

## MOBILE COMMUNICATION DEVICES POLICY

(Within NHS Lanarkshire Premises)

<b>Author:</b>	<b>Head of Technical Services</b>
<b>Responsible Lead Executive Director:</b>	<b>Director of Planning, Property &amp; Performance</b>
<b>Endorsing Body:</b>	<b>Performance Resources Planning Committee</b>
<b>Governance or Assurance Committee</b>	<b>Healthcare Quality Assurance and Improvement Committee</b>
<b>Implementation Date:</b>	<b>October 2021</b>
<b>Version Number:</b>	<b>6</b>
<b>Review Date:</b>	<b>October 2024</b>
<b>Responsible Person</b>	<b>General Manager PSSD</b>

<b>CONTENTS</b>		<b>Page No</b>
i)	Consultation and Distribution Record	4
ii)	Change Record	4
<b>1.</b>	<b>INTRODUCTION</b>	<b>5</b>
<b>2.</b>	<b>AIM, PURPOSE AND OUTCOMES</b>	<b>5</b>
<b>3.</b>	<b>SCOPE</b>	<b>6</b>
3.1	Who is the Policy intend to Benefit or Affect	6
3.2	Who are the Stakeholders	6
<b>4.</b>	<b>Principal Content</b>	<b>6</b>
4.1	Policy Statement	6
4.2	Policy Principles for Mobile Communication Devices	7
4.3	Policy Considerations	7
4.3.1	HFS Guidance	7
4.3.2	Photographic Capabilities	8
4.3.3	Environmental/Safety Considerations	8
4.4	Framework	8
4.4.1	Patient Privacy and Dignity	8
4.4.2	Patient confidentiality	8
4.5	Nuisance	9
4.6	Medicines and Healthcare Products Regulatory Agency (MHRA) statement	9
4.7	Unapproved devices with resultant health and safety risks	9
4.8	Confusion with alarms and resultant health and safety risks	9
4.9	Infection Prevention and Control	10
4.10	Use of mobile communication devices in NHS Lanarkshire	10
4.11	Prohibited Areas	10
4.12	Permitted Areas	11
4.12.1	Health Centres and Community Clinics	11
4.12.2	Hospital sites: Patients and Visitors	11
4.12.3	Hospital Sites: Implications For Staff	11
4.12.4	Use of Camera Phones and Related Devices	12
<b>5.</b>	<b>Accountabilities and Responsibilities</b>	<b>13</b>
5.1	All staff	13
5.2	The Chief Executive	13
5.3	The Executive Director	13
5.4	The Executive Leads Health and Social Care Partnership	13
5.5	Directors of Nursing (Acute & HSCP)	13
5.6	Site Directors/ General Managers and Named Senior Managers	13
5.7	Charge Nurse/Department Managers	13
5.8	Human Resources	13
5.9	Partnership	13

<b>6.</b>	<b>Resource Implications</b>	14
<b>7.</b>	<b>Communication Plan</b>	14
<b>8.</b>	<b>Quality Improvement – Monitoring and Review</b>	14
<b>9.</b>	<b>Equality and Diversity Impact Assessment</b>	14
<b>10.</b>	<b>Summary of FAQs</b>	15
<b>11.</b>	<b>Archival of Documents</b>	
<b>12.</b>	<b>References</b>	15
	<b>Appendices</b>	
Appendix A	Prohibited Areas Signage	16
Appendix B	Permitted areas Signage	17
Appendix C	Poster summarising the Restrictions	18

Uncontrolled when printed

<b>CONSULTATION AND DISTRIBUTION RECORD</b>	
<b>Contributing Author / Authors</b>	<ul style="list-style-type: none"> <li>• Harry S Campbell Head of Technical Services</li> </ul>
<b>Consultation Process / Stakeholders:</b>	<ul style="list-style-type: none"> <li>• Head of Medical Physics</li> <li>• Director, Information and Digital Technology</li> <li>• Director, Planning, Property &amp; Performance</li> <li>• General Manager, PSSD</li> <li>• Nurse Director Acute Division</li> <li>• Nurse Director - North Lanarkshire Health &amp; Social Care Partnership</li> <li>• Nurse Director - South Lanarkshire Health &amp; Social Care Partnership</li> <li>• Associated Director – Nursing</li> <li>• Associated Director – Mental Health and Learning Difficulties</li> <li>• Director of Quality</li> </ul>
<b>Distribution:</b>	<ul style="list-style-type: none"> <li>• Site Directors/General Managers</li> <li>• Heads of Department and Ward Managers</li> <li>• All staff through FirstPort – NHSL Web Portal</li> </ul>

<b>CHANGE RECORD</b>			
<b>Date</b>	<b>Author</b>	<b>Change</b>	<b>Version No.</b>
April 2009	PSSD	Policy updated to take account of new advise notes	2
July 2012	H S Campbell	Document transferred to NHS Lanarkshire policy format with no substantial changes	3
September 15	H S Campbell	Reviewed Policy no substantial changes. Updated Job titles, Endorsing Body name, Governance or Assurance Committee name, References, Prohibited Areas and Monitoring and Review.	4
June 2018	H S Campbell	Reviewed Policy no substantial changes. Updated Job titles, Accountabilities and Responsibilities; Insert Para on Infection Prevention and Control. Insert Appendix C No amendments were required to meet the new GDPR legislation.	5
September 21	D Hunter	Reviewed Policy no substantial changes. Updated Job titles, Accountabilities and Responsibilities. Updated to new template.	6

## 1. Introduction

In 2001 the Scottish Executive Health Department issued HDL (2001) 21 giving guidance to the NHS restricting the use of mobile communication devices (MCDs) in healthcare premises where they could possibly interfere with sensitive equipment. This guidance has now been updated and a total ban on the use of mobile communication devices in healthcare premises is no longer appropriate.

There have been significant advances in technology during the past few years, particularly in the area of wireless devices such as mobile phones (many of which now include camera/video capability and sound recording), laptop computers, palmtops and other devices fitted with GPRS and/or 3G Hiperlan).

It is recognised that the use of modern mobile phones has little or no effect on modern clinical equipment unless operated within close proximity, **less than two metres**.

There may be still significant numbers of older medical devices in use which do not conform to the modern immunity levels and are therefore much more vulnerable to interference. Although the risk is not as great as first envisaged, there does remain an element of risk which must not be ignored when using mobile phones and other digital equipment within proximity to medical equipment.

All mobile phones and devices fitted with GPRS emit radio frequency signals in standby mode as well as when in use. Their power increases when an incoming call or other communication from the base station is received, whether the call is answered or not. The power radiated by these devices also increases when used in poor signal strength areas.

Health Facilities Scotland (HFS) produced guidance on the use of mobile communication devices in healthcare premises in February 2008.

## 2. Aim, Purpose and Outcomes

This policy is intended to provide information on the safe use of mobile communications to include radios used by the emergency services, private mobile radios, mobile phones and communication systems used by the media.

Mobile communications devices consist of mobile phones, two-way radios, wireless computers (Tablets etc) and other communication devices which can transmit a radio signal.

The objective of this policy is to ensure the appropriate balance is achieved between the competing needs of promoting:

- communication with carers, friends and relatives;
- recovery;
- professional standards of behaviour; and protecting;
- the rights of all individuals;
- confidentiality;
- people from abuse; and
- providing a safe diagnostic and therapeutic environment.

### **3. Scope**

This policy is aimed at the use of mobile communications by individuals employed by NHS Lanarkshire (e.g. porters, technicians, nursing, consultants), mobile communications within Lanarkshire's premises by patients and visitors and the use of mobile communications by individuals or groups working in partnership with NHS Lanarkshire who rely on such communications to provide a service (Police, Fire & Rescue and Ambulance Services).

#### **3.1 Who is the Policy intended to Benefit or Affect?**

NHSL staff, patients, visitors and other users that have access to the premises

#### **3.2 Who are the Stakeholders?**

NHSL staff, service users, carers and partner agencies

### **4. Principal Content**

#### **4.1. Policy Statement**

The reasons for not allowing the use of mobile communication devices in certain areas of NHS Lanarkshire are not solely related to interference with medical equipment.

For reasons of patient confidentiality, privacy and dignity it is important to prevent mobile camera phones being used to take inappropriate photographs and video recordings.

Mobile communication devices should not be switched on in clinical areas, including wards unless there are good reasons to do so. Areas will be established within NHS Lanarkshire which are designated as suitable areas for mobile communication device use. These areas will be those in which issues of privacy and dignity and interference with medical equipment can be kept to a minimum.

All areas will be clearly marked with appropriate signage and guidance as to whether the use of mobile communication devices are allowed, or not allowed.

## 4.2. Policy principles for mobile communication devices

The Medicines and Healthcare Products Regulatory Agency (MHRA) recommendations for use of mobile communications devices are outlined below for information.

Risk of interference	Type of communication system	Recommendation
High	Analogue emergency service radios.	Use in hospitals only in an emergency, never for routine communication.
	Private business radios (PBRs) and PMR446.e.g. porters and maintenance staff radios (two-way radios).	Minimise risks by changing to alternative lower risk technologies.
Medium	Cellphones (mobile phones).  Terrestrial Trunked Radio System (TETRA / Airwave).	A total ban on these systems is not required and is impossible to enforce effectively.  Should be switched off near critical care or life support medical equipment.
	Laptop computers, palmtops and gaming devices fitted with higher power wireless networks such as GPRS, 3G & 4G.	Should be used only in designated areas. Authorised health and social care staff and external service personnel should always comply with local rules regarding use.
Low	Cordless telephones (including DECT).	These systems are very unlikely to cause interference under most circumstances and need not be restricted.
	Low power computer wireless networks such as RLAN systems and Bluetooth.	

## 4.3. Policy Considerations

### 4.3.1. Health Facilities Scotland (HFS) Guidance

The Health Facilities Scotland (HFS) guidance states that mobile phones, and all electronic equipment that transmits radio-frequency energy above a very low power level, are only permitted to be switched on and used in specifically designated areas well away from possible interference with medical devices (e.g. non-clinical areas such as a; ward day rooms and waiting areas etc).

These specific areas where patients, visitors and staff can and cannot use mobile communications devices within healthcare premises should be identified. This will minimise risk of causing interference with critical medical equipment.

There is also a need to balance the patient's welfare and environment against the need for appropriate communication between staff, visitors, patients and their family and friends. Whenever anyone is in hospital, communication with family and friends becomes an essential element of support and comfort.

### **4.3.2. Photographic Capabilities**

A major development has been the widespread use of combined mobile phones and cameras, many of which have video recording capability and music players. It is the potential for patients and visitors to use this functionality to take inappropriate photographs or videos that present the greatest potential to interfere with dignity and privacy and thus compromise patient confidentiality.

Many swimming pools, sports centres and schools ban the use of mobiles because of the camera facility incorporated in them, recognising that it is very difficult to detect whether such devices are actually being used to take pictures and videos.

The Children Act 2004 and The Adult Support and Protection (Scotland) Act obligates each NHS Board to ensure they safeguard and promote the welfare of children and vulnerable groups. Camera phones in particular are seen as a potential risk of inappropriate photographs being taken.

Overall, the control of camera phones may only be seen to be practically possible by preventing the use of mobile phones altogether in clinical areas.

### **4.3.3. Environmental/Safety Considerations**

Mobile phone ring tones may be confused with medical device alarm signals by hospital staff. This in turn means that genuine alarm tones may be overlooked thereby having a direct impact on patient safety.

The use of mobile phones can be intrusive and impact adversely on the environment of others. Patients have a right to, and a need for, a peaceful environment, both day and night, uninterrupted by a number of different ring tones and other people's conversations which is disrespectful of their privacy and dignity.

NHS Lanarkshire as an employer also has a legal responsibility to protect the health and safety of its employees. Therefore, staff should not use their mobile phone whilst driving or doing anything else where safety is important and where its use might interfere with concentration.

## **4.4. Framework**

### **4.4.1. Patient Privacy and Dignity**

NHS Lanarkshire has a legal duty to respect a patient's private life. Allowing the unrestricted use of mobile communication devices, especially those with camera or recording devices, is unlikely to be compatible with the requirement to maintain patient privacy and dignity. The use of such devices is restricted to areas where they are unlikely to encroach on the privacy and dignity of the patient.

### **4.4.2. Patient Confidentiality**

Given the advanced development of mobile communication devices, a high number of these devices now include photographic capabilities. This is considered to be high risk in the area of patient confidentiality. Use of a camera phone in patient areas would also likely breach the General Data Protection Regulations 2018 (GDPR). NHSL will take all possible steps to protect the rights of its patients and staff and avoid any breaches of the GDPR where possible.

Restricting the use of mobile communication devices to areas where they are unlikely to encroach on patient confidentiality will reduce any risk.



## Mobile Communication Devices Policy

---

The responsibility to manage this in clinical/patient areas lies directly with the clinical/nurse manager for the area concerned and in some cases, where doubt exists, a final decision should be based on the completion of a risk assessment.

### 4.5. Nuisance

It is important to consider that in a hospital or health service environment, patients may find loud or abusive ring tones and mobile phone conversations to constitute a nuisance. The use of mobile communications devices can infringe patients' rights to privacy and dignity and can intrude on their peace and quiet.

NHS Lanarkshire promotes a stress-free environment which will assist in the recovery of patients and patients should not be subject to the use by others of mobile communication devices throughout the day and night.

Patients may be asked to switch off their mobile communications device if they are deemed to be a hazard or a nuisance.

Where the use of mobile communication devices is permitted, ring tones should be switched to low volume, vibrate or silent mode.

### 4.6. The Medicines and Healthcare Products Regulatory Agency (MHRA) statement

The MHRA has stated that, ***“in certain circumstances, the electromagnetic interference from mobile communication devices can interfere with some medical devices, particularly if used within 2 metres of such devices”***. There may be a number of different medical devices within this range of a patient's bedside.

Additionally, it should be noted that mobile medical equipment, for example, mobile syringe drivers may be brought into a ward or other clinical area or be in use on a patient being transported to another area.

Where the use of mobile communication devices is permitted, they must not be used within **2 metres** of any medical device.

### 4.7. Unapproved devices with resultant health and safety risks

Mobile communication devices require to be charged via mains power supply.

- Essential medical devices must not be unplugged to allow the use of a mobile communications device charger;
- Mobile communication device chargers may not be tested in accordance with NHS Lanarkshire Portable Appliance Tested (PAT) procedure and may therefore constitute an electrical risk.

### 4.8. Confusion with alarms and resultant health and safety risks

The variety of mobile communication device ring tones may be confused with medical equipment alarms and signals by staff. This could result in a genuine alarm being overlooked, with a potential adverse impact on patient safety.

#### **4.9. Infection Prevention and Control**

Standard precautions are required to underpin the safe care of all patients at all times when staff are using equipment such as mobile phones and computer keyboards/tablets.

Precautions include hand washing before direct contact with patients and after any activity that contaminates the hands, and regular cleaning of the equipment with detergent and disinfectant wipes, which should be used in line with manufacturer's instructions.

#### **4.10. Use of Mobile Communication Devices in NHS Lanarkshire**

Areas where the uses of mobile communication devices are permitted will be clearly marked and identified by using approved MHRA signage (see appendices A and B).

In general, if a patient, staff member or visitor cannot see a sign permitting the use of mobile communication devices it should be assumed that their use is prohibited.

Consideration in using mobile communication devices is important even in permitted areas and, as a matter of courtesy, calls should be made by moving away from patients or others who may be disturbed.

Whilst the prohibition on the use of mobile communication devices in NHS Lanarkshire buildings is being lifted, this does not imply that people should freely use such devices.

Patients, visitors and staff have a right to expect a quiet, peaceful environment in all NHS Lanarkshire premises and users of mobile communications devices must respect this.

There may be a small risk of mobile communication devices interfering with the operation of medical equipment and therefore staff, visitors and patients should temporarily relocate to an area designated as being 'safe' for the use of mobile communication devices.

#### **4.11. Prohibited Areas**

Please refer to Appendix C for a poster summarizing the restrictions around the use of mobile communication devices (MCDs)

For safety, privacy and dignity and annoyance reasons, mobile phones and personal computing devices are prohibited and must be switched off in all high tech equipment areas such as:

- Intensive Therapy Unit,
- Critical Care Unit,
- High Dependency Unit,
- Neonatal Intensive Care Unit,
- Special Care Baby Units,
- Renal, Labour Wards,
- Recovery Rooms,
- Accident and Emergency,
- Theatres or
- where patients are attached to complex medical devices including infusion pumps.

Exceptions in these areas, such as patients with specific communication or carer needs or those confined to bed areas, must be discussed and agreed with the Nurse in Charge.

In general, staff should refrain from using their mobile telephones during work times unless required in the direct course of their duties.

#### **4.12. Permitted Areas**

Where the use of mobile communication devices is prohibited, alternate facilities may be available either beside the bed or other payphone services.

##### **4.12.1. Health Centres and Community Clinics**

The use of mobile communication devices in health centres and community clinics will not be restricted unless disruption is being caused to patients. In such cases, the local manager may temporarily restrict use. However staff and patients must restrict their use to ensure they minimise disruption to others as detailed in sections 4.12.2 and 4.12.3.

##### **4.12.2. Hospital Sites: Patients and Visitors**

Patients expect to be treated in a quiet, peaceful environment. In order to avoid confusion over where they may be used, and to minimise disruption to other patients, areas inside buildings where the use of mobile communication devices is permitted will be clearly marked with signs.

These areas - subject to carrying out a risk assessment - may include the reception, entrance areas and non-clinical communal areas such as public corridors and dining areas.

The use of MCDs will also be allowed in the grounds.

Patient information leaflets will (when reprinted) include a section on where mobile communication devices can be safely used.

Managers and staff should advise patients or the general public of the policy when they see them using or hear the ring tone of an MCD in a prohibited area.

Repeated breaches of the policy should be reported, near misses experienced due to inappropriate MCD usage should also be reported. (i.e. instances where it has caused interference with equipment or where ring tones are mistaken for equipment alarms.)

Overall responsibility for the implementation of this policy with respect to patients rests with the appropriate Director (Acute or HSCPs).

##### **4.12.3. Hospital Sites: Implications for Staff**

The application of this policy, so far as it applies to staff, will be monitored by the Director of Human Resources via the Human Resources Forum.

NHS Lanarkshire is committed to ensuring equitable treatment of all employees irrespective of sex, race, age, disability, sexual orientation, ethnic origin, religion or belief.

## **Mobile Communication Devices Policy**

---

All staff will be made aware of their responsibility for complying with and supporting the Mobile Communication Policy.

Staff will be permitted to use mobile communication devices in main entrance areas, main dining rooms and grounds. They may also use mobile communication devices in office areas not directly attached to wards/ clinical areas, but only where these are marked with signs indicating that it is safe to do so.

Staff using their mobile phones whether for personal use during a break period or in the course of their duties, must do so taking into consideration the location where they are making the call, whether or not it will distract colleagues and whether or not the nature of the telephone conversation is appropriate in front of patients/visitors to the hospital.

It is common courtesy to take account of the fact that colleagues, patients or visitors may find other people's telephone conversations intrusive.

If a member of staff breaches the policy they will be subject to NHS Lanarkshire's procedures on the Effective Management of Employee Conduct. Line managers will be made aware of their responsibility and authority in this matter.

### **4.13. Use of Camera Phones and Related Devices**

Digital imaging using mobile communication devices has the potential to create issues of patient confidentiality and patient consent.

In recognition of the need for patient confidentiality, privacy and dignity staff, patient or visitors' mobile phones with camera facilities must not be switched on in the vicinity of patients without prior permission.

It is very difficult to detect whether such devices are taking pictures. The taking of photos or videos in ward areas should only be allowed when the subject patient has given specific consent.

It is essential that only those who have given written consent are included in any photograph.

A clinical manager on units, such as maternity, has discretionary powers to allow photographs being taken in agreed situations, which are controlled, in discreet rooms and away from other patients and staff, e.g. proud relatives wanting to photograph their new baby.

A member of hospital staff must be present when pictures are taken.

The use of the camera function on a mobile should not to be used for the purpose of clinical images.

The use of the camera function on a mobile for the purpose of clinical images is restricted.

## 5. Accountabilities and Responsibilities

### 5.1. All staff

It is the responsibility of all staff to ensure that patients, visitors and other staff comply with the guidance. Anyone who does not comply potentially compromises the care of patients.

Staff are to comply with the policy as part of the terms and conditions of employment and to support and enforce it with patients, visitors, colleagues, contractors and suppliers.

### 5.2. The Chief Executive is responsible for ensuring that all senior managers and relevant staff in their organisation are aware of the information contained in HDL (2001) 21 and that procedures are in place to promote its effective and accurate implementation.

The Chief Executive is also required to ensure that this policy is extended to all contractors and private or independent service providers who provide care, staff, equipment, buildings or other services or facilities for the direct care of patients or clients.

### 5.3. The Executive Director with delegated responsibility for the overseeing the implementation of this policy throughout the NHS Lanarkshire to the Director of Planning, Property & Performance.

### 5.4. The Executive Leads Health and Social Care Partnerships with delegated responsibility for the overseeing the implementation of the policy throughout the Health and Social Care Partnerships to the Chief Accountable Officers

### 5.5. Directors of Nursing (Acute & HSCP) have the delegated responsibility for ensuring that the NHSL has a clear policy outlining its commitment to ensure that mobile phones and communication technologies are used safely and appropriately by staff, patients, contractors (excluding independent contractors whilst working in their own premises), students and visitors at all times in all settings.

### 5.6. Site Directors/General Managers and Named Senior Managers to ensure the policy framework is being adhered to in their area of responsibility and to handle any breaches in a considered and thoughtful manner in accordance with NHS Lanarkshire policy and procedures on Effective Management of Employee Conduct.

### 5.7. Charge Nurse/Department Managers are responsible for enforcing compliance with the policy and escalating any problems to their Directorate as appropriate.

### 5.8. Human Resource; is required to provide support and advice to managers to help them to apply the staffing elements of the policy effectively, to monitor policy breaches and all staff should be made aware of the policy and the reasons for its content including a briefing on the policy at staff induction.

### 5.9. Partnership; are required to provide support and advice to their members, ensuring that the policy is used appropriately.

**6. Resource Implications**

None

**7. Communication Plan**

The policy will be communicated as follows:

- The interpreting and translating page on Firstport
- All Senior managers will be briefed on the policy

**8. Quality Improvement – Monitoring and Review**

Monitoring of the effectiveness of this and supporting policies is carried out as table:

Standards Process/Issue	Monitoring and Review			
	Method	By	Committee	Frequency
Mobile Phone or Personal Computing Device may a) Compromised Confidentiality b) Interfered with Medical Device	Review of DATIX Reports for any incident reports involving mobile telephone or personal computing device.	Medical Physics IM&T PSSD	Corporate Management Team	Annually
Technology changes affect technical guidance provided within Policy	Review of technical content every three years or sooner if technical advice changes	Medical Physics IM&T PSSD	Performance Resources Planning Committee	Every Three Years

**9. Equality and Diversity Impact Assessment**

This policy meets NHS Lanarkshire’s EQIA



(tick box)



## 10. Summary or Frequently Asked Questions (FAQs)

There is no requirement for an FAQ's list to be read in conjunction with this Policy.

## 11. Archival of Documents

When a corporate policy is created by NHS Lanarkshire it becomes an official document and policies must be controlled within the principles for archiving, retention and destruction contained in Scottish Government circular

As an NHS Lanarkshire Board record, corporate policies must be retained permanently and will be managed through the Knowledge Services. The archive is kept within Firstport. Please email [corporatepolicies@lanarkshire.scot.nhs.uk](mailto:corporatepolicies@lanarkshire.scot.nhs.uk) if you need access to any of the archived documents

## 12. References

- a) DB 9702 Electromagnetic Compatibility of Medical Devices with Mobile Communications March 1997
- b) DB 1999(02) Emergency service radios and mobile data terminals: compatibility problems with medical devices May 1999
- c) SN 2001(06) Update on Electromagnetic Compatibility of Medical Devices with Mobile Communications: Tetra (Terrestrial Trunked Radio System) and outside media broadcasts from hospital premises; Medical devices Agency, March 2001
- d) NHS Lanarkshire Effective Management of Employee Conduct Policy & Procedures.
- e) NHS Lanarkshire Equality, Diversity & Human Rights Policy
- f) NHS Lanarkshire Policy on Recordings (Photography and Video) for Clinical and Service Use.
- g) Code of Conduct for Healthcare Support Workers
- h) The Adult Support and Protection (Scotland) Act 2007: Protection of Adults at Risk of Harm
- i) Protection of Vulnerable Groups (Scotland) Act 2007
- j) The Children Act 2004
- k) Strahle, J. *et al.* (2012) 'Programmable Shunt Valve Affected by Exposure to a Tablet Computer', Journal of Neurosurgery: Paediatrics.
- l) Department of Health (2009) Using mobile phones in NHS hospitals

**APPENDIX A**



Switch off all  
mobile phones and  
GPRS systems

These may interfere with  
nearby medical equipment

Prohibited Areas within hospitals where the use of  
Mobile Communication Devices must not be switch  
on will be clearly marked and identified by approved  
national signage.

Uncontrolled when printed



## APPENDIX B



Mobile phones  
and GPRS  
systems can be  
used in this area

Permitted areas within hospitals where the use of Mobile Communication Devices is permitted will also be clearly marked with approved national signage.

Consideration in using mobile communication devices is important in these permitted areas and as a matter of courtesy, calls should be made by moving away from patients or others who may be disturbed.

It is also the responsibility of the user of the device to check that they are in a permitted zone.

**If a patient, visitor or staff member cannot see a sign permitting the use of mobile communication devices, it should be assumed that their use is prohibited. If in doubt do not use your MCD.**

APPENDIX C

THE USE OF MOBILE DEVICES SHOULD BE KEPT TO A MINIMUM AND MUST ONLY BE USED WHERE ALLOWED. USERS OF MOBILE DEVICES MUST BE CONSIDERATE OF PATIENT PRIVACY, DIGNITY AND NEED FOR QUIET

Area	Designation	Staff	Patients	Visitors
Intensive Care / High Dependency Units Operating Theatres and Recovery Areas Neonatal Units Emergency/ Resuscitation Areas Renal Dialysis Units Delivery Rooms	<b>Prohibited</b>	Mobile device cameras can only be used for urgent clinical photographs. Phones can be used for work purposes or during breaks in a permitted area.  Staff with carer responsibilities should agree a landline contact with their line manager	<b>Not allowed</b> The Nurse in Charge can agree exceptional patient use for those with specific communication or carer needs or for those confined to bed areas. Care should be taken to avoid	<b>Not allowed</b> Visitors should leave the area. Calls must only be made from a permitted area or outside the building.  The Nurse in Charge can agree exceptional use.
Other clinical areas (not in prohibited list) that the Trust has designated as restricted due to risks outweighing the benefits to patients and visitors.	<b>Restricted</b>	Mobile device cameras can only be used for urgent clinical photographs. Phones can be used for work purposes or during breaks in a permitted area.  Staff with carer responsibilities should agree a landline contact with their line manager	<b>Not allowed</b> The Nurse in charge can agree exceptional patient use as above but this should avoid proximity electronic Medical Device e.g. on Maternity Units pictures can be taken of new born babies if this is the ONLY method of taking the picture.	<b>Not allowed</b> Visitors should leave the area. Calls must only be made from a permitted area or outside the building  The Nurse in Charge can agree exceptional use.
Other areas e.g. waiting areas	<b>Permitted</b>	<b>Allowed</b> , but no personal use when on duty (Phones can be used in breaks).	<b>Allowed</b> but please have regard to others and try to keep a distance from electronic medical devices. Phones should not be used between 23:00 and 07:00. If using video chat the camera must be facing you and you need to be aware that you may pick up other peoples conversations and other people may hear both sides of your conversation.  Please Respect staff and service user privacy and dignity when updating your status on any social media sites / apps.	

**VIDEO / PHOTOGRAPHS OF PATIENTS MUST NOT BE TAKEN ON PHONES BY PATIENTS OR VISITORS WITHOUT NURSE IN CHARGE AGREEMENT. KEEPING A RECORD OF YOUR OWN CARE IS PERMITTED BUT PLEASE INFORM STAFF IN ADVANCE AND HAVE REGARD TO THE PRIVACY AND DIGNITY OF OTHERS.**