

## Use of CCTV in Care Homes

By Lauren Fullerton<sup>1</sup> and Arran Dowling-Hussey<sup>2</sup>

### Introduction

CCTV use in care homes has been a recurring topic of discussion and debate, especially when there has been public commentary on those cases where care homes have potentially failed to safeguard their residents. Advocates for CCTV installation usually focus on its obvious ability to provide additional protection for vulnerable individuals. Critics raise significant concerns about the equally obvious potential effects on the privacy and dignity of residents. The latter point is especially made in those cases where surveillance may extend to private spaces such as bedrooms. The care, well being and living conditions of what are usually older people who may be experiencing poor health, in their later years, is an issue not just for those residents but also for their friends and family who visit them. It is of course the case that staff at homes will be captured by any CCTV usage and they have rights in terms of their conditions of work. While some discussions of this type have covered whether it can be appropriate in certain instances to have covert filming in care homes, the commentary below focuses just on the use of open or overt cameras; camera which are visible to staff, residents and visitors.

### Care Quality Commission Position on CCTV.

The *Care Quality Commission*<sup>3</sup> ('CQC') has acknowledged that CCTV can at times be an effective tool for monitoring safety and ensuring quality care. However, it has stressed the importance of exploring less intrusive approaches that might be able to achieve the same goals. The CQC has emphasized that there is a necessity to engage with all stakeholders—that is residents, their families, staff, and other visitors—in any discussions about implementing surveillance so as to be able to understand and address any privacy concerns. Such discussions, and concerns, can, as might be expected, be highly sensitive nature. In light of this backdrop the CQC recommends, wherever possible, that there is consultation with all

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<sup>3</sup> [Care Quality Commission](#) (accessed on February 20, 2026)

individuals that would be directly affected by such surveillance. In instances where surveillance is implemented, it is critical that the decision-making process meticulously, as such matters can be scrutinized during CQC inspections. Another important aspect, to be considered/ dealt with, when there is the introduction of CCTV in care homes is to ensure compliance with data protection laws, particularly the General Data Protection Regulation (GDPR).<sup>4</sup>

CCTV recordings that is collected in care homes will as a matter of certainty include personally identifiable information, such as health-related data about residents. As a result it is essential that care providers adhere to strict compliance to applicable GDPR requirements to ensure lawful data processing. The Information Commissioner's Office<sup>5</sup> (ICO), responsible for overseeing data protection matters, may raise concerns if any aspect of CCTV use fails to comply. Although previous legislation like the Data Protection Act 1998 also required care providers to act responsibly regarding personal data, GDPR introduces additional complexities. It enforces stricter requirements to ensure that data subjects' rights are adequately respected and safeguarded. As part of GDPR compliance, accountability is paramount. Data controllers must clearly state how personal data is being collected/ processed for "specified, explicit, and legitimate purposes," and publicly demonstrate adherence to these principles through proper documentation and processes. Care homes must ensure they identify valid legal bases for processing both personal and special category data under GDPR. Such information should be transparently explained in their privacy notices. Transparency is a fundamental GDPR principle, particularly when dealing with sensitive environments like care homes where CCTV use requires careful handling. For example, if care homes rely on consent as a lawful basis for surveillance, that consent must be explicit and accompanied by straightforward procedures for withdrawal.

### **Consent ?**

In many instances, obtaining informed consent may be impractical due to residents' conditions, such as dementia, which may limit their understanding of what would otherwise be discussed with them. In those cases where residents cannot provide consent, care homes must refer to the Mental Capacity Act<sup>6</sup> and its accompanying Code of Practice. Relying on alternative lawful bases for processing data under Articles 6 and 9(2) of GDPR then becomes

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<sup>4</sup> The GDPR directive has been effective in the UK since May 2018.

<sup>5</sup> [Information Commissioner's Office](#) (accessed on February 20, 2026)

<sup>6</sup> [Mental Capacity Act 2005](#) (accessed on February 20, 2026)

essential. Any decision to implement CCTV—particularly where that is done in personal spaces like bedrooms—must prioritize residents’ needs and interests while strictly adhering to legal requirements related to the processing of sensitive health-related data. Under GDPR, processing such sensitive information can only be lawful if the individual explicitly consents to it for specific purposes. Therefore, significant consideration should be given before implementing CCTV in bedroom areas to ensure regulatory compliance and ethical decision-making aligned with the rights and dignity of residents. This is a complex area where care has to be taken to balance the advantages as have been set out above whilst being mindful of where usage of CCTV can become an adverse issue. It is essential to follow a structured, clear and coherent approach in terms of managing the legal risks which can arise in such circumstances.

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