Family Nursing & Home Care

Mobile Device Policy

August 2022

Document Profile

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Version control / changes made

Date	Version	Summary of changes made	Author
01.05.21	1.1	Update of Policy Formatting Updated Roles & Responsibilities	C Whelan
18.02.22	1.2	Roles & responsibilities updated. Terminology for Trustees changed. New Staff Member form added. Paragraph included to cover the use of devices whilst sick	C Whelan

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1. INTRODUCTION

1.1 Rationale

Family Nursing & Home Care (FNHC) recognises the advantages in the utilisation of portable devices and other handheld devices provided for staff during the performance of their daily duties. As such, this document provides guidance on the use of such devices within the organisation.

It is also recognised that Remote Access is a valuable method for employees to connect to the Family Nursing & Home care network resources, whilst working away from the base premises.

This document covers the use of all portable computing storage devices and remote access for both organisation and personal owned devices.

The aim of this policy is to support staff that use mobile devices for work purposes by ensuring that they are aware of information security issues and apply any procedures accordingly. This policy should therefore be read in conjunction with the Information Security policy and the States of Jersey Bring Your Own Device Policy.

1.2 Scope

This policy applies to all staff employed by Family Nursing & Home Care, including Trustees, bank staff and students on temporary placement.

1.3 Role and Responsibilities

Chief Executive Officer

The Chief Executive Officer is responsible for allocating resources for mobile devices.

Director of Governance, Regulation and Care

The Director of Governance, Regulation and Care has a particular responsibility for ensuring that FNHC corporately meets its legal responsibilities, and for the adoption of internal and external governance requirements.

Senior Information Risk Officer (SIRO)

The Senior Information Risk Owner: The SIRO is FNHC's CEO and has overall responsibility for the organisation's Information Risk Management. The SIRO also leads and implements the IG risk assessment and advises the Trustees Board on the effectiveness of IRM across the organisation.

Head of Quality, Governance & Care

The Head of Quality, Governance & Care is the Caldicott Guardian and is responsible for drawing up guidance for good practice and promoting compliance with this policy.

Head of Information Governance and Systems

They are responsible for ensuring a fit for purpose and ratified policy is in place and for ensuring that the procedures and controls required in support of this policy are developed and maintained. They are responsible for managing associated risks and escalating to the appropriate person where necessary. They also act as the organisation's Data Protection Officer (DPO).

Line Managers

Line Managers are responsible for authorizing Mobile Device usage for new starters and advising of staff leaving.

All Users

All users with remote access and/or use of a mobile device are responsible for complying with this policy and associated standards. All staff must safeguard organisational equipment and information resources, and notify the organisation immediately of any security incidents or breaches.

All users of information systems, devices and applications via the network must ensure they are aware of and comply with their security responsibilities.

Head of Finance

Head of Finance is responsible for monitoring mobile data usage and allocating.

Facilities Administration Officer

Is responsible for the management and issuing of Mobile Telephones.

2. POLICY

This Policy forms part of staff member's contractual obligations and code of conduct.

The policy ensures that any use of a portable device, mobile communications or remote access working adheres to the following principles:

- To provide secure access to the organisations information systems
- To preserve the integrity, availability and confidentiality of the organisations information and information systems
- To manage the risk of serious financial loss, loss of patient and public confidence or other serious business impact which may result from a failure in security.

The policy also details the requirements for the use of portable mobile devices and removable media by Family Nursing & Home Care and details the requirements that must be in place for the secure operation of such devices.

2.1 Approved Mobile Devices

The following devices are approved for use by Family Nursing & Home Care:

- iPads
- Mobile Android Devices
- Laptops

2.2 Eligibility for a Mobile Device

FHNC are committed to ensuring that adequate communication facilities are available to its staff in order for them to carry out their normal daily duties. Devices will be allocated depending upon the person's role and the location in which they normally work.

The criteria examples to be issues with a mobile device is:

- staff whose work entails predominately working alone in the community
- staff who require access to Electronic Patient Records
- out of hours staff including any staff on the on call rota
- staff that on an occasional basis request to work from home to do a particular piece(s) of work

2.3 Training

All staff using a mobile device will receive training in their use if appropriate.

All staff will receive training in confidentiality and information governance as part of their Induction and will be required to do complete the annual mandatory training.

2.4 Mobile Device User Responsibilities

In receiving a mobile device from Family Nursing & Home Care the individual receiving and using the device accepts that the device can be used to communicate through all channels including voice calls, emails and texts and where appropriate enabled web applications, during working hours.

It is the responsibility of staff to ensure that mobile devices are kept safe and secure

The mobile device is the property of FNHC and as such it is a requirement that staff must take good care of it.

2.5 Security, Data Protection and Confidentiality

Staff should take all reasonable steps to ensure that it is not damaged, lost or stolen. In the event of accidental damage or loss, users may be required to pay for a replacement device.

Any losses, information security incidents, damage or misuse should be reported immediately to the, Head of Information Governance & Systems and the Premises/Facilities Officer, in order for the device to be disabled. The Head of Information Governance will contact the Government of Jersey IT Department if required.

If a device is stolen, staff will be expected to report the theft to their Line Manager/ On Call Manager if necessary, the Head of Information Governance and Systems and if appropriate the Government of Jersey IT Department and Jersey Police Department.

An incident form should also be completed on ASSURE and it is the responsibility of the staff member to inform their manager immediately.

In order to comply with the Data Protection Jersey Law, any data used must be secure and can only be accessed by staff using mobile devices.

All staff are required to meet all of FNHC Information Governance requirements as detailed in Information Governance policies, procedures and guidelines, regardless of where they work from. All staff with computer access must abide by the Government of Jersey Acceptable Use Policy and other Information Security Policies. https://soj/DocsForms/Policies/Pages/InformationSecurityPolicies.aspx

Individuals who have personal data of any kind stored on a corporately issued mobile device must be aware that in the event of loss of the device the above data wipe will include removal of all personal data.

The Finance Department will monitor mobile device usage for excessive use and will bring any issues to the attention of the staff member and their manager.

Each device is issued on a personal, individual basis only and mobile devices will be recorded on the Family Nursing & Home Care Information Asset Register.

All mobile devices will use a remote access software to enable access to the Family Nursing & Home care email, a minimum level of encryption is enforced. This will automatically apply a PIN number or password and will prompt the user to change the password on a regular basis.

It is the responsibility of the device user to ensure that the PIN number or password is kept up to date, remembered and kept secure at all times and never shared.

Staff should not leave the equipment unattended unless it is in a secure place.

Devices can be secured by leaving in a locked drawer within a locked / secure office or by being stored out of sight at home.

When transporting the equipment in the car it should be stored correctly and out of site i.e. a mobile media device such as a laptop should be placed in its case and stored in the locked boot.

Staff **must not** leave any mobile media device in a vehicle overnight. It must be stored securely in the house or in a locked drawer in a secure office.

Staff are responsible for backing up all personal information. Family Nursing & Home Care will not accept liability for the loss of any personal data when it is deemed necessary to wipe the device to protect information assets or if a wipe is accidently conducted.

In the event of loss of the device, all data including apps will be wiped. Family Nursing & Home care is not responsible for reimbursement of any costs for personally purchased apps or loss of any personal data.

2.6 Apps Management

Downloading of personal apps onto a corporately issued mobile device is not allowed. Family Nursing & Home care would not encourage staff members to download apps for personal use onto a corporately issued mobile device.

Apps for work usage must not be downloaded onto corporately issued mobile devices unless they have been approved. If a member of staff believes that there are clinical apps or other technologies that could benefit their patients/clients. Agreement to use Apps classified as medical devices needs to be sought from the Medical Devices Group using the process outlined in the new Medical Devices Policy

Whilst apps are a useful tool to aid in clinical decision making **they should not be used as a sole basis for clinical decision making**. It is the clinician's professional responsibility to justify the treatment or procedure that they have undertaken. The sole use of an app to support this is not valid justification.

2.7 Screen Savers, Background Photos and other Media

Inappropriate media may not be used as a screensaver, background photo, sounds, etc. Inappropriate media includes, but is not limited to, the presence of guns, weapons, pornographic materials, inappropriate language, tobacco, alcohol, drug, gang-related symbols or pictures and will result in disciplinary actions.

2.8 Use of Camera Enabled Mobile Devices

Some mobile devices have the ability to take photographs/videos. This function should not be used for photographs/videos of an individual's care and treatment unless the device has encryption enabled and it is clinically appropriate to do so.

If the photography facility is used as part of the recording of an individual's care and treatment, the device user must ensure that the consent of the individual has been collected prior to taking any photograph/video. Refer to the Clinical Photography Policy for more details.

The individual needs to fully understand why the photograph/video is being taken and the member of staff plans to do with it, in particular if it will be shared. A record of the consent must be entered into the individual's care record. It is good practice to show the individual the photograph/video once taken. Photographs should then be emailed to yourself with the date and time and location recorded and following successful transmission must be deleted from the mobile device.

2.9 Policy Non-Compliance

Policy non-compliance will be regarded as serious or gross misconduct, which will result in disciplinary action being taken.

3. PROCEDURE

3.1 Receiving a Mobile Device

iPads/laptops and phones will be distributed on commencement of employment. It is the responsibility of Line Managers to request the equipment required using the New Staff Requirement Form (Appendix 2). FNHC will not release a mobile device without receiving a signed Declaration of Use Form (Appendix 1).

3.2 Returning a Mobile Device

Leavers should return the mobile device and any accessories, including chargers, to their line manager before their final working day. The Line Manager is responsible in ensuring that the staff member has time as part of their exit to return the devices to the appropriate person so that they can be restored back to factory settings. Failure to comply will result in the user being invoiced for the full cost of the modern equivalent handset and any other associated costs.

3.3 Using a Mobile Device

Upon being issued with a mobile device, members of staff will be asked to read this policy and will be required to complete the declaration of use form which will be retained.

The Corporate Department will monitor the device usage for excessive use and will bring any issues to the attention of the staff member and their manager.

The mobile device is intended for the exclusive use of the member of staff to whom it is issued. It should not be loaned or shared with anyone else including family members, friends or other members of staff.

The use of this device will be monitored and any misuse could result in disciplinary action. The sim-card issued with the mobile device must be used only with corporate devices and must not be used with personally owned equipment unless otherwise authorised through the immediate line manager and the IT Department.

Staff who are absent from work because they are unwell must not access devices/email/systems unless they have explicit permission from their Operational Lead/Department Manager.

3.4 Data Usage

All devices have limited data which will be monitored for usage.

3.5 Care of the Mobile Device

It is the responsibility of the device user to keep the battery fully charged and for the device to be kept switched on during working hours.

It is the responsibility of the device user to ensure that mobile device chargers are only used for charging the correct devices. Mobile device chargers should only be plugged in for the duration of charging the device. Mobile device chargers left plugged in are a potential fire risk when not charging a device. When not in use, chargers should be disconnected and stored appropriately.

Members of staff who have been corporately issued mobile devices, should remember to:

- ensure they have their device with them when away from their office base
- ensure the device is switched on and they are able to receive calls, text messages and emails, where appropriate, in line with their agreed hours of work
- regularly check their device, particularly if it has been switched off for a period of time or if they have been in a black spot

- ensure that they regularly clean their device for infection and prevention purposes.

If staff members are experiencing problems with their Lap top or iPad's they should contact the Head of Information Governance & systems. The Facilities Administration Officer should be contacted for any Mobile Telephone issues.

3.6 Carrying and Transporting

Staff are to keep their device in the provided case (if provided) that has sufficient padding to protect the device from damage due to normal treatment and that provides a suitable means for carrying the device.

3.7 Mobile Devices and Driving

For safety reasons staff must not use a hand held mobile device whilst driving any vehicle. It is illegal to do so

It is not Family Nursing & Home Care policy to provide hands-free equipment and the organisation does not recommend using mobile devices in hands-free mode or with hands-free attachments whilst driving.

Family Nursing & Home care will not take responsibility or be liable in any way for legal charges or other consequences of using a mobile device whilst driving.

3.8 Roaming Arrangements and International Barring

All mobile devices will be configured for local access only.

Mobile devices must not be taken off island without prior approval from senior management. If approval is given, all data roaming is to be switched off and access to emails should only take place with Wi-Fi access.

Staff must be aware that if email is used whilst abroad it will cost extra money and the cost may be recoverable personally from the device holder.

4. CONSULTATION PROCESS

Name	Title	Date
Claire White	Head of Quality Governance & Care	27/07/22
Elspeth Snowie	Clinical Effectiveness Facilitator	27/07/22
Michelle Cumming	Operational Lead for Child & Family	27/07/22
Tia Hall	Operational Lead for Adult Services	27/07/22
Claire Stewart	Operational Lead for Rapid Response and Rabblement	27/07/22

Elaine Walsh	Director of Finance	27/07/22
Justine Le Bon Bell	Education Lead and Practice Development Nurse	27/07/22
Mo de Gruchy	Quality and Performance Development Nurse	27/07/22

5. IMPLEMENTATION PLAN

A summary of how the document will be implemented with time frame.

Action	Responsible Person	Planned timeline
Email to all Staff	Secretary/Administration Assistant (Quality and Governance Team)	Within 2 weeks following ratification
Policy to be placed on organisation's Procedural Document Library	Secretary/Administration Assistant (Quality and Governance Team)	Within 2 weeks following ratification

6. MONITORING COMPLIANCE

Compliance with this policy and its associated standards, guidelines and procedures will be monitored by the Head of Information Governance & Systems management process for Mobile Devices.

The Head of Information Governance & Systems will manage risks relating to areas of concern and/or non-compliance with this policy and escalate them to the Director of Governance, Regulation and Care if required.

The organisation reserves the right to audit correct usage at any time.

The Finance Department will undertake regular checks of the financial arrangements related to billing.

7. EQUALITY IMPACT STATEMENT

Family Nursing & Home Care is committed to ensuring that, as far as is reasonably practicable, the way services are provided to the public and the way staff are treated reflects their individual needs and does not discriminate against individuals or groups on any grounds.

This policy document forms part of a commitment to create a positive culture of respect for all individuals including staff, patients, their families and carers as well as community partners. The intention is to identify, remove or minimise discriminatory practice in the areas of race, disability, gender, sexual orientation, age and 'religion, belief, faith and spirituality' as well as to promote positive practice and value the diversity of all individuals and communities.

The Family Nursing & Home Care values underpin everything done in the name of the organisation. They are manifest in the behaviours employees display. The organisation is committed to promoting a culture founded on these values.

Always:

- ✓ Putting patients first
- ✓ Keeping people safe
- ✓ Have courage and commitment to do the right thing
- ✓ Be accountable, take responsibility and own your actions
- ✓ Listen actively
- ✓ Check for understanding when you communicate
- ✓ Be respectful and treat people with dignity
- ✓ Work as a team

This policy should be read and implemented with the Organisational Values in mind at all times. See appendix 3 for the Equality Impact Assessment for this policy.

8. GLOSSARY OF TERMS

For the purpose of this policy the following terms are used to describe a mobile device:

Mobile device
A mobile device is a device that enables functionality away from the main base of work.

Mobile phone
A mobile phone is a device that allows the ability to make telephone calls and send and receive text messages without the need of a physical connection to the telephone network.

iPhone / Smartphone
An iPhone / smartphone provides the same functionality as a mobile phone with the additional ability of being able to send and receive emails and enabling the use of general purpose applications (apps).

iPad
A tablet computer, or simply tablet, is a mobile computer with display, circuitry and battery contained within a single device.

Laptop
Portable and compact personal computer with the same capabilities as a desktop computer

9. REFERENCES

None

APPENDIX

Appendix 1 Declaration of Use by a Mobile Device User

Declaration of Use by a Mobile Device User

Signing this declaration confirms that you have read and will comply with Family Nursing & Home Cares Mobile Devices policy.

I confirm that in consideration of Family Nursing & Home Care issuing me with a business iPad / Mobile Phone and/or Smart Device I agree to the following:

- that I have read the Mobile Device Policy document in full and understand the terms of use and my responsibilities. I agree to the terms in their entirety. I make no claim on Family Nursing & Home Care and States of Jersey to protect any personal data
- that I understand that violations of this agreement can result in sanctions ranging from withdrawal of services, disciplinary procedures and legal action

Please complete all of the following boxes.

Employees Name PLEASE PRINT	Date
Job Title	Work phone number
Division /Department	
Employees Signature	

Appendix 2 New Staff Requirements – IT, Equipment, Training

New Staff Requirements – IT, Equipment, Training

Title	**Surname**
First Name	**Division**
Team/Corporate	**Job Title**
Date Access Required	**User Base Location**

Equipment requirements

ID Badge		**Sphygmomanometer**	
Keys		**Stethoscope**	
Mobile Phone		**Digital Thermometer**	
iPad		**Pulse Oximeter**	
Laptop		**Glucometer**	
Scales		**Equipment bag**	
Height/Length Measure		**States Housing Fob**	
Parking Permit		**Uniforms**	

Please specify the users IT requirements

Desk Phone		Voicemail	
Mobile Phone		iPad	
Email account		Mobile Iron (to access emails on iPad)	
EMIS		Care Planner	
Care Plus		Assure	
Trak Care		HRIS	
Donorflex		Path Lab	
JD Edwards		Other (please specify)	

Please specify mandatory and statutory training requirements

Generic training		**Service Specific Training (Clinical staff)**	
Non-clinical staff		District Nurse Team	
Clinical staff – Non-Registered Practitioners		Rapid Response Team	
Clinical staff – Registered Practitioners		Children's Community Nursing Team	
		School Nurse Team	

Additional Information (please add any relevant information that may be required)

Authorising Manager

Name	**Signature**

This section to be completed by Head of IG & Systems/Facilities/

Date Form Received	**Date Request Made**	**Date of all action completed**
Additional Information:		

Appendix 2 Equality Impact Screening Tool

Stage 1 - Screening			
Title of Procedural Document: Mobile Device Policy			
Date of Assessment	27/07/22	Responsible Department	Governance
Name of person completing assessment	Claire Whelan	Job Title	Head of Information Governance & Systems

Does the policy/function affect one group less or more favourably than another on the basis of :		
	Yes/No	**Comments**
• Age	No	
• Disability Learning disability; physical disability; sensory impairment and/or mental health problems dementia	No	
• Ethnic Origin (including hard to reach groups)	No	
• Gender reassignment	No	
• Pregnancy or Maternity	No	
• Race	No	
• Sex	No	
• Religion and Belief	No	
• Sexual Orientation	No	
If the answer to all of the above questions is NO, the EIA is complete. If YES, a full impact assessment is required: go on to stage 2, page 2		

Stage 2 – Full Impact Assessment			
What is the impact	**Level of Impact**	**Mitigating Actions** **(what needs to be done to minimise / remove the impact)**	**Responsible Officer**

Monitoring of Actions
The monitoring of actions to mitigate any impact will be undertaken at the appropriate level