



## Briefing for the Public Petitions Committee

**Petition Number:** [PE 1718](#)

**Main Petitioner:** Alex Wallace

**Subject:** Body cameras for the NHS

Calls on the Scottish Parliament to urge the Scottish Government to introduce body cameras for all NHS frontline and theatre staff.

### Introduction

Body worn cameras are mobile audio and video devices that allow the wearer to record what they see and hear. Devices can be attached to various parts of the body, including the head, a helmet, glasses, or to the body by pocket, badge or other means.

Body cameras are now a common feature for professions like the police. However, they are rare in a healthcare setting and so far have largely been limited to security staff.

The petition is calling for the use of body cameras by all frontline clinical staff, including those who work in operating theatres. The rationale given by the petitioner is that they would protect staff from verbal or physical abuse and could also be used to protect patients from staff abuse.

### Prevalence of abuse in the NHS

The latest Dignity at Work survey<sup>1</sup> of NHS staff found that:

- 29% of staff had received verbal/emotional abuse from patients or the public in the last 12 months.
- 7% of staff had experienced physical violence from patients or members of the public in the last 12 months.

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<sup>1</sup> Scottish Government (2018) [Health and social care staff experience: report 2017](#)

Abuse was most commonly experienced by staff working in the ambulance service and the State Hospital in Carstairs.

There are no corresponding figures for the level of abuse experienced by patients at the hands of staff.

## **Advantages and disadvantages**

The effect of body cameras has mainly been studied in law enforcement and a report<sup>2</sup> by the International Association for Healthcare Security and Safety describes their benefits as follows:

- a reduction in the use of force by police officers
- a reduction in complaints against police officers
- preventing confrontational situations
- helping to resolve complaints
- improving agency transparency
- identifying and correcting problems within an agency
- improving evidence documentation
- assisting officers to remain professional.

The report also details some studies of their use by security officers in a healthcare setting, which found a reduction in violence and a reduction in injuries to security personnel.

Some of the recorded disadvantages relate mainly to the practical limitations of the equipment. For example, their limited field of vision. However, in a healthcare setting, some concerns have been expressed around the potential impact on privacy, patient confidentiality and the relationship between staff and patients<sup>3</sup>.

## **Use in a healthcare setting**

As noted above, use of body cameras in a UK healthcare setting has largely been limited to security staff. However, use by frontline clinical staff has been piloted in parts of England.

Northamptonshire Healthcare NHS Foundation Trust piloted their use in five inpatient psychiatric wards. During the pilot, cameras were only turned on in situations where staff believed there was a high or immediate risk of harm.

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<sup>2</sup> International Association for Healthcare Security and Safety (2015) [Body worn camera use in health care facilities](#).

<sup>3</sup> The Guardian (18 Jan 2017) [Home Office refuses to enforce privacy code in NHS staff using video](#) and The Guardian (1 May 2019) [Can body cameras protect NHS staff and patients from violence?](#)

Patients could also request for the cameras to be turned on if they were unhappy with a situation.

The feasibility study<sup>4</sup> found that their use was acceptable to both patients and staff and resulted in a reduction in incidents and complaints.

The NHS in England is also piloting their use with paramedics<sup>5</sup>.

## Data Protection

Body worn cameras record images and other information which can be used to identify individuals. This means that they are covered by data protection legislation. Operators must therefore ensure that the way they process the data adheres to the legal framework. More information about this is available from the [website of the Information Commissioner's Office](#).

A key consideration is ensuring that there is a legal basis for processing the data. Consent can only be used where it is possible for the person whose data is being recorded to withdraw consent. This will not be the case in many healthcare settings.

Other options for creating a legal basis for processing personal data – which do not require consent - include:

- that it is necessary to perform a public task (but that task must have a clear basis in law)
- that the organisation has a legitimate interest in processing the data which overrides any interest the subject of the data has.

Other issues which must be taken into account include how to minimise the need for processing personal data, how to keep data secure and how to ensure data is retained for no longer than is necessary.

## Scottish Government Action

The Scottish Government does not appear to have a policy position on the use of body worn cameras in the NHS.

In response to a [Parliamentary Question](#) about their potential use in the State Hospital, the Minister for Mental Health stated that it was a matter for the hospital to decide.

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<sup>4</sup> Hardy S et al (2017) [The feasibility of using body worn cameras in an inpatient mental health setting](#)

<sup>5</sup> Department of Health and Social Care (2 July 2018) [Paramedics to be given body cameras to protect them from abuse](#)

## **Scottish Parliament Action**

The Scottish Parliament has not undertaken any work on the specific issue of body cameras in a healthcare setting.

However, a sub-committee of the Justice Committee on Policing [took evidence](#) on the use of body worn video in June 2017.

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10 May 2019

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Published by the Scottish Parliament Information Centre (SPICe), The Scottish Parliament, Edinburgh, EH99 1SP [www.parliament.scot](http://www.parliament.scot)