or on behalf of news organizations, wire services, news networks or content providers to commercial and nonprofit broadcast or print entities. Freelancers, writers, producers and videographers working on speculation are also included.

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Protected Health Information (PHI) – all individually identifiable health information created, transmitted, received or maintained by UMMMC. This includes any information, including demographics, which identifies or could reasonably identify an individual, their health/condition, treatment or provision/payment for their health care.

UMass Medical School (UMMS) Public Affairs and Publications – The media relations program for UMMMC is provided by the UMMS Public Affairs and Publications (PAP), which interfaces with UMMMC’s Marketing and Communications Department and member of senior leadership.

Workforce members – all employees, contractors, volunteers, trainees (including medical students, interns, residents, allied health professional and business students), members of the medical staff including employed and private physicians, temporary employees, and other persons employed, credentialed or under the control of UMMMC whether or not they are paid by UMMMC.

IV. RESPONSIBILITY:

UMMS Public Affairs and Publications (PAP) is responsible for ensuring compliance with this policy. Questions regarding the policy should be referred to the director of Marketing and Communications or designated staff, or PAP. Questions specific to requests for interviews or information of a routine nature should be referred to the director of Public Affairs and Publications or designated staff. The UMMMC Privacy and Information Security Office will be available for consultation.

Only PAP or designee is authorized to release patient information to the news media during regular business hours, 0845 to 1700, weekdays. The Off-Shift Nursing Manager is authorized to release patient information between the hours of 1700 and 0845 and on weekends and holidays. PAP is available (on-call) for consultation as needed.

V. POLICY STATEMENT:

UMMMC seeks to assist and cooperate with members of the news media in the belief that

such cooperation supports the goals, mission, vision, and values of the institution. At the same time UMMMC must ensure that patient PHI is treated as confidential and used or disclosed according to established policies and procedures. News media coverage serves three principal purposes:

- ◆ the development and reinforcement of UMMMC’s public image as an integrated health care delivery system offering high quality clinical care, access to the latest medical techniques and technology, and an organization dedicated to community service;
- ◆ the dissemination of information to various individuals and organizations including

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prospective, current and former patients; referring physicians; current and potential benefactors, legislators and community leaders; physicians, staff and their families, the general public; and

- ♦ presentation of a complementary and mutual public face for two regional and national institutions of influence: UMMMC and its academic partner, the University of Massachusetts Medical School (UMMS).

VI. PROCEDURE:

A. Requests for non-patient information

Judgments regarding the appropriateness, extent, and form of information to be released to the news media are the responsibility of PAP, in consultation with the Marketing and Communications department. Therefore, UMMMC workforce members who receive requests for information directly from the news media should immediately refer the request to PAP by calling (508) 856-2000 and asking for a news media associate.

Members of the news media must always obtain permission from PAP or the Marketing and Communications Department before performing their duties on campus. If the news media request is approved by PAP, the appropriate UMMMC expert will be contacted for response.

- When the request is for a comment or statement, PAP will research and formulate such comments and statements in consultation with the UMMMC director of Corporate and Marketing Communications while adhering to state and federal privacy regulations and UMMMC policies.
- PAP will then disseminate the information as appropriate.
- When the request is for an interview, PAP will contact the appropriate UMMMC staff member and arrange the contact.

At no time will PAP arrange for direct contact between a member of the news media and a UMMMC staff member without first notifying and advising the person of the request.

All PAP workforce members will be required to review and sign the Guidelines for Public Affairs and Publications Contact with News Media (Addendum A) and the UMMMC Confidentiality/User Access Agreement (Addendum C). PAP will keep these documents on file in their office. PAP will also be responsible for reviewing the News Media Guidelines (Addendum B) with members of the news media.

B. Requests for Patient Information

The news media is not permitted direct access to patients or patients' information or indirect access through clinicians. Instead, they should request an interview or information about a patient through the UMMS PAP staff. News media will be denied access to the patient if:

- the patient has opted out of the hospital directory

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- the patient refuses, whether or not they have opted out of the hospital directory
- it is determined that the presence of news media would aggravate the patient's condition, or
- any other condition exists that would interfere with patient care.

VII. C. Release of information

Release of information to the news media must be consistent with the following guidelines:

- the laws of the Commonwealth of Massachusetts governing release of confidential information and the rights of individuals;
- the federal Health Insurance Portability and Accountability Act of 1996;
- the UMMMC policies;
- respect for the patient's health, well-being, and privacy; and
- the ethics of the medical profession.

News media will first contact PAP before obtaining information and the office will be responsible for obtaining and providing the information described in this section. The following information is appropriate to release to the news media if the inquiry specifically contains the inpatient or emergency room patient's name AND the patient has not opted out of the hospital inpatient directory: confirmation of name, general location, and an approved condition description (see Patient Condition Descriptions below). Information about the condition of these patients may be released only if the inquiry specifically contains the patient's name. No information may be given if a request does not include a specific patient's name. A reporter must also provide his/her own name and the name of his/her publication.

Additional information about the patient, and/or about the patient's case, may be released only with patient authorization using Addendum D - Authorization for the Disclosure of PHI for Photograph or Interview by News Media.

If the patient is conscious and can communicate, his or her decision to permit information about their care to be released is final. In cases of a minor or an incompetent patient, the patient's Authorized Representative must authorize the release of any information. In some cases, consultation with the treating physician may be recommended before release of information.

If a patient is medically unable to participate in the decision, every effort should be made to contact the patient's Authorized Representative before any information is released. If the patient's Authorized Representative is not available, release of information will be in accordance with Policy #1131 Opt Out Policy.

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Patient condition descriptions

For a patient who is asked for by name and has not opted out, the following approved patient condition descriptions can be provided to the news media without obtaining prior patient authorization:

Undetermined - patient awaiting physician and/or assessment

Good – vital signs are stable and within normal limits. Patient is conscious and comfortable. Indicators are excellent.

Fair – vital signs are stable and within normal limits. Patient is conscious but may be uncomfortable. Indicators are favorable.

Serious – vital signs may be unstable and not within normal limits. Patient is acutely ill. Indicators are questionable.

Critical – vital signs are unstable and not within normal limits. Patient may be unconscious. Indicators are unfavorable.

The following may be used where applicable:

Treated and released

Treated and transferred – may not release location where transferred

The term “stable” should not be used as a condition. Furthermore, this term should not be used in combination with other conditions that, by definition, often indicate a patient is unstable.

Any expression that the patient is "as well as can be expected" or "satisfactory" fails to present accurate information and should be avoided.

Death of a Patient

The death of a patient may be reported by the hospital after the next-of-kin have been notified or a reasonable effort has been made to do so as determined by physician or nurse manager. Use extreme caution when releasing information about a death.

Information about the cause of death must come from the patient's physician, and an authorized representative of the deceased must authorize its release. This means that information on the specifics about sudden, violent or accidental deaths, as well as deaths from natural causes, may not be shared without the authorization of the decedent's authorized representative. If a death becomes the object of a coroner's or medical examiner's investigation, inquiries as to the cause or circumstances of death should be directed to the appropriate coroner's or medical examiner's office.

VIII. D. Photography Requests

In the interest of privacy for staff and patients, all members of the news media with recording media such as photographic, video, electronic or audio media, must obtain a

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news media identification pass from PAP, which will supervise all such requests. A department expecting news media with recording media should notify PAP as far in advance as possible, request a news media identification pass, and instruct the visitors to pick up the pass when they first arrive on campus (see News Media Check-In below).

IX. E. Timeliness of Response

All reporters work under strict deadlines. It serves UMMMC and its mission to respond to news media inquiries in a timely, reasoned, and appropriate manner. As a general rule, a reporter should be referred to PAP within 30 minutes of the initial inquiry. It is also important that staff members respond to queries from PAP as expeditiously as possible.

F. News Media Check-In

A staff person from PAP should accompany the news media while they are in the hospitals. Exceptions may be made at the discretion of PAP. Also at the discretion of PAP, in consultation with the Office of Privacy and Security when needed, news media may be denied access to any area of the hospitals.

Members of the news media with whom UMMMC has an established relationship (e.g. who have been given the UMMMC News Media Guidelines) may be able to check in on each campus at the Front Desk. PAP or the Marketing and Communication department (Memorial campus only), if appropriate, will contact the front desk at the campus and notify them of the arrival of the news media. The front desk will provide the news media identification badge that will be worn during their visit and returned when they leave. The front desk will not provide a news media identification badge without prior notification from PAP or the Marketing and Communications department.

X. RELATED DOCUMENTS

- Addendum A Guidelines for Public Affairs and Publications Contact with News Media
- Addendum B News Media Guidelines
- Addendum C UMMMC Confidentiality/User Access Agreement for PAP
- Addendum D Authorization for the Disclosure of PHI for Photograph or Interview by News Media
- Policy #1131 Opt Out Policy

VIII. RESCISSION

This policy rescinds #1015, titled "Contact with News Media", dated 5/22/02 and becomes effective upon issuance.

IX. MONITORING:

The UMMS Public Affairs and Publications in conjunction with the UMMHC

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Privacy and Security Office will be responsible for the monitoring of this policy.

Developed By: HIPAA Advisory Group
 Marketing and Communications
 UMMS Public Affairs and Publications

Approved By: _____

Authorized Signature

Title

Date