

DATA PRIVACY GUIDELINES ON VIDEO-CONFERENCE MEETINGS

INTRODUCTION:

WHEREAS, the Corona Virus Disease (COVID-19) poses serious risks to the safety, lives and health of the employees within a healthcare environment. Western Visayas Medical Center recognizes the importance of conducting meetings for coordination and implementation of hospital policies.

WHEREAS, Data Privacy Team recommends certain guidelines on video-conferencing meetings in adherence to the new norm and for the continued delivery of hospital services.

I. CONDUCT AND RECORDING OF THE VIDEO-CONFERENCE:

1. Every video-conference meeting shall be commenced by completing a written request duly signed by the requestor. It shall indicate the name of the requesting party, his/ her contact number and email, purpose/s, date of request and the date of scheduled video-conference meeting, names of participants and their corresponding email address and the agenda. The request form shall state that the recorded meeting shall be subject to the data privacy guidelines on video- conferencing meetings.

2. Video-conference meetings shall be facilitated by the IHOMP in a secure and reliable videoconferencing platform to be communicated to the participants. When sending-out the invitation via email, IHOMP should attach this data privacy guideline on video-conferencing meetings.

3. Participants are requested to ensure that the internet connection and device they will be using for the meeting are able to meet the requirements for video-conferencing. Participants are encouraged to use a virtual background to ensure their privacy.

4. Meeting IDs should be password-protected and should not be reused. The “waiting room” option should be enabled to verify the attendees and ensure that unwanted guests cannot attend.

5. Except when video screen is required for attendance purpose, settings should allow participants to control their own audio and video feeds wherever possible. Moderators should also have the ability to mute or turn off the video of attendees as needed.

6. Participants and other persons attending the video-conference are prohibited from photographing, recording, and rebroadcasting the meeting. Moderators should ensure attendees do not have the ability to record the event within the meeting application.

7. If there is a need to record the meeting, the participants must be notified in the meeting invitation that the event will be recorded, so they will be given the chance to opt out. At the beginning of the meeting, the moderator shall verbally confirm the session will be recorded.

8. Moderator will notify participants when recording begins and ends and communicate the reason the recording is required to participants. A privacy notice shall be announced by the moderator stating as follows:

"This is a privacy notice. The entire activity is being recorded, unless the party requests the discussion to be "off- the- record". During this activity, the participants' personal information such as their name, image, voice, personal views and opinions, answer to polls, reports, files, presentations and other materials shared to which they may claim copyright

or other similar relevant information may be collected and processed solely for the purpose of _____. Access to recording shall not allowed for any other purpose and shall be inadmissible unless by virtue of a court order.”

9. One-on-one meetings should not be recorded, unless a Hospital policy or procedure requires it. If documentation is required regarding the issues discussed, a summary of the meeting should be created by the requestor in the appropriate format, such as an email between attendees.

10. Attendance may be checked by using screenshot or application's module for generating meeting reports. The latter shall include personal data such as the participants' name, email address, gender and attendance status for verification purpose and to prevent fraud.

11. Storage of videoconferencing proceeding – An encrypted master copy shall be retained by IHOMP and its authorized personnel, while a backup copy shall be stored in a secured location. Only IHOMP shall be permitted to record the proceedings. Any unauthorized recording of the proceedings shall be dealt with in accordance with the Data Privacy Act, its IRR, related issuances and laws of the Republic of the Philippines. IHOMP should ensure that all personnel handling video-conferencing meetings sign their Data Privacy and Non-Disclosure Agreement.

12. The processing, including that of retention and disposal shall be in accordance with the Data Privacy Act, its IRR, and other related issuances.

13. Penalty for violation of any of these provisions is the same as those prescribed by the Civil Service Rules for violation of reasonable office rules and regulations unless such other laws impose a higher penalty.

II. REQUEST TO ACCESS THE RECORDING:

The request to access video-conference recordings is granted provided that the requesting party who is seeking permission adheres to the following:

1. When submitting request for access, collection, processing, and retention of the recordings, the requestor must submit the letter request to the IHOMP. It shall contain the legitimate purpose, the date and time of the recorded meeting, as well as the specified timestamps the requestor wishes to obtain. Relevancy is key so that access is allowed to only the relevant portion of the meeting.

2. The evaluation of request by the Data Protection Officer is required when access involves sensitive personal information and personal information covered by the Data Privacy Act. Discussion content shall be subject to access for legitimate purpose. “Legitimate purpose” is defined as the purpose set forth in the request and access is needed in furtherance thereof. Access to recording for personal consumption is allowed only with consent of the participant or participants covered by said recording.

3. Final approval for release shall be given by the Medical Center Chief.

4. Availability of recording depends on storage capacity of IHOMP facility wherein the recorded files are to be routinely deleted.

5. Recording to be accessed only by participants exclusively for the stated purpose.

6. When the access, collection, processing, and retention are authorized, please be guided by the following rules:

(a) Only data that are adequate, relevant, suitable, necessary, and not excessive in relation to a declared and specified purpose shall be processed.

(b) The soft copy of the recording must be destroyed after the purpose is achieved. Compliance thereof shall be communicated to the Data Protection Officer.

(c) Access to the recording is limited to the requesting party and accountability due to leakage or data privacy violation shall be attributed to him/her.

(d) That all data collection and storage devices must be password protected with a strong password.

(e) That if it is necessary to use portable devices for initial collection or storage of the recording, the data files should be encrypted and moved to a secure system as soon as possible after collection;

(f) That he/ she shall notify the WVMC immediately upon discovery of any unauthorized use or disclosure of the information obtained.

7. Issuances of the National Privacy Commission pertaining to this subject shall take precedence.

III. Effectivity:

These guidelines shall take effect immediately upon approval by the Medical Center Chief.

Date: _____

Approved by:

DR. JOSEPH DEAN L. NICOLO
Medical Center Chief II