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July 20, 2020

**By Email (wlamot@dhr.ny.gov)**

Mr. William LaMot

Regional Director

New York State Division of Human Rights

55 Hanson Place, Room 304

Brooklyn, NY 11217

**Re: Marcus Conte v. The Brooklyn Hospital Center  
Case No. 10207504**

Dear Mr. LaMot:

We represent the Respondent, The Brooklyn Hospital Center (“TBHC” or the “Hospital”), and submit this position statement, in opposition to the outrageous and totally frivolous Complaint filed by Marcus Conte.<sup>1</sup>

**I. PRELIMINARY STATEMENT**

This complaint arises out of an incident which Charging Party **Marcus Conte provoked**, when he walked onto the Hospital’s property on April 1, 2020 – a date when Brooklyn Hospital was overflowing with patients and at the height of the COVID 19 pandemic,<sup>2</sup>

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<sup>1</sup> This position statement is based on the undersigned’s investigation and understanding of the facts at the time of this letter. The position statement and enclosures are provided for the limited purpose of responding to the claims raised by Mr. Conte before the New York State Division of Human Rights (“NYSDHR”). By submitting this position statement, TBHC does not waive its right to present new or additional evidence for substance or clarification or to raise additional defenses. Copies of the position statement and all related appendices, documents, and supporting data must be kept confidential and are not to be released to any person without the prior written permission of the undersigned, unless otherwise required by law. TBHC does not consent, and reserves the right to object, to the introduction of this position statement in any administrative, judicial, or other proceedings.

<sup>2</sup> According to Governor Andrew Cuomo’s recorded daily briefing there were 12,226 people hospitalized in New York due to COVID-19 as of April 1, 2020. There were 83,712 positive cases, and the death toll was at 1,941.

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not to receive treatment or visit a patient, but to provoke a confrontation and make a live film to post on his You Tube video channel. **Mr. Conte was trespassing, violating multiple Hospital policies, and his live filming of patients and families – which he was posting on You Tube in real time – was a clear violation of the privacy of those patients and families, who did not consent to have their pictures streamed out over the internet.**

Also, and contrary to his complaint, you will also see from the video (which we include in this submission) that Mr. Conte caused the confrontation with Hospital Security, as he was refusing to obey their lawful and polite commands of the Security officers, and then began cursing at and trying to provoke them, calling them names and using racial insults, like “Black racist,” “We have black racists guarding the property,” “What’s your name, black racist,” “Fire this f\*\*\*\*\*,” “Piece of shit,” “Racist n\*\*\*\*,” “Racist motherf\*\*\*\*\*,” “Go f\*\*\*\*\* yourself, you racist n\*\*\*\*.”

In sum, Marcus Conte was not at Brooklyn Hospital to seek treatment. He was violating the law and Hospital policy, and was there for his own self-promotion and for no other purpose.

Mr. Conte also was not discriminated against or denied any service by Brooklyn Hospital. He never sought any ‘service’, he was just at the Hospital to cause a disruption and invade the privacy of the Hospital’s patients and staff. As New York continues to battle a global pandemic, Mr. Conte should not be wasting the Hospital’s and the Division’s time with this baseless complaint. It should be dismissed in its entirety.

In fact, we submit the Division should investigate Mr. Conte for his racist behavior and language.

## II. SUMMARY OF THE FACTS

The Brooklyn Hospital Center is a 463-bed, not-for-profit acute care community and teaching hospital located in Brooklyn, New York.

As recognized by the NY Times and 60 Minutes, during March and April 2020 Brooklyn Hospital was at the apex of the COVID-19 crisis. I invite you to read the following news articles, which detail the heroic events that have taken place at the Hospital in the last month and a half. “*We’re In Disaster Mode: Courage Inside a Brooklyn Hospital Fighting the Coronavirus, March 26, 2020, New York Times*, <https://www.nytimes.com/2020/03/26/nyregion/coronavirus-brooklyn-hospital.html>; *Hope, and New Life, in a Brooklyn Maternity Ward Fighting Covid-19, New York Times, April 12, 2020*, available at <https://www.nytimes.com/2020/04/12/nyregion/coronavirus-births-mothers.html>; *24 Hours Inside a Brooklyn Hospital, The Daily Podcast (NEW YORK TIMES), April 15, 2020*.

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The Hospital was also featured on 60 Minutes on Sunday, April 12, 2020.

The Hospital treated thousands of COVID patients during those months.

**A. Mr. Conte's Behavior on April 1**

It was on April 1, 2020, a date when the state of New York saw over 12,000 people hospitalized for COVID and already had over 1900 COVID deaths, that Marcus Conte chose to “visit” Brooklyn Hospital, to create a “live film” and entertain his You Tube audience. Mr. Conte, who is not affiliated with any recognized news organization, entered the Hospital property through the driveway and began a video recording near the main entrance of the Hospital. Mr. Conte claims that he was investigating a “mysterious COVID-19 morgue/freezer truck” parked outside of the hospital<sup>3</sup> This was not a legitimate investigation of any sort as there was no “mystery”, Mr. Conte was on a mission to provoke a conflict – and he did.

Notably, Mr. Conte was not wearing any press or other credentials, did not have a visitors pass, and had not followed the Hospital's published procedure, to request permission to film on the Hospital's property. He was also live streaming this video via You Tube, and talking to his ‘audience’ as he filmed.

The Hospital's security officers, in accordance with Hospital policy, correctly (and politely) asked Mr. Conte to leave the premises and stop the live recording. They were in the right, as he had no legitimate reason to be there and his live streaming of this video jeopardized the privacy rights of TBHC's patients, visitors, and staff.

As we will explain *infra*, Mr. Conte was also violating several published Hospital policies, which require the media to request permission to film or take pictures on Hospital property, which policies are designed to protect privacy, a matter of utmost importance to the Hospital. He also caused a disruption on the Hospital campus. A TBHC security officer saw Mr. Conte recording and correctly informed him, in accordance with Hospital policy, that filming was not allowed. The security officer directed Mr. Conte to leave the premises. When it became clear that Mr. Conte was not going to leave the premises quietly, a second security officer began escorting Mr. Conte off the premises, while maintaining six (6) feet distance for social distancing in light of COVID-19 pandemic. Mr. Conte was antagonistic toward the security officers and repeatedly told them “don't touch me,” even though it is clear from the video that they were not touching him nor were they even standing close to him.

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<sup>3</sup> There was a city morgue truck parked around the corner from the main entrance of the Hospital, on Ashland Place, nowhere near the driveway where Mr. Conte was “reporting.”

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Mr. Conte deliberately provoked the security officers, and called one of them a “d\*\*\*head.” While it is not discernable based on the video recording what the security officer said in response to Mr. Conte (since the security officer was wearing a face mask), Mr. Conte alleges that the security officer responded, “Get your white privilege out of here.” The security officer denies this statement.

Mr. Conte then proceeded to torment the security officer, yelling “Black racist,” “We have black racists guarding the property,” “What’s your name, black racist,” “Fire this f\*\*\*\*\*,” “Piece of shit,” “Racist n\*\*\*\*,” “Racist motherf\*\*\*\*\*,” “Go f\*\*\*\*\* yourself, you racist n\*\*\*\*.” Despite Mr. Conte’s tirade of discriminatory comments, the security officer did not say anything further to Mr. Conte but rather escorted him off the Hospital property.

Once Mr. Conte finally left the Hospital, he gleefully said to his audience: “How’d you like that? That’s a little live television for you.”

Dispositive of this matter, Mr. Conte never claimed he was ill or requested any services from the Hospital, and was never denied any services by the Hospital. He was also violating several Hospital policies.

## **B. The Hospital Policies Mr. Conte Violated**

TBHC maintains a zero tolerance policy against discrimination. It is committed to a policy of equal treatment, without regard to race, color, religion, creed, gender, or any other protected category under applicable federal, state or municipal law.

TBHC also maintains several policies to protect patient privacy and facilitate compliance with the Health Insurance Portability and Accountability Act (“HIPAA”), which our staff must enforce and which Mr. Conte violated:

- First, TBHC maintains a policy on “Photographing, Video Monitoring/Recording, Audio Monitoring/Recording, and/or Other Imaging of Patients, Visitors, Employees, Members of the Medical Staff, and Other Privileged practitioners.” (A copy of the Photographing policy is attached as Exhibit A). According to the policy, TBHC will take reasonable steps to protect patients, visitors, employees and members of the medical staff, and other privileged practitioners from unauthorized photography, video monitoring, and/or audio monitoring/recordings, or other images. Here, it is undisputed that Mr. Conte did not have any authorization to record.

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- Second, TBHC maintains a policy on “Media Contact.” (A copy of the Media Contact policy is attached as Exhibit B), which is available on the Hospital website to any legitimate member of the news media. The aim of that policy is to provide media representatives with information, while protecting the privacy of the Hospital’s patients and staff.

Media representatives are not permitted on Hospital premises without prior approval of the Senior Vice President or a Senior Staff member, including the Chief Executive Officer, the Chief Operating Officer, or their authorized designees. Only then, if the SVP agrees to allow the media representative into the Hospital, an escort will be sent to the lobby to meet the representative.

Mr. Conte never contacted anyone at the Hospital as a purported “member of the media.” He certainly did not receive authorization to record on Hospital property.

Also, he had no permission or consent to film the Hospital’s patients and families as they entered the Hospital’s premises during the height of a pandemic, film them and post that film on You Tube, as he did. People have a right to expect that their pictures will not be posted on the internet when they go to a hospital for treatment or to visit a loved one. The Hospital guards were correctly trying to prevent that gross violation of their privacy or really any disruption to the Hospital campus, particularly in these trying times during the COVID-19 pandemic.

### **III. ARGUMENT**

#### **A. Mr. Conte Cannot Establish A Claim Of Public Accommodation Discrimination**

Mr. Conte’s allegations do not support any cognizable claim under the New York State Human Rights Law. Section 296(2)(a) of the New York State Human Rights Law provides that it shall be an unlawful discriminatory practice for any place of public accommodation to “refuse, withhold from, or deny any of the accommodations, advantages, facilities or privileges thereof because of a person’s race/color”. N.Y. Exec. Law § 296(2)(a). Mr. Conte did not seek any public accommodations from the Hospital and was thus not denied any accommodations let alone denied a public accommodation because he is Caucasian/white.

In order to establish a claim under N.Y. Exec. Law § 296(2)(a), Mr. Conte must establish that the Hospital refused, withheld from or denied him an accommodation, advantage, facility or privilege of the Hospital. Unlike cases where violations of the Human Rights Laws have been found – Mr. Conte was not denied any service or public accommodation. Compare

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with Matter of *Gifford v. McCarthy*, 137 A.D.3d 30 (N.Y. App. Div. 3rd Dept. Jan. 14, 2016) (The owners of a farm that was opened to the public as a venue for weddings discriminated against a couple on the basis of sexual orientation, when they refused to host the couple's wedding on the farm); *In the Matter of Commission on Human Rights Ex Rel. Cynthia Jordan v. Baqir Raza and Jafar Raza*, OATH Index No. 716/15, 2015 NY OATH LEXIS 422 (July 27, 2015), modified on penalty, Comm'n Dec. (July 7, 2016) (Where the lessee and driver of a taxicab refused to transport an African American woman in his taxicab and shortly thereafter picked up two white women, the ALJ concluded the lessee and driver refused to serve the individual because of her race, violating N.Y.C. Admin. Code § 8-107(4)); *Comm'n on Human Rights ex rel. Latif v. New Master Nail, Inc.*, OATH Index Nos. 1576/10 & 1577/10 (Aug. 10, 2010) adopted, Comm'r Dec. (Nov. 16, 2010) (Where a nail salon failed to provide nail services to a disabled person and a salon employee said "we don't take her kind," the ALJ concluded the nail salon refused to serve the individual because of her disability, violating N.Y.C. Admin. Code § 8-107(4)).

Mr. Conte does not allege he was denied any service or treatment by the Hospital, because he was not. Mr. Conte was recording and live-streaming on Hospital property without authorization. He failed to follow Hospital policy and ask permission to record, or show any credentials to prove that he was a legitimate journalist. Thus, he was trespassing and was politely told to leave. He refused to leave, and then "responded" by cursing and by using offensive racial insults toward the black security guards.

Courts have dismissed claims against hospitals where there was no proof services were denied because of race. For example, in *Sawabini v. O'Connor Hosp.*, plaintiff alleged that the defendant-hospital denied him medical services. The claim was dismissed, because the plaintiff failed to identify who denied him treatment. *Sawabini*, No. 3:15-CV-0692 (LEK/DEP), 2015 U.S. Dist. LEXIS 136058, \*17 (N.D.N.Y. Aug. 31, 2015). It is obvious from the tape that Mr. Conte was not denied a service by the Hospital.

Further, Mr. Conte also has not established he was discriminated against because he is white. Mr. Conte had no legitimate reason to be on the Hospital's property on April 1<sup>st</sup>, and had not followed proper policy to seek permission to film. He was also streaming this film live, via You Tube. Anyone, of any race, filming and live streaming at the Hospital without permission would be removed.

Mr. Conte also was not "racially attacked," as he alleged in his complaint. The video shows that it was Mr. Conte who was racially attacking the Hospital officer, as he was yelling profanities and racial insults at the security officer.

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#### IV. CONCLUSION

In sum, Marcus Conte went to Brooklyn Hospital on April 1, at the height of the COVID-19 pandemic, solely to cause trouble. He wanted to create a conflict and get some “juicy” content to post on You Tube. He ignored the Hospital’s policies for lawful media inquiries, violated the privacy of the Hospital’s patients and staff, and spewed vile racial epithets at the Hospital’s security officers.

The security officers were following Hospital protocol when they requested that he step away and stop filming. Mr. Conte “responded” by yelling racial epithets at them. Marcus Conte, we submit, himself engaged in racially discriminatory behavior, he was not being discriminated against or denied any “service.”

This Complaint is both legally and factually meritless and should be dismissed in its entirety.

Respectfully submitted,

/s/ Barbara E. Hoey  
Barbara E. Hoey

Enclosures

# **EXHIBIT A**





# The Brooklyn Hospital Center

*Keeping Brooklyn healthy.*

## THE BROOKLYN HOSPITAL CENTER POLICY AND PROCEDURE MANUAL

### **SUBJECT:**

Photographing, Video Monitoring/Recording, Audio Monitoring/Recording, and/or Other Imaging of Patients, Visitors, Employees, Members of the Medical Staff, and Other Privileged practitioners. **Policy # C- 699**

**RESPONSIBILITY:** TBHC Administration & All Staff

### **PURPOSE:**

- To facilitate compliance with the Health Insurance Portability and Accountability Act (HIPAA) Standards for Privacy of Individually Identifiable Health Information (Privacy Standards), 45 CFR Parts 160 and 164, and any and all other Federal regulations and interpretive guidelines promulgated thereunder.
- To establish guidelines for situations where protected health information (PHI), patients, visitors, employees, members of the medical staff, and other privileged practitioners may or may not be photographed, video or audio recorded or monitored or otherwise imaged within the facility.

### **POLICY:**

TBHC will take reasonable steps to protect patients, visitors, employees and members of the medical staff, and other privileged practitioners from unauthorized photography, video monitoring, and/or audio monitoring/recordings, or other images.

Due to the sensitive nature of patient information and to protect patient privacy, TBHC will follow the guidelines and procedures outlined below before allowing, or prior to, photographing, video or audio monitoring and/or recording, or otherwise imaging PHI, patients, visitors, employees, members of the medical staff, and other privileged practitioners.

TBHC will follow security policies, standards, and guidance before using devices, applications, and/or software for photographing, video monitoring, audio monitoring/recording and/or other imaging in order to meet company requirements (*i.e.*, to ensure a specific prohibited technology is not in use).

Cloud storage and devices that default to Cloud back-up/storage are prohibited unless specifically reviewed and approved by the corporate Information Privacy and Security program.

## **DEFINITIONS:**

**Audio Monitoring** - For the purposes of this policy, “audio monitoring” refers to monitoring an individual’s voice using video cameras, cellular telephones, tape recorders, wearable or other technologies capable of capturing audio or transmitting sound for monitoring purposes.

**Audio Recording** – For the purposes of this policy, “audio recording” refers to the capture and storage of the individual’s voice or sounds using capable technology (e.g., video cameras, cellular telephones, tape recorders, wearable technology).

**Photography** - For the purposes of this policy, “photography” refers to recording an individual’s likeness (e.g., image, picture) using photography (e.g., cameras, cellular telephones), video recording (e.g., video cameras, cellular telephones), digital imaging (e.g., digital cameras, web cameras), wearable technology (e.g., Google Glass), or other technologies capable of capturing an image (e.g., Skype, fingerprint or iris scanning technologies). This does not include medical imaging such as MRIs, CTs, laparoscopy equipment, etc. or images of specimens.

**Video Monitoring** – For the purposes of this policy, “video monitoring” refers to monitoring an individual or transmitting PHI or the patient’s likeness using technologies capable of transmitting a video (e.g., video cameras, cellular telephones, web cameras, wearable technology) regardless of whether the transmission is recorded.

**Video Recording** – For the purposes of this policy, “video recording” refers to the capture and storage of the individual’s likeness using video technologies (e.g., video cameras, cellular telephones, web cameras, wearable technology).

## **PROCEDURE:**

Photographs and recordings will not be permanently stored on the device (e.g., camera, wearable technology) or on unencrypted memory cards and must be timely deleted (e.g., within 24 hours) from the device or server. Personal devices such as cellular telephones, cameras, wearable technology, etc. must not be used unless otherwise specified in this policy.

1. **Photographing, Video and/or Audio Monitoring/Recording Patients, TBHC employees, Members of the Medical Staff, or Other Privileged Practitioners by Patients and/or by the Patient’s Visitors:**
  - a. The facility is not required to obtain consent from the patient when the patient is the subject of the photography, video monitoring, and/or audio recording and is performed by the patient or the patient’s visitors.

- b. Consent is not required when a TBHC employee is asked by the patient to photograph, video record and/or audio record the patient using the patient's or patient's visitor's device.
  - c. Patients and/or the patient's visitors are not permitted to take photographs of; video monitor, and/or audio record/monitor other patients, workforce members, members of the medical staff, or other privileged practitioners without consent.
  - d. To the extent a TBHC employee member of the medical staff, or other privileged practitioner is aware of any inappropriate attempt to photograph, monitor, and/or record, then reasonable steps must be taken to ensure that patients, TBHC employees, members of the medical staff, or other privileged practitioners are not photographed, monitored, and/or recorded within the facility by a patient or the patient's family members or visitors.
  - e. (See also C 441 – Photography in the Delivery Room)
2. Photographing, Video and/or Audio Monitoring/Recording Patients by TBHC Employees Members of the Medical Staff, or Other Privileged Practitioners for Treatment, Security, or Health Care Operations Purposes:
- a. The General Consent advises patients that photographs, video, and/or audio monitoring/recording may be taken for patient care, security or for the purposes of health care operations.
  - b. This does not apply to general security surveillance of public areas.
  - c. When a patient is incapacitated, the TBHC will obtain the consent from patient's family and in accordance with C-434 Hospital Consent Policy.
3. Photographing Patients by TBHC Employees, Members of the Medical Staff, or Other Privileged Practitioners to Document Abuse or Neglect:
- a. Photographs may not be used for any other purpose beyond submission to the investigating agency unless otherwise permitted by federal or state law (e.g., for treatment purposes).
4. Photographing/Audio Recording Patients by Law Enforcement or a Public Health Agency:
- a. TBHC will comply with state regulations that govern releasing information to law enforcement or a public health agency.
  - b. Facilities may also disclose photographs and/or audio recordings to law enforcement or a public health agency when required by state law, such as for child abuse and neglect, domestic violence, elder abuse, rape, and similar disclosures required by law.
5. Photographing/Audio Recording Patients by TBHC Employees, Members of the Medical Staff, or Other Privileged Practitioners for Research:
- a. Any use and/or disclosure of photographs or audio recording for research purposes will be in compliance with state and federal regulations concerning privacy and research and must pertain only to research formally approved by the facility.
  - b. If a photograph or audio recording is determined to be identifiable, an Institutional Review Board (IRB) overseeing the specific research project will

determine if additional authorizations are required based on the criteria set forth in the privacy laws.

6. Photographing/Audio Recording Patients for Publicity Purposes:

Facilities **must obtain written authorization** from the patient prior to photographing/audio. (See C 409: Consent to Photograph, Record or Film Patients).

7. Photographing/Audio Recording Patients by the Media:

TBHC will comply with any state regulations which may apply. However, in general, facilities may permit, but are not required, to permit news media to photograph or audio record a patient if the patient consents and the patient's responsible (e.g., attending) physician agrees the patient is medically stable.

8. Photographing Patients for Disaster Relief Efforts and/or Notification and Location Purposes:

In order for facilities to photograph a patient for use in disaster relief efforts and/or notification and location efforts, the facility must follow its "Uses and Disclosures of Protected Health Information for Involvement in the Patient's Care and Notification Purposes" policy and ensure that the patient agrees, the patient was provided the opportunity to object and did not, or it was inferred from the circumstances, based on the exercise of professional judgment that the patient did not object.

If the patient is not present, or the opportunity to agree or object to the use or disclosure cannot practicably be provided because of the patient's incapacity or an emergency circumstance, employees, member of the medical staff, or other privileged practitioner with access to PHI may, in the exercise of professional judgment, determine whether the disclosure of the photograph is in the best interests of the patient.

9. Photographing for Gifts or Commemorative Purposes:

In order for facilities to photograph a patient when the photograph will be given as a gift or sold to the patient or patient's family, **written consent must be obtained**. When a vendor is used to provide these services, the **facility must obtain a written authorization** from the patient or the patient must initiate contact with the vendor. For example, the facility may leave a brochure about the services in the patient's room in order for the patient to contact the vendor directly.

10. Photographing, Video Monitoring, and/or Audio Monitoring/Recording Patients for Telemedicine or the Internet (i.e., official uses only):

Patient informed consent should be obtained in the manner and to the extent required by state laws and regulations prior to transmitting or using patient photographs/audio recordings for telemedicine or on the internet. The facility must follow its normal process for obtaining any required consent when a patient is incapacitated. This section does not pertain to off-site radiology services performed (e.g., x-rays read offsite). Information Security policies and procedures for encryption and other company requirements must be followed.

11. Photography/Audio Recording of Patients or the Patient's Visitors within the Facility by TBHC Employees Members, Members of the Medical Staff, or Other Privileged Practitioners for Personal Use:

Employees, members of the medical Staff, or other privileged practitioners are prohibited from photographing or audio recording patients or the patient's visitors within the facility for their personal use. This includes, but is not limited to, taking pictures to share with friends and/or co-workers, to post on the internet using social media (e.g., Facebook, Twitter), etc.

12. Disclosure:

- a. Photographs and audio recordings should not be released without specific written authorization from the patient, unless the disclosure is for treatment, payment or health care operations purposes or is otherwise permitted or required by law.
- b. Unless prohibited by law, photographs and audio recordings may be released to the patient in accordance with Patients' Right to Access, IP.PRI.004, when the information is part of the designated record set. Facilities must retain the originals in accordance with state law.

**REFERENCES:**

Health Insurance Portability and Accountability Act (HIPAA), Standards for Privacy of Individually Identifiable Health Information 45 CFR Part 164.


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Effective: 3/2019  
Reviewed/Revised:

  
\_\_\_\_\_  
President and Chief Executive Officer

  
\_\_\_\_\_  
Executive Vice President/Network Physician Executive & Chief Medical Officer

  
\_\_\_\_\_  
Senior Vice President, Chief Operating Officer

  
\_\_\_\_\_  
Chief Nursing Executive  
Senior Vice President, Nursing and Patient Care Service

# **EXHIBIT B**

# THE BROOKLYN HOSPITAL CENTER POLICY AND PROCEDURE MANUAL

## **SUBJECT:**

Media Contact, Policy # C-116

## **RESPONSIBILITY:**

SVP, Marketing and Communications

## **POLICY:**

To facilitate factual and accurate media coverage, it is Hospital policy to cooperate with media representatives to the fullest extent possible, while always protecting the privacy of our patients and staff. While this policy applies to all patients, staff shall be aware of special risks to the confidentiality and privacy of celebrity patients and those patients involved in public affairs or news worthy events.

It is the responsibility of the SVP of Marketing and Communications to determine the best manner in which to respond to media inquiries, who should be consulted, and who will represent the Hospital as the official spokesperson. The SVP and the Marketing staff will be responsible for obtaining all required releases and approval of information released to the media.

Media representatives are not permitted in the non-public premises of the Hospital without prior approval of the SVP or a Senior Staff member, including CEO or COO or their authorized designees. Under no circumstances shall a media reporter or photographer be on the premises unless escorted by a Senior Staff member, the SVP of Marketing and Communications or their designees.


In no instance should any employee or member of the Professional Staff make any statement relating to patient care, procedures, services, events, or any Hospital policy for attribution or publication in any medium of communications without the knowledge and authorization of the President and CEO, a Senior Staff member or the SVP of Marketing and Communications.

## **PROCEDURES:**

1. Any employee or member of the Professional Staff contacted by a media representative shall immediately direct the inquiry to the SVP of Marketing and Communications during routine working hours (ext. 8588). Evenings, nights, and weekends, staff should call the Nursing supervisor (ext. 8025), who will contact the administrator on call to communicate such to the SVP by the next morning.

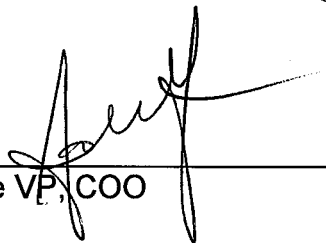


2. All representatives of the media must register at the information desk located in the lobby at the main entrance of the Hospital. The information desk will contact the SVP of Marketing and Communications or a staff member to inform him or her of the presence of the media. If the SVP of Marketing and Communications agrees to allow the media representative into the Hospital, an escort will be sent to the lobby to meet the representative.
3. If a media representative gains access to a patient care area, either by gaining entry to the facility alone or by accompanying a visitor, the personnel on the unit must politely request that the media representative leave the unit, escort them to the elevator, and contact Security and the SVP of Marketing and Communications.
4. If the SVP of Marketing and Communications makes an exception to this policy and allows an interview, photography or recording of a patient, the patient's approval must be obtained in writing. Procedures for obtaining patient written consent for photography or recording are contained in policy #C-409, Consent to Interview, Photograph, Record, or Film.



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President and CEO



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Executive VP, COO



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SVP, Marketing and Communications

Effective 6/1/89  
Reviewed/Revised 10/18/13  
Reviewed/Revised 10/03/16