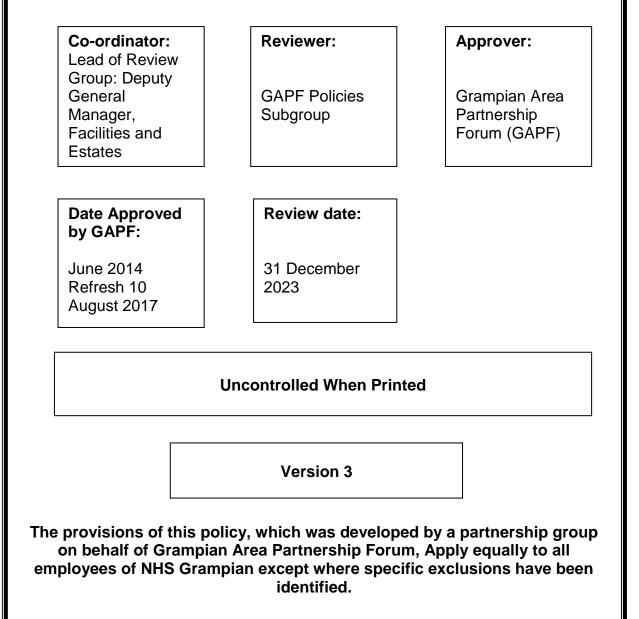




Policy on the Use of Mobile Communication Devices in Healthcare Premises



NHS Grampian

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This document is also available in large print and other formats and languages, upon request. Please call NHS Grampian Corporate Communications on Aberdeen (01224) 551166 or (01224) 552245.

This Police has undergone Equality and Diversity Impact Assessment.

Revision History:

Policy Version	Date Approved by GAPF	Review Date
3	Agreed to be refreshed by the 10 August 2017 GAPF	June 2019
3	May 2022 - Review date amended from 16 August 2021 to 31 December 2023 to allow time for the policy to be reviewed	31 December 2023
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NHS Grampian Policy on the Use of Mobile Communication Devices in Healthcare Premises

1 Introduction

Guidance on the use of mobile communication devices in Scotland was issued by the Scottish Executive Health Department (SEHD) on 2 April 2007 ⁽¹⁾. Drawing on available research, the guidance highlights the benefits from the use of mobile communication devices, indicates that Boards are required to "proactively manage the use of mobile communication devices in their premises" and that a blanket ban on their use is not appropriate. NHS Grampian has based its policy on this guidance.

Benefits from mobile communication devices use in healthcare settings include:

- Expediting patient management and thus improving quality of care.
- Improving the wellbeing of patients by reducing their isolation.
- Providing pocket-access to guidelines and other clinical workflow & decision support.

Risks from mobile communication devices use in healthcare settings include:

- Interference with electro-medical equipment (within short distance)
- Noise pollution
- Confusion of ringtones with equipment alarms
- Breaches of privacy from overheard conversations and camera use. Infection from contaminated handsets.
- Risks from charging devices

2 Purpose

The purpose of this policy is to realise the benefits and make it clear when and where mobile communications can be used, simplifying the management of risks. The balance of benefits and risks will differ between mobile device users and the intended use (phone, camera, internet etc.). This policy seeks to address the main benefits and risks concisely.

3 Scope

- **3.1** This Policy applies in all premises owned or leased by NHS Grampian.
- **3.2** This Policy applies to all staff, patients, visitors and anyone (e.g. contractors, students and volunteers) whose work, study or personal circumstances bring them onto premises owned or leased by NHS Grampian.

- **3.3** This Policy does not cover services contracted by NHS Grampian that operate from their own premises, where these premises are not themselves owned or leased by NHS Grampian.
- **3.4** This Policy applies to the physical use of all mobile communication and computing devices, such as; mobile/smart phones, two-way radios, laptop/tablet computers, and gaming devices.
- **3.5** This policy does not cover the content of electronic communication (messaging) by NHS Grampian Staff directly with patients or third parties. Please see the Electronic Communications Protocol ⁽²⁾, on the Information Security intranet pages.
- **3.6** This Policy does not cover use of mobile devices by NHS Grampian staff while driving. Please see the Guidance on the Safe Use of Mobile Telephones While Driving ⁽³⁾, on the Human Resources intranet pages.

4 **Risks and Mitigations**

4.1 Interference with Electro-Medical Equipment

Risk - Testing by the Medicines and Healthcare products Regulatory Agency (MHRA) has demonstrated that a variety of communication devices can interfere with a wide range of medical equipment ⁽⁴⁾. Typical effects are changes in readings or display, audio buzz and alarms being activated. Handsets used by the ambulance, fire and police services are the most likely to cause interference; Global System for Mobile communications (GSM) mobile phones, less so. Direct contact with equipment (especially older equipment) is more likely to cause issues. WiFi-only devices are not expected to cause a problem with interference.

Mitigation - The risk of interference can be greatly reduced by ensuring that the communication device remains at least arm's length away from the equipment and any cables connecting it to the patient. If the device is brought into this close proximity, this should be for as short a duration as possible. Staff should be aware and patients advised never to place a mobile communications device e.g. on an infusion pump or patient monitor.

4.2 Noise Pollution or Confusion with Equipment Alarms

Risk - The use of phones can add to the ambient noise level and thus potentially cause distress or annoyance to patients and staff. Some ringtones can sound like equipment alarms and thus be distracting for staff.

Mitigation - The risk of noise pollution can be reduced by keeping mobile devices in silent mode where reasonably practicable. Calls should be conducted in an appropriate area.

Risk - Indiscrete use of phones by staff and visitors could result in confidential information about patients being overheard by third parties.

Mitigation - To reduce the risk of calls being overheard, calls by clinicians should be conducted in an appropriate area with a sensible volume and content. Photography, video and audio recording are not permitted other than for clearly defined work purposes ^(5,6).

4.3 Infections from Contaminated Handsets:

Risk - Mobile phones/tablets can be contaminated by potentially pathogenic microbes.

Mitigation - To reduce the risk of infection, staff should avoid mobile devices coming in contact with patients or their surroundings. It is recommended that mobile devices are cleaned after such contact using suitable detergent wipes. Staff must follow hand hygiene policy.

4.4 Risks from Charging Communication Devices:

Risk - Plugs for medical equipment might be removed to make way for a mobile device charger. Chargers in poor condition may be a fire hazard. Chargers may be disruptive in other ways.

Mitigation - Existing policy on the connection of electrical equipment applies ⁽⁷⁾. Patient /Visitor phone chargers should only be used if in good condition, with no visible cracks on the case or damage to cable insulation. Patients or visitors should never unplug NHS equipment.

5 Areas of Permitted Use – Apply GREEN Sign

In general, the use of mobile communication devices away from clinical areas poses negligible risk of interference with medical equipment. However, patients attached to equipment can be moved through public areas and the other risks remain. Apply the GREEN sign in these locations. As a baseline default, use by all is permissible in the following areas:

- Offices and commercial areas
- Catering department and dining areas
- Chaplaincy
- Concourse/Reception/Entrance areas
- Relatives' Accommodation areas
- Staff Accommodation and corridors

6 Areas of Limited Permitted use – Apply Amber Sign

6.1 Baseline Default Uses in Particular Areas

Specific uses can present a higher risk in certain areas. To ensure we enable the benefits of devices, their use should be limited to situations where the benefits outweigh the risks. Therefore, in these circumstances, some uses are acceptable. The appropriate service manager should understand the risks and mitigations, informing key staff and briefing them on how to respond to people asking permission to use mobile communication devices in these locations, before applying the Amber sign there. These areas and uses include:

- Sensitive Information Areas (medical records, eHealth)
- Mortuary, Pharmacy, Laboratories
- Ward Day Rooms and Non Clinical areas
 ☑Voice calls, SMS, apps & Internet permitted.
 ☑Photos or videos NOT permitted.
- Open Ward and Clinical Working Areas
- Theatre Recovery areas (excluding RED areas below)
- High Dependency areas (excluding RED areas below)
 SMS, apps & Internet permitted.
 Voice calls, photos or videos NOT permitted.
- **6.2** Other Uses Permitted by Service Manager See Table 1, Apply Amber Sign.

Service Managers have authority to override the baseline default uses addressed above through a formal risk assessment, if a clinical or wellbeing need in a specific physical area is not addressed above. A risk matrix is provided here so that the Benefits can be readily compared with the Hazards. Service managers must ensure that they consider the relative likelihoods as well as the impacts. Should the Benefit risk outweigh the Hazard risk, the service manager may accept or refuse the risk. Service managers must document the risk analysis undertaken on an RA1 Risk Assessment Form, inform key staff and brief them on how to respond to people asking permission to use mobile communication devices in these locations, before applying the Amber sign.

Table 1 Service Manager Permitted Use Assessment Risk Matrix

IMPACT	Clinical & Wellbeing - Improved patient experience/ clinical outcome, where minor injury (no first aid). No impact on clinical care or mental health. Hazard - Legal and unobtrusive use of devices. Typically within concourse. Relatives or staff accommodation.	Clinical & Wellbeing - Improved patient experience/ clinical outcome, where minor injury or illness or first aid is involved. Clinical or mental health impact is readily resolvable Hazard - Some nuisance and privacy issues. Typically within ward day rooms and non-treatment areas.	Clinical & Wellbeing - Improved patient experience/ clinical outcome, where significant injury or illness and/or mental health. Short term effects on clinical care - expect recovery <1wk. Hazard - Breach of privacy or confidentiality. Open ward, treatment areas or sensitive information areas; eHealth, Records, Labs, Pharmacy.	Clinical & Wellbeing - Improved patient experience/ clinical outcome, where major injury, illness, incapacity, disability or mental health. Long term effects on clinical care - expect recovery >1wk. Hazard - Serious breach of privacy, confidentiality OR interference with equipment where risk to patient recovery. Typically theatre recovery or high dependency areas.	Clinical & Wellbeing - Improved patient experience/ clinical outcome where patient is terminal or has major permanent incapacity. Continued long term effects on care or mental health. Hazard - Interference with equipment or alarms - where risk to patient life. Operating theatres, within arm's length of high dependency patients/ drug dispensing equipment.
happening)	Negligible	Minor	Moderate	Major	Extreme
Certain - This is expected to occur frequently/ in most circumstances. e.g. No signage at all, all uses permitted	Medium	High	High	V High	V High
Likely - Strong possibility that this could occur. e.g. Not well signed.	Medium	Medium	High	High	V High
Possible - May occur occasionally. Reasonable chance. e.g. Well signed, but not in each individual area.	Low	Medium	Medium	High	High
Unlikely - Not expected to happen. e.g. Signage clear in numerous entrances/ each area.	Low	Low	Medium	Medium	High
Rare - Can't believe this event would happen. Will only happen in exceptional circumstances.	Low	Low	Low	Medium	Medium

This matrix is only required if the need for mobile devices does not conform to the uses already described in Sections 5, 6, or 7. Where there is any doubt as to the interference caused to a piece of electro medical equipment, please NHS Grampian's Medical Electronics Service (Medical Physics) who are available to provide advice and support on this matter: <u>nhsg.medphysicsmobiles@nhs.net</u>

7 Areas of No Permitted Use – Apply Red Sign

There are a limited number of areas where a ban on all mobile device use is required. The appropriate service manager should apply the Red sign in these locations. No use is permitted and devices must be switched off or run in WiFi only mode.

Within theatre induction and operating rooms.

 \boxtimes Within arm's length of high dependency patients, scanners or dispensing equipment. \boxtimes Other areas deemed inappropriate by service managers.

8 Advice to Patients

Patients connected to electro-medical equipment who leave the clinical area for social reasons or who are under NHS Grampian's care in their own home, should be advised of the risks mobile communication devices pose and ensure their medical equipment remains arm's length away from mobile devices.

9 Signage

Service managers have a duty to ensure that the signage in their area is appropriate, clear and compliant with this policy. Signage must not be overly prolific but must adequately direct mobile communication device users to use their equipment appropriately.

Estates will govern signage in spaces that are not defined within specific departments or services, e.g. concourses, entrances, main corridors etc.

Signs will be displayed in all areas within the scope of this Policy to indicate level of permission for the use mobile communication devices (Appendix 1). Signs of the corporate design are to be obtained through the procurement catalogue (Pecos) as a zero-cost

non-catalogue requisition. Signs created or obtained by other means are not permitted.

10 Roles and Responsibilities

- **10.1** The Chief Executive has overall responsibility for the application of this policy.
- **10.2** Sector/IJB/Directorate Management Teams are responsible for ensuring adoption in their respective areas of responsibility.
- **10.3** Devolved line managers are responsible for local signage, application and enforcement within the physical areas they manage.
- 10.4 Staff members are expected to follow this Policy and encourage safe, responsible use of mobile devices by others. Mobile communication devices provided by NHS Grampian should be restricted to work purposes and privately owned devices for social and domestic purposes (in own time) unless agreed by line manager. Staff failing to follow this Policy may be subject to Disciplinary action.

- **10.5** Patients and Visitors are expected to use mobile devices in a safe and responsible manner with polite guidance from staff. Where issues arise and cannot be dealt with locally, NHS Grampian does not expect any member of staff to place their personal safety and/or dignity at risk. Follow normal escalation procedures, such as informing local Security Staff or the Police. Staff witnessing non-compliances should report these as incidents through the Datix incident reporting system.
- **10.6** The Head of Electronics and the IT Security Officer are responsible for reviewing technical guidance and the management of risks defined within this policy.
- **10.7** The Head of Information and Communication Technology Services is responsible for initiating formal review of this Policy on receipt of new technical guidance or at an agreed frequency.

11 Monitoring and Evaluation

Monitoring of the Policy will be carried out on an on-going basis by Sectors /IJB's/Directorates with feedback given as per Policy Review process. Evaluation of the Policy and stated purpose will be part of the review process.

12 References

- 1. 'Guidance on the Use of Mobile Communication Devices in Healthcare Premises', Health Facilities Scotland, September 2007.
- 2. 'NHS Grampian Electronic Communications Protocol', NHS Grampian, Due August 2013.
- 3. 'Guidance on the Safe Use of Mobile Telephones While Driving', NHS Grampian, January 2005.
- 4. MDA DB 9702, 'Electromagnetic Compatibility of Medical Devices with Mobile Communications', Medical Devices Agency, March 1997.
- 5. 'Policy for the Photography and Video Recordings of Patients', NHS Grampian, May 2005.
- 6. 'Consent Form: Non-clinical Use of Photographs, Video, Audio or Written Information', NHS Grampian, April 2011.
- 7. 'Management of Equipment Policy', NHS Grampian, April 2009.

Appendix 1 – Signage

NHS Grampian Policy on the Use of Mobile Communication Devices in Healthcare Premises

'OK sign'

A5 size, removable vinyl, artwork approved February 2010 (CGD 080231) NHSG Reordering code: **ZKK003**

or or image: ima NHS Grampian Policy on the Use of Mobile Communication Devices in Healthcare Premises

'CHECK FIRST sign'

A5 size, removable vinyl, artwork approved February 2010 (CGD 080231) NHSG Reordering code: **ZKK001**



NHS Grampian Policy on the Use of Mobile Communication Devices in Healthcare Premises

'NO sign'

A5 size, removable vinyl, artwork approved February 2010 (CGD 080231) NHSG Reordering code: **ZKK002**

