



NENC RECORDING IMAGES AND VIDEOS IN OBSTETRIC SCANNING

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NENC RECORDING IMAGES AND VIDEOS IN OBSTETRIC SCANNING

1. Background

Clinical staff who undertake obstetric scanning are increasingly under pressure by service users to record images, videos or photographs during examinations. These are most often of fetal images, but others also capture staff without their consent. Some of these videos or photographs have then been shared by service users on their social media. Additionally, service users are often of opinion that they have a right to video on NHS property, as it is considered a 'public space'.

This is a misconception. NHS sites are not public spaces, which means that local NHS trusts must set their own policies to ensure the safety and well-being of staff, patients and all service users.

This regional guidance is set to provide local trusts a unified agreement on this matter at the regional level.

Every individual has a right to privacy, dignity and respect whilst on NHS premises. To protect this privacy and dignity, no-one is permitted to make unauthorised photographs, video or audio recordings in healthcare settings that feature other service users, visitors or staff.

Recordings of obstetric ultrasound examinations are not permitted by the patient, partner or any other person accompanying them. Recording equipment includes mobile telephones or any other digital or analogue recording media.

In some exceptional medical situations, service users may have a valid reason to request audio recordings of their consultation with the clinical staff or a video recording of the fetus. Clinical staff need to consider carefully any reasons provided and balance these against the clinical imperatives arising from the examination. Agreement to permit audio recording of the clinical consultation or video recording of the fetus does not provide automatic rights for other forms of recording.

It should be noted that any recording will be an exception to standard practice, where a copy of the written report is sufficient to meet guidance.

Ultimately, the final decision on such exceptional request is at the discretion of the sonographer carrying out the examination.

Sonographers are not obliged to give their consent to being filmed/photographed.

2. Rationale

Obstetric ultrasound is a challenging area of practice, as clinical staff who undertake scanning have to balance the needs of the complex clinical examination with the needs and expectations of the parents. For many parents, ultrasound scans are an opportunity to see their baby and be reassured that their pregnancy is progressing as anticipated.

Others may receive unexpected news at the scan, or have heightened levels of anxiety for many reasons.

A variety of different communication routes/formats should be used to maximise accessibility and engagement with the policy.

To ensure a consistent approach to implementation, provide clarity to service users and facilitate excellent patient care, we recommend that the following points are considered at each stage of the pathway. Inconsistent application of the policy or information provision could lead to confusion and may result in complaints from service users.

3a: Pre-examination

- Provide the service user with information, before the appointment, explaining the policy. The information could be included in material available via the pregnancy app or added within a letter to service users, explaining the policy and the reasons for this.
- Place a poster in the waiting areas reminding service users of the policy and the clinical importance of the NHS examination.
- Promote the policy among other antenatal care professionals, and raise awareness of why this policy is in place, to ensure consistent messaging across the care pathway

3b: On arrival in the ultrasound department

- If service users have questions relating to the policy, it is important to offer an opportunity to discuss these with an appropriate member of staff, who can explain the rationale for the policy. Confidential space should be available, away from the ultrasound room, to facilitate any discussion.
- All antenatal professionals should be aware of the rationale, to ensure consistent messaging and implementation of the policy

3c: In the ultrasound room

- Where a service user asks to record the examination, clear and open dialogue is essential to discuss their reasons and consider the best way to meet their needs. This may vary depending on their individual requirements.

Possible options could include:

- Providing an audio recording of any information given as a result of the ultrasound scan findings
- Providing a copy of the ultrasound report and/or still images
- Supporting service users' understanding by providing further written information
- Drawing diagrams to help explain challenging concepts or unexpected findings
- Signposting to appropriate support organisations or to high-quality information on the internet



- If the staff or manager decides that the request meets their local policy, it is important to consider the following:
 - Additional examination time should be allocated to enable set-up and to deal with any technical issues, without affecting the quality of the examination and the sonographer's concentration.
 - The staff should be consulted and consent to the recording, prior to beginning the examination.
- If the staff do not give consent to be photographed or videoed while performing their clinical work, they need to contact their line managers.
- It is ultimately at the discretion of the sonographer whether to agree to any recording of the examination, in line with local guidance.

References

1. Recording images of sonographers performing NHS obstetric ultrasound examinations: Guidance to support local policy development. SoR, March 2022
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3. National Institute for Health and Care Excellence (2012). Patient experience in adult NHS services: improving the experience of care for people using adult NHS services. Available at: <https://www.nice.org.uk/guidance/cg138/chapter/1-guidance> [Accessed November 29, 2021]
4. Society of Radiographers (2019). The Recording of Images and Clinical Discussions by Patients During Diagnostic Imaging, Interventional Procedures and Radiotherapy Treatment. Available at: www.sor.org [Accessed November 29, 2021]





WHAT TO EXPECT DURING THE SCAN IN PREGNANCY?

Patient Leaflet

Reason for ultrasound scan

During the NHS scan, many structures and organs are carefully checked to determine whether your baby is developing and growing as expected.

These checks take concentration and skill to perform, and it is important to use all the available time during the appointment to address clinical issues affecting you and your baby. Therefore, it is important to avoid any distractions that might affect the sonographer's ability to offer the best possible ultrasound examination.

Role of sonographer

Sonographers have a professional duty to provide a thorough examination and ensure the environment is safe for you, your partner or support person, and themselves and other staff. These checks take concentration and skill to perform, and it is important to use all the available time during the appointment to address clinical issues affecting you and your baby. Therefore, it is important to avoid any distractions that might affect the sonographer's ability to offer the best possible ultrasound examination.

Who can I bring with me for a scan?

An NHS screening scan is likely to be one of the most important examinations that your baby will have. Under normal circumstances, we encourage you to bring an adult to attend the scan with you. This may be your partner or another support person. Policy may change in the event of local/national guidance to protect NHS staff and all service users from any abnormal circumstances, such as a pandemic

What will happen during the scan?

The scan can include:

- A very detailed look at your baby (20 weeks)
- Accurate measurements of your baby and some structures within the baby
- A detailed assessment of the placenta (20 weeks onwards), fluid around the baby and your womb and ovaries
- Check the blood flow to your baby, if this is clinically necessary
- Do our best to answer any questions you have about the scan
- Show you your baby and explain what you can see on the screen
- Provide you with information about the scan findings and a written report
- Date the pregnancy (first scan) or check that your baby is growing as expected (all other scans)
- Provide an image for you to take home if your baby is in a good position (Please note that it can sometimes be difficult to get a good picture of your baby's face). If this



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- happens, the sonographer will offer you the best picture available.
- If you want to know the sex of your baby, and it is possible for us to see, we can tell you the sex of your baby verbally. We cannot guarantee 100% accuracy when giving an opinion on the sex of your baby.
 - In a small number of cases the sonographer may have to give you unexpected or difficult news. In this situation, the sonographer will tell you as much as they can about the finding(s) and make sure you are clear on the next steps.

Is there anything I can do to help ?

Please help us to perform a high-quality ultrasound scan:

- We ask that you respect the staff and enable them to concentrate on this important clinical examination of your baby.
- You should follow any safety guidance in place at the time of the scan, to protect you, your baby, staff and other people using the service.
- You should not expect any 'gender reveal' type services as part of the NHS scan, such as writing the sex of your baby on paper and sealing it in an envelope
- Please do not come expecting to video during the examination. Videos can be distracting to the sonographer.
- If the sonographer is distracted, it is harder to follow a careful, methodical approach while checking your baby's development.
- It is also important for the sonographer to create an accurate record of the examination without interruption or distraction.

