

## USE OF MOBILE PHONES POLICY

<b>POLICY REFERENCE NUMBER:</b>	CP54
<b>VERSION NUMBER:</b>	1
<b>REPLACES SEPT DOCUMENT</b>	CP54 Use of Mobile Phones Policy
<b>REPLACES NEP DOCUMENT</b>	IT3 ICT Mobile Computing Device Policy
<b>KEY CHANGES FROM PREVIOUS VERSION</b>	N/A
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<b>IMPLEMENTATION DATE:</b>	01 April 2017
<b>AMENDMENT DATE(S):</b>	13 March 2017; May 2018
<b>LAST REVIEW DATE:</b>	March 2017
<b>NEXT REVIEW DATE:</b>	March 2020
<b>APPROVAL BY CLINICAL GOVERNANCE COMMITTEE:</b>	Chairs Action following August 2017 meeting
<b>RATIFICATION BY FINANCE AND PERFORMANCE COMMITTEE:</b>	21 <sup>st</sup> September 2017
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### POLICY SUMMARY

The purpose of this policy and accompanying procedural guidelines is to set out working arrangements for the use of Mobile Phones within all areas of Trust premises for Staff, Patients and Visitors.

The use of Mobile Phones within patient settings must include a local individual risk assessment which considers whether use would represent a threat to patients', staff and/or visitors safety or that of others. Risk Assessments must include the consideration of the operation of individual phones together with any surrounding electrically sensitive medical devices in critical care situations and privacy and dignity. 'Patient' will be the terminology used throughout this document and will refer to a patient, resident or service user.

#### **The Trust monitors the implementation of and compliance with this policy in the following ways;**

This policy and procedural guideline will be reviewed and monitored for compliance initially for a minimum of 1 year and thereafter 3 yearly or as required by legislation/best practice guidelines. Auditing for compliance will be undertaken a minimum of 3 yearly by operational managers/leads and the results presented to the appropriate Trust committee for consideration.

Following an incident where a mobile phone interferes with medical equipment this must be reported on an Incident Reporting Form and returned to the Integrated Risk Team. The Integrated Risk Team will then be responsible for reporting this to the MHRA and NPSA as required.

Services	Applicable	Comments
Trustwide	✓	
Essex MH&LD		
CHS		

**The Director responsible for monitoring and reviewing this policy is  
Executive Director of Nursing**

**ESSEX PARTNERSHIP UNIVERSITY NHS FOUNDATION TRUST**

**USE OF MOBILE PHONES POLICY**

**CONTENTS**

- 1.0 INTRODUCTION**
- 2.0 SCOPE**
- 3.0 RESPONSIBILITIES**
- 4.0 LEGAL CONSIDERATIONS**
- 5.0 MONITORING OF IMPLEMENTATION AND COMPLIANCE**
- 6.0 REFERENCES**
- 7.0 REFERENCE TO OTHER TRUST POLICIES**

ESSEX PARTNERSHIP UNIVERSITY NHS FOUNDATION TRUST

USE OF MOBILE PHONES POLICY

1.0 INTRODUCTION

- 1.1 Communication with family and friends is an essential element of support and comfort for patients either in hospital or whilst receiving care as an outpatient. Modern technology has made communication relatively easy particularly with the widespread use of mobile phones, text messaging and email. The use of mobile phones by staff, patients and visitors presents an increasing challenge due to new and continually developing technologies, potential connection and interaction to other hardware devices and portability. (DOH January 2009)
- 1.2 Mobile Phones commonly have extended functionality which can include email, internet, camera, audio or video recording capability and music players. Therefore, there is a potential for patients and visitors to use these functions to take inappropriate photographs, recordings or videos. This has a potential to present the greatest interference with patient dignity and privacy.
- 1.3 NHS Protect has produced the good practice advice in the May 2016 Patients Recording NHS staff in Health and Social Care Settings document which covers both covert and overt recording of consultations. Clarification of this document is cited in the Trust Mobile Phone Procedure CPG54.
- 1.4 Ring tones or music played via mobile phones could disturb others who are trying to recuperate and constant 'chatter' of staff, other patients or visitors on mobile phones would be equally disruptive.
- 1.5 Mobile phones could equally interfere with medical equipment and affect their use.
- 1.6 In addition charging mobile phones requires the use of a length of electrical wire which may provide ligature risks.
- 1.7 Consideration of these issues is essential in regards to where mobile phones should and should not be used on Trust premises.

2.0 SCOPE

- 2.1 This Policy and associated procedural guidelines applies to all staff, patients and visitors in all Trust areas, including in community residential areas, day hospitals, resource centers and inpatient settings.
- 2.2. The possession or use of mobile phones is strictly prohibited to all staff, patients, contractors and visitors **entering clinical areas** at Edward House, Christopher Unit, Larkwood Unit, Hadleigh Unit, Brockfield House, Robin Pinto Unit, Woodlea Clinic. When entering patient areas in these units, mobile phones should either be left in staff vehicle, at home or placed in the lockers within the reception area. However where someone needs use of a mobile phone for work related tasks then permission must be requested via security or in their absence one of the integrated clinical leads/unit coordinator for their

## CP54 Use of Mobile Phones Policy

authority. Those not working in any clinical areas of the secure wards at Edward House, Christopher Unit, Larkwood Unit, Hadleigh Unit, Brockfield, Robin Pinto and Wood Lea are able to take their mobile phone into non patient areas only. Staff in Larkwood Unit and on Poplar Ward in Rochford must read this policy in conjunction with the Unit's protocols on the use of Mobile phones.

- 2.3 The use of camera phones within patient areas or patient's own home risks infringing patient confidentiality. Given the difficulty in detecting usage, the consent for taking photographs on a mobile phone of either patients or their confidential information is prohibited. The only exception to this is for staff where a job role or function demands this use for example in community health services staff take wound photographs for monitoring healing.

### **3.0 RESPONSIBILITIES**

- 3.1 All staff are responsible for adhering to this policy and associated procedural guidelines and for reporting any breaches on Datix reporting incident system. (please see Corporate Policy CP3 for further details)
- 3.2 All Managers have a responsibility to ensure that standards are maintained as set out in this policy and accompanying procedural guidelines.
- 3.3 All Managers are responsible for ensuring that information about this policy and procedure is available in their areas to staff, patients and visitors.
- 3.4 The responsibility for using a mobile device remains with the authorised user.
- 3.5 All operational support issues must be reported to the ITT Service Desk for resolution.
- 3.6 All mobile ITT equipment must be approved by ITT Services and will only be issued for the sole use of the recipient individual.
- 3.7 Mobile devices must be returned to ITT Services when their intended use by the recipient individual no longer applies. Devices must not be passed on to other members of staff.

### **4.0 LEGAL CONSIDERATIONS**

#### **4.1 Patient Privacy and Dignity**

There is a legal duty to respect a patient's private life. The Human Rights Act 1998 (HRA) enshrines the right to respect for private and family life and states "there shall be no interference by a public authority with the exercise of this right except such as in accordance with the law and is necessary in a democratic society in the interest of national security, public safety or the economic well-being of the country, for the prevention of disorder or crime, for the protection of health or morals or for the protection of the rights and freedoms of others."

The European Commission has found that the collection of medical data and maintenance of medical records fall within the sphere protected by the HRA. This would, therefore, apply to personal medical information including information which identified a patient such as a photograph.

Permitting the use of mobile phones with cameras in hospitals may not sufficiently ensure medical confidentiality or protect an individual's right to respect for their private life.

Cameras and voice recording facilities should not be used in any way that could cause harm or offence to an individual (member of staff or client) or bring the Trust into disrepute. Under no circumstances should photos or voice recordings be taken without the prior consent of those involved. Such misuse may be subject to the Trust's disciplinary procedures and could also be subject to civil and criminal proceedings.

The risk of breaching confidentiality and dignity must be assessed against patients' rights to communicate with the outside world whilst in hospital, including access to alternative forms of communication where the use of mobile phones is not allowed.

### **4.2 Patient Confidentiality**

The Information Commissioner's Office states that all public and private organisations are legally obliged to protect any personal information that they hold. In relation to this, any individual who takes a photograph of another individual will be processing personal data and must comply with the General Data Protection Regulation 2016.

The use of mobile phones can result in the creation of sensitive personal data and therefore consideration must be given to how effective confidentiality is by monitoring.

### **4.3 Child Protection**

The Children Act 2004 places a duty on the Trust for ensuring the need to safeguard and promote the welfare of children. As such it must be taken into account that mobile phones are a potential risk in that inappropriate photographs/information could be taken, including confidential information pertaining to the child.

### **4.4 Health and Safety**

Mobile phones need to be charged via the mains power supply. Only approved chargers compatible with the make and model of the phone may be used when charging mobile phones on Trust premises. Whether Trust or personal property, the charger must be up to date in relation to Portable appliance testing (PAT) before permitted for use. Failure to observe this requirement will contravene Health and Safety Regulations and could place individuals at risk.

### 5.0 MONITORING OF IMPLEMENTATION AND COMPLIANCE

- 5.1 This policy and procedural guideline will be reviewed and monitored for compliance initially for a minimum of 1 year and thereafter 3 yearly or as required by legislation/best practice guidelines.
- 5.2 Auditing for compliance will be undertaken a minimum of 3 yearly by operational managers/leads and the results presented to the appropriate Trust committee for consideration.
- 5.3 Following an incident where a mobile phone interferes with medical equipment this must be reported on an Incident Reporting Form and returned to the Integrated Risk Team. The Integrated Risk Team will then be responsible for reporting this to the MHRA and NPSA as required.

### 6.0 REFERENCES

- 6.1 The Medicines and Healthcare products Regulatory Agency (MHRA) advises that in certain circumstances the electromagnetic interference from mobile phones can interfere with some devices, particularly if used within 2 meters of such devices. It has issued a number of reference documents relating to this;
- DB 1999(02) Emergency service radios and mobile data terminals: compatibility problems with medical devices. This document covers the impact of radio communications on the safe use of medical devices.
  - DB 9702 Electromagnetic Compatibility of Medical Devices with Mobile Communications. This device bulletin includes the findings of a study conducted into the effects of mobile communications.
  - Safety Notice 2001(06) - Update on Electromagnetic Compatibility of Medical Devices with Mobile Communications: TETRA (Terrestrial Trunked Radio Systems) and Outside media broadcasts from hospital premises.
- 6.2 Using Mobile Phones in NHS Hospitals (DOH January 2009).
- 6.3 The Human Rights Act 1998 (HRA) enshrines the right to respect for private and family life set out in the European Convention on Human Rights (Convention).

#### Further references:

- NHS Protect, Patients recording NHS staff in health and social care settings (March 2016) [Policy@nhsprotect.gsi.gov.uk](mailto:Policy@nhsprotect.gsi.gov.uk).
- [http://www.cqc.org.uk/sites/default/files/20150212\\_public\\_surveillance\\_leaflet\\_final.pdf](http://www.cqc.org.uk/sites/default/files/20150212_public_surveillance_leaflet_final.pdf).
- Department of Health, 'Using mobile phones in NHS hospitals', (2009).
- [http://webarchive.nationalarchives.gov.uk/20130107105354/http://www.dh.gov.uk/prod\\_consum\\_dh/groups/dh\\_digitalassets/@dh/@en/documents/digitalasset/dh\\_092812.pdf](http://webarchive.nationalarchives.gov.uk/20130107105354/http://www.dh.gov.uk/prod_consum_dh/groups/dh_digitalassets/@dh/@en/documents/digitalasset/dh_092812.pdf).
- NHS Protect – Misuse of Social Media to Harass, Intimidate or Threaten NHS Staff May 2016 (Policy@nhsprotect.gsi.gov.uk).

**7.0 REFERENCE TO OTHER TRUST POLICIES/PROCEDURES**

- Adverse Incident Serious Incidents Policy CP3 and CPG3
- Security Policy and Procedural Guidelines RM09 and RMPG09
- Purchase and Use of Mobile Phones and Pagers CP7 and CPG7
- Records Management Policy and Procedures CP9
- Patient/Client Property and Money Procedure FP09/02

**END**