PROCEDURE SUMMARY

Staff working for EPUT will ensure that they comply with the requirements of the Data Protection Act and safeguard the confidentiality of any personal information which is held.

This procedure should be read in conjunction with the Trust’s Information Governance & Security Policy, Information Sharing & Consent Policy and associated procedures.

The Trust monitors the implementation of and compliance with this procedure in the following ways:

These procedural guidelines will be monitored and reviewed in line with Trust policy every three years and / or in line with changes to national / local guidance. Compliance to this procedure will be undertaken in line with Trust policy and timetables for compliance audits.

The Caldicott Network and Information Governance Steering Committee will oversee the implementation of these procedural guidelines.

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<thead>
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<th>Services</th>
<th>Applicable</th>
<th>Comments</th>
</tr>
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<tbody>
<tr>
<td>Trustwide</td>
<td>✔️</td>
<td></td>
</tr>
</tbody>
</table>

The Director responsible for monitoring and reviewing this procedure is Executive Chief Finance Officer.
CONTENTS

1.0 INTRODUCTION
2.0 PURPOSE OF THE PROCEDURE
3.0 USE OF SMS
4.0 KEY POINTS OF THE PROCEDURE
5.0 CONSENT
6.0 UNDER 16’S
7.0 RISKS
8.0 EQUALITY IMPACT ASSESSMENT
9.0 AUDIT
10.0 TRAINING
11.0 MONITORING ARRANGEMENTS
12.0 RELATED DOCUMENTS

APPENDICES

APPENDIX 1 – CONSENT FORM – FOR USE OF SMS TEXTING

APPENDIX 2 – HOW TO REQUEST ENABLEMENT OF SMS TEXT MESSAGING WITHIN SYSTMONE
ESSEX PARTNERSHIP UNIVERSITY NHS FOUNDATION TRUST

SMS TEXT MESSAGING TO SERVICE USERS PROCEDURE

Assurance Statement

Staff working for EPUT will ensure that they comply with the requirements of the Data Protection Act and safeguard the confidentiality of any personal information which is held.

This procedure should be read in conjunction with the Trust’s Information Governance & Security Policy, Information Sharing & Consent Policy and associated procedures.

1.0 INTRODUCTION

1.1 The Essex Partnership University NHS Foundation Trust (the “Trust”) supports the use of Text Messaging (or SMS – Short Message Service) as a means of communication, subject to compliance with this procedure.

1.2 A ‘user’ in this procedure is an NHS employee or any other person working for or on behalf of Trust.

1.3 Although the basic principles of SMS have been available for a number of years, it is recognised that it is an ever-growing technology. Accordingly, this procedure will be reviewed annually and users should ensure they follow the most recent version of the procedure, which will be available on the Trust’s Intranet

2.0 PURPOSE OF THE PROCEDURE

2.1 This procedure sets out the circumstances in which service users may be contacted by SMS / Text Messaging and the procedures that must be followed when using this method of communication.

2.2 Services must individually agree the need/benefit of using SMS and formally approve and document the implementation of the service. Individual users must not use SMS for health-related purposes without formal documented approval.

2.3 Local/departmental procedures for the use of SMS, which comply with this procedure, must be documented and cover the following topics:-

- Identification of the need or justification for the use of SMS
- Identification of the service or facility to be provided
- The agreement to the use of the service by its intended beneficiaries/recipient
- Clear identification of the associated risks and of the means by which these risks are managed
• Storage and retention procedures (in particular, service user messages or important Trust messages)

### 3.0 USE OF SMS

3.1 SMS can be used for a number of purposes:-

- To send individual clients/patients appointment reminders
- To broadcast messages to a wide-ranging audience, for example, as a health promotion exercise
- To support a lone worker
- Messages to Staff and Team Members to assist staff movements/shifts

3.2 Advantages of using SMS to communicate with service users are:-

- Quick and easy communication without delays
- Reduced postage costs
- Reduced possibility of communications going astray through incorrect postal addresses, changing addresses of service users etc.
- Ability to send appointment reminders to reduce DNAs

The above examples are not exhaustive.

### 4.0 KEY POINTS OF THE PROCEDURE

4.1 SMS or text messaging is an attractive technology for quick communication of short messages and is a widely accepted form of communication. Service users therefore increasingly expect the Trust to communicate with them in this way for simple transactions such as appointment reminders.

4.2 The Trust endorses the use of SMS to communicate with service users provided this is for simple communications such as appointment reminders and provided strict Trust protocol (outlined below) is followed when sending messages.

NHS.net mail accounts should be used when sending out appointments or reminders. This means that teams/services must either set up a generic (team account) or individual nhs.net email account prior to sending SMS messages to service users.

- A Trust approved system with a secure SMS service.
- A generic email account is one that refers to a service or function rather than an individual e.g. EPUTreminders@nhs.net
- Explicit informed consent should be gained from service users prior to any SMS messaging taking place.
- SMS messaging must not be used for confidential/sensitive person identifiable information such as test results or discharge summaries. It must be used only for appointments and other non-person identifiable information.
Under NO circumstances whatsoever should any type of person identifiable patient or staff data is transmitted via SMS.

The SMS message will form part of the patient record and therefore should be stored within the patient record, as appropriate.

5.0 CONSENT

5.1 Where patients or members of the public are the intended recipients/beneficiaries of a health-related service, they must consent to this. Informed consent is gained from the service user prior to the commencement of SMS messaging taking place and potential benefits and risks should be explained before deciding on whether or not to participate.

5.2 This could be achieved at the time of recording a mobile phone number. Retrospectively, this must be done by making contact with the intended recipient before initiating the service for that person.

5.3 Consent should be recorded within the patients’ record.

5.4 Where it is not possible to record the consent within a system, a consent form (Appendix 1 or appendix 2) must be signed and where possible, scanned into the record or stored securely onsite ensuring there is a file note relating to the patient’s consent.

5.5 Service users may withdraw their consent to receive SMS messages at any time by informing their Health Professional.

5.6 If a service user does not have the capacity to consent to SMS messaging then the carer should be consulted as appropriate.

5.7 Disciplinary action may be taken if the procedure is not followed.

6.0 UNDER 16’S

6.1 No messages will be sent to children under the age of sixteen. For children under sixteen years of age it will be taken that the mobile number given is that of a parent-guardian/carer and is acceptable to use if permission to text is given.

7.0 RISKS

7.1 The risks associate with this technology will vary according to the outcome the user is seeking to achieve.

7.2 A Data Privacy Impact Assessment (DPIA) should be completed prior to the implementation of the service.

7.3 In areas where it is felt that risks are unacceptable, the service must not be implemented.
7.4 The following risks must always be taken into account:

Confidentiality risks can be mitigated to a large extent by only sending non-person identifiable messages and by never sending sensitive data such as – ‘your next ante-natal appointment is…’

With particular regard to patients/clients, this must be the primary concern of users.

The following points must be addressed:

- Ensuring delivery to the correct recipient (i.e. the ‘safe haven’ principle; the parent/carer of a child under the age of sixteen; the sender must be sure that the phone number being used is that of the intended recipient – being aware that phones are regularly changed, exchanged or sold)

- Theft of the recipients phone

If a service wishes to contract with an external provider of SMS Test Messaging, it must seek approval from Information Governance and ensure all contractual and security measures are in place before any agreement takes place.

7.5 Contract details of the service user should be check at every appropriate contact to ensure the details are correct within the patient record.

8.0 EQUALITY IMPACT ASSESSMENT

Text messaging can undoubtedly be of benefit to recipients, for example, those with hearing impairment or those who would benefit from appointment reminders. However, this procedure cannot address every issue that may arise from the use of SMS and an Equality Impact Assessment has been completed.

9.0 AUDIT

Auditing procedures will be established by Information Governance, in collaboration with the Head of Performance to ensure;

- The service does not create problems or difficulties for the Trust or for service users.
- An Owner or Local Trust Administrator (LOA) of the NHSmail account should monitor activity, assess risks and audit the effectiveness of the service.
- Risks are identified, regularly re-assessed and adequately addressed
- The service is providing good value to the Trust and to users
- Confidentiality or the Human Rights of the service user are not put at risk
- The procedure will be reviewed at least annually or in line with Trust policies and procedures.
10.0 TRAINING

All staff are responsible for their own actions and must maintain an up to date awareness of legal and ethical issues concerning the subject.

11.0 MONITORING ARRANGEMENTS

11.1 These procedural guidelines will be monitored and reviewed in line with Trust policy, every three years and / or in line with changes to national / local guidance.

11.2 Compliance to this procedure will be undertaken in line with Trust policy and timetables for compliance audits.

11.3 The Caldicott Network and Information Governance Steering Committee will oversee the implementation of these procedural guidelines

12.0 RELATED DOCUMENTS

12.1 Trust Policies and Procedures
   12.1.1 Information Governance & Security Policy and associated Procedures
   12.1.2 Data Protection & Confidentiality Policy and Procedure
   12.1.3 Freedom of Information Policy and Procedure
   12.1.4 Corporate Records Management Policy and associated Procedures
   12.1.5 Records Management Policy and associated Procedures
   12.1.6 Information Sharing & Consent Policy and Procedure
   12.1.7 Mobile Phone Policy and associated Procedures
   12.1.8 Other relevant policies and procedures not mentioned

12.2 National Legal Statutes
   12.2.1 Data Protection Act 2018
   12.2.2 Human Rights Act 2000
   12.2.3 EU Privacy and Monitoring Directive 2000
   12.2.4 Regulation of Investigatory Powers Act 2000
   12.2.5 Freedom of Information Act 2000
   12.2.6 Computer Misuse Act 1990 and amended 2006
   12.2.7 Copyright, Design and Patents Act 1998
   12.2.8 Caldicott 2
   12.2.9 Sexual Offences Act 2003
   12.2.10 Health & Social Care Act 2012
   12.2.11 NHS Constitution
   12.2.12 Records Management Code of Practice
   12.2.13 NHS Information Governance – Short Message Service (SMS) & Texting Guidance
   12.2.13 General Data Protection Regulation

END