



City and County of San Francisco
Daniel Lurie, Mayor

San Francisco Department of Public Health

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San Francisco Department of Public Health

*Policy & Procedure Detail**

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**All sections in table required. Table updated 0/2026.*

1. Purpose of Policy

The San Francisco Department of Public Health (DPH) serves a diverse variety of people in many different settings. Services provided by DPH are sensitive in nature, addressing general health, mental illness, behavioral health, life-threatening injuries and illnesses, communicable diseases, and other social services. These services are confidential under state and federal laws. Maintaining privacy is central to the services being rendered. When patients and clients come and go to DPH facilities, their presence can often disclose confidential information about them related to the care being received. Support persons often are at DPH clinical locations and are entitled to privacy and dignity as they visit or otherwise support a patient or client, especially when they may be dealing with a difficult situation.

Patients and clients have a right to be treated with dignity as they receive care. For these reasons, most spaces in DPH-operated facilities do not allow recording (the creation of photos, videos, or audio) subject to limited exceptions for care-related recordings and recordings where consent of all those involved is obtained.

Accordingly, DPH-operated facilities are privacy zones where all recording is prohibited except as allowed under this policy. This policy is intended to clarify when recordings may be created and subject to what restrictions.

2. Policy

The mission of DPH is to protect and promote the health of all San Franciscans by providing care in settings that are safe, private, and comfortable that respects patient/client privacy and dignity. The following limitations apply at all DPH Care Facilities and also during visits conducted via video-conference technology (telehealth visits):

- a) **No Recording in Designated Privacy Zones:** DPH takes the rights, privacy, safety, dignity, and cultural and personal sensitivities of its Patients, Staff, and Visitors seriously. This policy balances the privacy and dignity of Patients, Staff, and others with the ability of individuals, when appropriate, to create recordings. To the protect privacy and dignity of Patients, Staff,

and Visitors, DPH has established all DPH Care Facilities as Privacy Zones where Recordings are restricted. No Recording may be created by anyone within a Privacy Zone or during a telehealth visit unless expressly allowed by this policy or by another DPH or DPH Care Facility policy. Note that Recordings created by internal DPH security cameras and Security-related body cameras are not subject to this policy and are covered by other DPH or DPH Care Facility policies. Patients, or their support person, with the agreement of their treatment provider may record care and/or medication instructions to aid in remembering those instructions.

- b) **Consent to Record:** DPH respects the diverse cultural and personal needs, preferences, and expectations of Patients and Visitors it serves to the extent reasonably possible while appropriately managing available resources and without compromising the quality of healthcare delivered. Different people have different views on the appropriateness of creating Recordings, and this policy seeks to allow the creation of Recordings when appropriate based on the key concept of consent from all people involved in the Recording.
- c) **DPH Care Facility Staff Member Consent:** Each DPH Care Facility Staff member is given the option to determine whether to consent to their likeness and/or voice being captured in a Recording covered by this policy. A Patient or Visitor does not have a right to create a Recording of a specific DPH Care Facility Staff member without that person's express consent. At the same time, in order to respect the needs of the Patient, the Patient has a reasonable expectation to receive information about their diagnosis, care, or treatment in a manner that best meets their needs so long as the information is provided in a manner consistent with this policy.
- d) **Advanced Notice to Record:** The creation of Recordings authorized by this policy must be done with advance notice to all people present and after obtaining consent from those people. Given that Patients generally have a privacy interest in their own PHI, all parties to a care-related conversation at any DPH Care Facility proceed with the understanding that the conversation is expected to be kept confidential. As such, creating a Recording of a conversation without the express knowledge and advance consent of all involved runs contrary to the expectations of privacy regarding patient information and is prohibited by law. Recordings created without consent also undermine the trust between Patient and Staff that is necessary for providing the best care possible.
- e) **Recording Exceptions:** Recordings are generally prohibited from being created in all DPH Care Facilities covered by this policy and during telehealth visits, and a Recording may be made in a Privacy Zone or during telehealth visits only in the following situations:

<p>1. Recording by Patients, Patient Support Persons, Family/Friends, or Visitors (Non-Media)</p>	<p>A Patient or their support person, family/friend, or Visitor (excluding the media) may create a Recording only in the following circumstances in a Privacy Zone or during a telehealth visit:</p> <ul style="list-style-type: none"> a) Creating a Recording is allowed in a private room or area where no Staff or other Patients or unrelated Visitors are present and when all persons who are present and being recorded consent to the Recording. But no such Recording may be made at any time in areas such as waiting rooms, hallways, any hospital Emergency Department (except in private areas), nursing stations, other clinical areas (except in private areas), or anywhere else that other Patients or Staff are present or where others reasonably expect privacy. b) Creating a Recording of the Patient’s own care experiences is allowed—including but not limited to childbirth, diagnosis, summary, telehealth visits, and/or medication, treatment, discharge, or wound care instructions—or other situations not included in item “a” above. Recordings may occur when: <ul style="list-style-type: none"> i) No other Patient is present or likely to arrive without warning. ii) All people captured by the Recording, including Staff, verbally consent to the Recording in advance. In circumstances where recording is common – such as in labor and delivery – consent to record is presumed absent objection by anyone in the recording area. iii) Patients or family are recording a caregiver whom they believe is acting improperly. <p>DPH Care Facility Staff cannot restrict how a Patient or family use or share recordings when recorded in accordance with this policy.</p> c) The creation of a Recording under this subsection must not interfere with the ability of Staff to provide care, interfere with DPH Care Facility operations, jeopardize the health and safety of Patients, Visitors, and/or Staff, or violate the privacy or dignity of Staff, other Patients, or Visitors. If a Staff member determines that creating a Recording would violate any of these prohibitions, the Staff member must prohibit such Recording (See Appendix B: <u>Decision tree</u>). d) If a patient or visitor makes a recording in violation of this policy that captures the private health information of other patients, DPH Care Facility staff may ask that person to delete the recording or give it to OCPA for safe keeping to protect patient privacy. e) For Zuckerberg San Francisco General Hospital & Trauma Center (ZSFG) and the Adult Urgent Care Center at ZSFG Only: To the extent that a Patient is entitled to receive a medical screening examination (MSE) in relation to an emergency medical condition, including active labor, as required by Emergency Medical Treatment & Labor Act (EMTALA) and insists on making a Recording of their own care without Staff consent as outlined above, the Staff member must allow the Recording of the MSE to be made but should:
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	<ul style="list-style-type: none"> i) Inform the Patient that the Recording is being made contrary to DPH policies and that the Staff member objects to the creation of the Recording; ii) Document in the Patient's chart the Staff member's attempt to engage with the Patient regarding creation of the Recording and the Patient's insistence to make the Recording in violation of DPH policies; iii) Provide the MSE and any emergency care required, but a Recording may be prohibited if its creation would jeopardize the Patient's care or safety; and iv) Contact the Administrator on Duty (AOD) as soon as possible to inform him or her of the situation, and the AOD will notify ZSFG Risk Management, which in turn will notify the Office of Compliance and Privacy Affairs as soon as appropriate. Risk Management can then consult with the City Attorney's Office of the situation as necessary. Notwithstanding this subsection "e", a Patient is not allowed to create a Recording of other Patients without their consent, and the AOD and/or Security should be contacted immediately in order to take steps to prevent a Patient from recording other Patients without their consent.
2. Recordings of a Patient for Treatment, Reimbursement, Hospital Operations, and Patient-Care Related Identification	<p>Recordings may be created by Staff for Patient treatment, reimbursement, hospital/clinic operations, and Patient-care related identification purposes. Such Recordings are made under consent given when a Patient signs the associated consent for care (such as DPH's Consent for Treatment Terms and Conditions), and such consent includes permission to use the Recording for internal DPH Care Facility quality improvement, education, and training purposes. Such Recordings constitute PHI and must be handled as outlined by this or other DPH or DPH Care Facility HIPAA-related policies. Use of such recordings for internal teaching activities (e.g., lectures or grand rounds) should only occur in a manner that de-identifies the Patient to the extent possible (such as through voice alteration, blurring or omission of the Patient's face, etc.), and caution should be taken given that aspects of a de-identified Recording may still constitute PHI and should not be used in a manner that goes beyond allowed internal purposes.</p> <p>The following additional considerations apply:</p> <ul style="list-style-type: none"> a) <i>Trauma Resuscitations.</i> There are additional considerations for the use and retention of Recordings of trauma resuscitations taken in the ZSFG Emergency Department for quality improvement purposes which are detailed in ZSFG Policy No. 22.05, Videotaping Trauma Resuscitations in the Emergency Department. b) <i>Identification of Patients in the ZSFG Nursery and Behavioral Health Units.</i> For provision of care and security reasons and in order to help identify individuals, Staff may photograph infants in the ZSFG Nursery and Adult Patients in the ZSFG Behavioral Health units. The Patient or surrogate does not need to sign a specific consent and authorization form for such care-related photography, but Staff will honor a Patient or surrogate's refusal to be photographed absent unusual circumstances.

	c) Identification of Incapacitated Patients. Any DPH Care Facility may create and use a Recording to identify an incapacitated Patient as allowed by law so long as such Recording is created and used consistent with DPH or DPH Care Facility policies.
3. Recordings Created for Research, Publication, or External Education	Recordings of Patients may be created by Staff and DPH Care Facility affiliates for research, external teaching activities (e.g., lectures, grand rounds), or publication in scholarly journals only after securing a signed Authorization and consent from the Patient or the Patient's authorized surrogate using the appropriate authorized DPH Care Facility form and when part of an approved research protocol. At ZSFG, there may be exceptional situations when the Committee on Human Research has granted a waiver for the requirement to obtain consent, and such waiver should only be granted after review of the research protocol through the DPH research protocol approval process. Recordings that are created for the purposes outlined in this subsection should not become part of the Patient's medical record. To the greatest extent possible, such Recordings should be de-identified. Storage, retention, and scope of use and dissemination should be clearly defined in the Authorization and Consent form signed by the Patient. Prior to de-identification, such Recordings are subject to the transfer and storage requirements of this policy.
4. Recordings for DPH-related Purposes	To the extent that DPH Care Facility administration wishes to temporarily allow the creation of other types of Recordings in a Privacy Zone for DPH-related purposes (including but not limited to special events and City-related events), DPH Care Facility administration will take appropriate steps to protect the privacy and dignity of Patients, their support persons/families, Staff, and other Visitors. In such situations, the DPH Director of Communications or their designee should be notified. Steps to be taken may include: posting signs around an area where a Recording is being created cautioning those entering the area and identifying alternative travel routes and/or having Staff or volunteers assigned to prevent Patients and others from being captured in a Recording without their knowledge and consent. Such a notice might state: "During this special event, recording in this area is allowed. Those wishing to not be recorded should avoid this area."
5. Recordings by the Media	Requests by the media to create a Recording in a Privacy Zone, including of a Patient or generally of the DPH Care Facility location or campus, must be made in coordination with the DPH Director of Communications or their designee for the DPH Care Facility and as described in the DPH media policy.
6. Recordings by or at the Request of Law Enforcement and/or For Forensic Purposes	<p>If law enforcement requests to create a Recording in a Privacy Zone or for Staff to help create or allow the creation of a Recording for forensic purposes or record a patient to establish evidence of the patient's physical condition and circumstances relating to the injury, the attending physician, or designee, may make reasonable objections to the timing of the Recording if it will interfere with the delivery of patient care.</p> <p>Law enforcement officers may create a Recording of patients who are under their legal custody for identification and security purposes. The taking and use of these Recordings are governed by the policies and procedures of that law enforcement agency. DPH Care Facility Staff may raise reasonable objections to the timing of the photographing if it will interfere with the delivery of patient care.</p>
7. Recordings outside of Privacy Zones	Recording is allowed outside Privacy Zones so long as such Recordings are made in compliance with other DPH or DPH Care Facility policies and applicable state and federal laws and regulations. (There are very few areas at DPH Care Facilities that are not Privacy Zones, so this is a limited exception to the prohibition on creating Recordings.)

3. Safe Harbor for Recordings of Law Enforcement Activities

DPH acknowledges that members of the public, including Patients, Visitors, and Staff, may feel compelled to create a Recording of any law enforcement activity that occurs at a DPH Care Facility, including in a Privacy Zone, and that the City and County of San Francisco Sheriff's Department provides security at many DPH Care Facilities. **Such Recordings are prohibited by this policy given the likelihood that they may capture PHI without consent.** But because of the potential importance of having an accurate Recording of such situations from an institutional perspective, this subsection provides safe harbor for any Patient, Visitor, or Staff who creates such a Recording if all requirements of this subsection are met. Failure of any Staff to promptly comply with every requirement of this subsection is a violation of this policy and may result in disciplinary action for violation of this policy, up to and including termination. Failure of any Patient or Visitor to promptly comply with all requirements of this subsection may result in a temporary or permanent restriction from the DPH Care Facility. In order to be afforded safe harbor under this subsection, the person who creates an unauthorized Recording of law enforcement in a Privacy Zone must promptly do all of the following:

- a) Immediately notify a Staff member or DPH Facility Supervisor of the situation, including that a Recording was made;
- b) Provide a copy of the Recording to the Office of Compliance and Privacy Affairs by contacting the Office of Compliance and Privacy Affairs (such as using the hotline phone number listed at the top of this policy, or the DPH Facility Supervisor can also assist) to make arrangements for transfer of the Recording;
- c) Refrain from sharing the Recording with anyone, including refraining from sending the Recording to anyone via email, text message, or other format or posting the Recording on Social Media or the Internet; and
- d) After ensuring that the copy of the Recording has been received and retained by the Office of Compliance and Privacy Affairs, DPH Care Facility staff must delete all copies of the Recording and ensure that no copy of the Recording is kept or stored. Patients/visitors may be encouraged to delete such Recordings.

The Office of Compliance and Privacy Affairs must maintain that copy in a secure manner and will act as the custodian of such Recordings. If a copy of the Recording is needed for official purposes, such as litigation, a law enforcement or regulatory investigation, internal investigation, or other official proceeding, the Recording will only be provided by the Office of Compliance and Privacy Affairs in compliance with applicable privacy laws and in consultation with the Office of the City Attorney.

4. Definitions

For purposes of this policy, the following definitions apply:

- a) The term "**Authorization**" means permission from a Patient for their Protected Health Information, their likeness, or other aspects of their care at a DPH Care Facility to be used for a specific purpose or to be disclosed to an individual or entity for purposes other than treatment, payment, healthcare operations, or other uses allowed by law or the DPH Care Facility's policies (such as DPH's Consent for Treatment Terms and Conditions). Authorization also refers to permission from other people for a Recording of their likeness to be made under this policy.

- b) The term “**DPH Care Facility**” means all parts of any clinic, hospital, or other building owned, leased, or operated by the City and County of San Francisco and/or operated by DPH where services or care are provided by DPH to Patients. This term includes but is not limited to areas where activities occur that relate to services or care provided to Patients. By way of example, but without listing every location, this term includes Patient registration areas, Patient waiting areas, internal hallways, clinical areas, Patient rooms, nursing stations, pharmacy facilities, labs, medical records facilities, clinical departments, housekeeping, engineering areas, research labs, professional offices, departmental offices, and administrative offices. The term also includes other areas of such facilities where care is not provided (such as interior offices, meeting rooms, and other spaces) given that confidential Patient information may be present in such spaces. And the term includes telehealth visits involving Staff.
- c) The term “**Patient**” means an individual receiving healthcare or related services at any DPH Care Facility. The term also includes people receiving such services who might also be called a “client” or “resident” at any such DPH Care Facility.
- d) The term “**Privacy Zone(s)**” means any and all areas of each DPH Care Facility, including all interior spaces and also those outdoor walkways, plazas, and gardens designated in Appendix A of this policy (excluding sidewalks along public streets on the external part of any DPH facility location). For certain DPH facilities, see **Appendix A** to this policy for a detailed description of the Privacy Zone(s) at that location. The term Privacy Zone excludes any room at a DPH Care Facility during any meeting that is open to the public as required by the Ralph M. Brown Act/San Francisco Sunshine Ordinance. Free Speech Zones outdoors, as designated by other DPH policies, are also excluded from the term Privacy Zone.
- e) The terms “**Protected Health Information**” and “**PHI**” mean any individually identifiable health information as defined by the Health Insurance Portability and Accountability Act of 1996 (HIPAA) (45 C.F.R. Parts 160 and 164, Subparts A and E) and associated regulations, including but not limited to 45 CFR § 160.103. The term PHI under this policy is also intended to include the definition of medical information as defined by the Confidentiality of Medical Information Act, Civil Code §§ 56 *et seq.* or similar concepts under state law (e.g., the LPS Act) Any changes to the statutory definitions of those terms are automatically incorporated into this policy. For more information on the scope of how specific DPH facilities define PHI, please see that facility’s HIPAA-related policies. For purposes of illustration, the term PHI generally refers to any care-related information about a Patient, including demographic information, Patient vitals, and information about the Patient’s health, care, and billing for services.
- f) The term “**Recording**” means a digital or analog representation capturing an image or audio data, including of an individual’s likeness (a person’s face or body and/or their voice) or their PHI, using still photography, moving images, transcription, sensors, and/or sound created via any technology (such as a camera, video camera, mobile/cell phone, digital audio recorder, laptop, tablet, web camera, headset, drone, wearable device, augmented reality device, etc.). This term also includes images captured anywhere at any DPH Care Facility given the likelihood that such images will inadvertently capture a patient or run the risk of capturing a Patient without warning. This term also includes any device, wearable or otherwise, that uses any of the methods to capture images and audio data as described in this section and that uses that data with artificial intelligence either on the device or by sending that data to a cloud.
- g) The term “**Social Media**” means any form of electronic communication such as a website, mobile app, social network, video service, microblog, or similar service through which users participate in online

communities, whether public or closed, to share information, ideas, personal messages, and other content such as photos, videos, sound files, or text. Examples of social media include Facebook, Twitter/X, TikTok, YouTube, and Instagram.

- h) The term “**Staff**” means any employee, contractor, agent, or volunteer of the San Francisco Department of Public Health at any DPH Care Facility. This term also includes students or trainees and visiting providers at such facilities.
- i) The term “**Supervisor**” means a person who supervises Staff at the DPH Care Facility. This term can also include other DPH-affiliated leadership, including facility executive staff or the Administrator-on-Duty at ZSFG.
- j) The term “**Visitor**” means any person who is at a DPH Care Facility who is not a Patient or Staff. This includes people who are visiting or supporting a Patient and also others who come onto a DPH Care Facility location.

5. Procedures

The following procedures and safeguards apply in relation to all Recordings allowed above:

- a) **Notices.** Each DPH Care Facility must post notices in commonly trafficked entries to Privacy Zones and at reasonable locations throughout the Privacy Zone advising in common languages and with icons that Recordings are prohibited. The DPH Care Facility administration will determine the scope of such notices. Such signs must state something along the following lines: “You are now entering a Privacy Zone—photography, videography, and recording are generally prohibited.”
- b) **Patient requests for care-related Recordings.** DPH seeks to facilitate a Patient’s ability to understand their medical condition, including their diagnosis, treatment plan, and care instructions. As such, a Patient may reasonably request to make a Recording or obtain another aid in understanding their care. A Recording that includes Staff may be created with Staff consent as outlined in Section 2.e.1 above. If Staff does not consent to the Recording, Staff must work with the Patient to attempt to reach a reasonable and mutually acceptable solution. Such reasonable and mutually acceptable solutions include, but are not limited to, the following: Staff may agree, at their discretion, to have their voice but not image captured for a portion of the care instructions and/or the summary of diagnosis and treatment; Staff may find another Staff member who consents to having a Recording created as outlined in this policy; the Patient may agree to receive a written, electronic, audio, or video summary of their care instructions or summary of diagnosis and treatment in a manner that is acceptable to all parties (such as having Staff create a Recording later and make it available to the Patient); or the parties may agree on another solution that respects the privacy and dignity of all. But, at a minimum, Staff must work with the Patient to provide information requested by the Patient in some alternative format. If no agreement can be reached or the Patient refuses the information in the offered format, the Patient may not create the Recording and Staff must, as a courtesy, offer to attempt to refer the Patient for care at another location or facility, although the DPH Care Facility has no obligation to find a facility that will agree to care for the Patient. If Staff refuses to allow a Recording to be created in relation to Patient care under this policy and no mutually acceptable solution is reached, Staff must note the impasse in the Patient’s medical record for that encounter, including documenting what options were offered, why they were not acceptable, and any other reason why a solution was not reached.

A Patient who disagrees with a Staff determination under this subsection that a Recording may not be made may request prompt review of the determination by asking Staff for a review of the outcome. Staff should contact the DPH Care Facility Supervisor as soon as possible to advise them of the situation. The City Attorney's Office and/or the Office of Compliance and Privacy Affairs may be consulted by the DPH Care Facility Supervisor in such situations. The DPH Care Facility Supervisor will consider the context, consult additional DPH Care Facility leadership if appropriate, and work to find a solution if possible. The decision of the DPH Care Facility Supervisor is final.

- c) ***Limiting the scope of a Recording for treatment, reimbursement, or hospital operations.*** Any Staff member creating a Recording pursuant to this policy for treatment, reimbursement, or hospital/clinical operations should attempt to capture only that portion of the Patient's body necessary to accomplish the intended purpose. If the face or other identifying characteristics are not required, those aspects of the Patient's identity should not be captured in a Recording in most circumstances.
- d) ***Obtaining consent after a Recording for treatment, payment, or hospital/clinical operations only.*** If a Patient is unable to consent to a Recording for purposes of treatment, payment, or hospital/clinical operations, consent must be obtained from an authorized Patient representative, if available, or from the Patient as soon as reasonably possible by having the Patient or representative sign an appropriate consent form (such as, at ZSFG, the **Terms and Conditions of Admission for Acute Inpatient, Outpatient and Emergency Services**). The consent will be retroactive to the date of admission of the Patient or the date of the clinic appointment when the Recording was made. Unless for treatment, payment, or hospital/clinical operations or as otherwise allowed by this policy, a Recording should not be used until the Patient or the Patient's authorized representative consents.
- e) ***Emergencies.*** During emergency situations, DPH Care Facility administration may restrict or revise the ability to access Privacy Zones or to create a Recording in order to protect the DPH Care Facility's ability to operate safely and/or to protect Patient, Visitor, and Staff privacy and dignity.
- f) ***Enforcement of Policy.*** If any issues arise regarding potential violations of this policy, Staff should first, if they are comfortable, engage with the person(s) causing the issue and inform them of this policy's restrictions on Recordings. If that does not resolve the issue or if Staff feels unable to engage with the person, Staff should immediately contact the DPH Care Facility Supervisor, who will be responsible for working to resolve the issue and may reach out to the DPH Security Office (which may be staffed by the City and County of San Francisco Sheriff's Department), the City Attorney's Office, the DPH Office of Compliance and Privacy Affairs, or other resources as appropriate. If Staff believes a Recording has been made of any Patient or involving PHI without consent, Staff should advise the person making the Recording to immediately stop and should note whatever information they have about the situation (such as the name of the person making the Recording, the name(s) of the Patient(s) whose PHI is being captured without consent, the time, location, etc.). At no time should Staff attempt to confiscate a device they believe has been used to create an unauthorized Recording—the DPH Care Facility Supervisor or Security will work to address the issue based on information provided by Staff.
- g) ***Creation and handling of Recordings containing PHI.*** Recordings containing PHI that are created, handled, and/or stored by Staff must comply with the requirements contained in applicable DPH Care Facility policies.
- h) ***Care provided in on the sidewalks or streets.*** This Policy does not apply to care provided by Staff on public sidewalks or streets (other than Privacy Zones), such as care provided by the Street Medicine program. Care provided in those locations is subject to the policies of any such program.

6. References/Attachments

Appendix A – Specific DPH Care Facility Privacy Zones

Appendix B – Decision Tree

7. Review/Revision History: 8/3/2019; 5/17/2023; 10/23/2025

Appendix A - Specific DPH Care Facility Privacy Zones

For purposes of the Personal and Care-Related Recording at DPH Facilities policy to which this appendix is attached, the following DPH Care Facility Locations have specific Privacy Zones, as listed below. For all other DPH Care Facilities, the policy defines the term Privacy Zone (and includes all indoor areas of such locations).

For the following locations, the term Privacy Zone includes all indoor and outdoor locations as described below:

1. For the Zuckerberg San Francisco General Hospital (ZSFG) campus, including the Behavioral Health Center:
 - a. The term Privacy Zone at ZSFG includes all of the following: all buildings between Potrero Avenue on the west, Vermont Street on the east, 22nd Street on the north, and 23rd Street on the south (including Buildings 1, 3, 4, 5, 7, 9, 10, 20, 25, 30, 40, and 100); and all buildings between Potrero Avenue on the west, San Bruno Avenue on the east, US Highway 101 on the northeast, and 22nd Street on the south (including Buildings 90 and 100, Building 2, and the Behavioral Health Center).
 - b. The term Privacy Zone at ZSFG also includes all of the following outdoor areas: all outdoor areas, including but not limited to walkways, plazas, and gardens, within the area bounded by Potrero Avenue on the west, Vermont Street on the east, 22nd Street on the north, and 23rd Street on the south but excluding sidewalks along those listed streets outside the fence on the ZSFG campus. This term also includes any and all outdoor areas, including but not limited to walkways, plazas, and gardens, within the area bounded by Potrero Avenue on the west, San Bruno Avenue on the east, US Highway 101 on the northeast, and 22nd Street on the south but excluding sidewalks along those listed streets, such as outside the fence along Potrero Avenue.
2. For the Laguna Honda Hospital and Rehabilitation Center (LHH) campus:
 - a. The term Privacy Zone at LHH includes all of the following: all buildings on the LHH campus, including the Pavilion building, North building, South building, and Administration building (wings A-M).
 - b. The term Privacy Zone at LHH also includes all of the following outdoor areas: all outdoor areas, including but not limited to walkways, gardens, and parking lots within the area bounded by Laguna Honda Boulevard on the west, Idora Avenue on the east, Clarendon Avenue on the north, and Woodside Avenue on the south. The term does not include the public-access walking/hiking trail that goes along the east side of the LHH campus as follows: the trail which starts on the north side of campus at Clarendon Boulevard as the Florida Alley Trail, travels east along the north side of campus, then turns south, cuts through Sutro Meadow, then turns east again past the East Parking lot, becomes the Troop 88 Trail, and exits campus on the eastern side at Panorama Drive. Signs remind people on the trail of restrictions when coming onto the rest of the LHH campus.

Appendix B – Decision Tree

Staff may use this decision tree for purposes of addressing violations of this policy:

1. Is a Recording (audio, video, photo) being created within a Privacy Zone as defined by the policy? If so, proceed to the next question.
2. Is the Recording being made in compliance with this policy? For example, is it related to patient care where the Patient has signed a consent form, is it being created by a Patient and/or Visitor in a private area where no Staff are present, or is it being created by a Patient and/or Visitor in a private area where Staff have consented to be included? If not compliant with this policy, it is a potential violation, proceed to the next step.

3. Responding to the potential violation. Next Steps:

- a. If Staff feels safe and comfortable doing so, they should approach the person making the Recording, advise them they are violating DPH policy prohibiting making Recordings, and ask them to stop immediately. Staff can skip this step if they do not feel comfortable.

Regardless, if the person making the Recording continues, Staff should note whatever information they have about the situation (such as the name of the person making the Recording, the name(s) of the Patient(s) whose PHI is being captured without consent, the time, location, etc.).

- b. Staff should report the issue to the DPH Care Facility Supervisor, who will be responsible for working to resolve the issue and may reach out to the DPH Security Office (which may be staffed by the City and County of San Francisco Sheriff's Department), the City Attorney's Office, the DPH Privacy Officer, or other resources as appropriate.

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