

SESLHD BUSINESS RULE COVER SHEET



Health
South Eastern Sydney
Local Health District

NAME OF DOCUMENT	Consumer use of electronic devices
TYPE OF DOCUMENT	Business Rule
DOCUMENT NUMBER	SESLHDBR/087
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LEVEL OF EVIDENCE	NSQHS Standard 2: Partnering with Consumers Standard
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FORMER REFERENCE(S)	N/A
EXECUTIVE SPONSOR	General Manager, Mental Health Services
AUTHOR	Clinical Rehabilitation Coordinator, SESLHD MHS
POSITION RESPONSIBLE FOR THE DOCUMENT	Policy and Document Development Officer SESLHD-MentalHealth-PoliciesandDocuments@health.nsw.gov.au
FUNCTIONAL GROUP(S)	Mental Health
KEY TERMS	Electronic Devices, Mobile Devices, Safe Use, Risk Assessment, Documentation
SUMMARY	<ul style="list-style-type: none"> • SESLHD MHS recognises that access to a mobile phone, a personal computer, SMART watch or a personal digital assistant (PDA), may play a significant role in daily life for consumers. However, cameras, video and voice recordings capability can interfere with the confidentiality, dignity and privacy of other consumers, staff and visitors. • This document is necessary to: <ul style="list-style-type: none"> ○ standardise and articulate the responsibilities of staff. ○ provide support to consumers and visitors of the MHS. ○ Minimise the potential misuse of technology and encourage therapeutic use / application.

COMPLIANCE WITH THIS DOCUMENT IS MANDATORY

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Feedback about this document can be sent to SESLHD-Policy@health.nsw.gov.au

1. POLICY STATEMENT

The document outlines the safe use of mobile phones and/or other personal electronic devices by a consumer in an inpatient mental health unit within South Eastern Sydney Local Health District (SESLHD).

2. BACKGROUND

- Personal mobile phones and related devices play a significant role in consumer's lives enabling communication, social connections, education, access to music, film, books, games and ability to organise their lives through a variety of applications and functions.
- Consumers should have access to their personal mobile phone or device in accordance with least restrictive care.
- Limited access and restriction should only be considered where a risk has been identified.

3. RESPONSIBILITIES**3.1 Employees will:**

Follow best practice standards and comply with related NSW Health policy directives. Ensure their clinical documentation reflects the principles and philosophy of the document.
Seek training and support where there is a gap in knowledge from subject matter experts.

3.2 Line Managers will:

Ensure staff are familiar with this guideline, circulated and implemented locally. Monitor compliance with the document.
Ensure appropriate local and district education and training are provided to support relevant staff at orientation and ongoing mandatory training.

3.3 Service Managers/Directors will:

Distribute this document within their relevant service.
Ensure line managers and staff are familiar with and adhere to the mandatory process contained within this document.

3.4 Medical staff will:

Follow best practice standards and comply with related NSW Health policy directives. Ensure their clinical documentation reflects the principles and philosophy of the document.
Seek training and support where there is a gap in knowledge from subject matter experts.

4. PROCEDURE

4.1 Risk Assessment during Admission

- The admitting Mental Health Clinician / Medical Officer is responsible for performing a comprehensive Mental Health Assessment including a risk assessment and care plan to determine access to electronic devices and associated equipment.
- When considering access to associated equipment, compliance with the *Prohibited Items List* for the relevant inpatient unit is required.
- Risk assessment outcomes and plans for review of access to personal electronic devices and associated equipment such as headphones and charging cables must be recorded on the electronic Medical Record (eMR), care plan on admission, and as appropriate throughout the admission including at designated review points.

4.2 Condition of use

Where a risk has been identified which restricts a consumer from accessing personal mobile phone, electronic devices etc. or associated equipment such as headphones and charging cables:

- The rationale for a restriction must be clearly explained to the consumer and designated carer by the staff member implementing the restriction and documented in eMR.
- If a consumer is denied access to their personal mobile device, then the identified item(s) should be entered in the Record of Patient Property Form (APPENDIX B) and stored securely by nursing staff according to local protocols. The completed Record of Patient Property form is to be placed in consumer's paper medical file.
- Consideration should be given to whether the consumer can still access device content (such as music) with cordless headphones/ wireless speaker etc
- Any identified risk which prevents or restricts access to a mobile phone or device will be reviewed on a shift-by-shift basis by the nursing team (or multidisciplinary team member in consultation with nursing staff member) and escalated to Medical Staff where required.
- If the restriction to the device is to be continued, this must be clearly explained to the consumer and documented in the consumer's eMR.

All of the above must be clearly documented in the consumer's eMR.

Consumers with access to mobile phone and/or electronic devices:

- Following the assessment of risk, consumers seeking to use these devices are to be provided with an explanation of conditions of use and asked to sign the 'Personal Use of Mobile phone / Electronic Devices Agreement' (see APPENDIX A). The signed agreement must be placed in the consumers' paper medical file, a copy provided to the consumer, and this documented in the eMR
- The use of any personal electronic device on an inpatient unit must adhere to [SESLHDPD/290 - Patients use of personal, non biomedical equipment - electrical devices](#)

SESLHD BUSINESS RULE

Consumer use of electronic devices

SESLHDBR/087

- Charging of devices is to be limited to a designated area and managed according to site-specific protocols.

Note:

- Staff should assist consumers in keeping a record of important telephone contacts if access to mobile phone has not been granted.
- All inpatient units should have access to a designated public telephone. Wherever possible this should be in an area that promotes and protects privacy.

5. DOCUMENTATION

Appendix A – [Personal use of mobile phone/electronic devices agreement](#)

Appendix B – Patient Property Form

6. AUDIT

QARS Audit: SESLHD_Inpatient_File_Audit

7. REFERENCES

- [NSW Ministry of Health Privacy Manual for Health Information](#)
- [NSW Ministry of Health Information Bulletin IB2023_032 - Healthcare Rights](#)
- [SESLHDBR/010 - Mental Health Consumer Rights and Responsibilities](#)
- [SESLHDPR/735 Admission and Discharge/Transfer of Care Processes for Acute Mental Health Inpatient Units \(including Direct Admissions for Consumers linked with Community Mental Health\)](#)
- [SESLHDPD/290 - Patients use of personal, non biomedical equipment - electrical devices](#)
- [Prohibited Items List \(SGMHS and TSMHS\)](#)
- Prohibited Items List (ESMHS)

8. VERSION AND APPROVAL HISTORY

Date	Version Number	Version and approval notes
January 2018	Draft 1	Draft completed by Leonie Dunn, A/ Clinical Rehabilitation Coordinator. Initial reviewed by A/ Clinical Director, ESMHS Clinical Operations Managers, headspace Manager, Clinical Nurse Consultant, Policy and Document Development Officer and Clinical Nurse Manager.
March 2018	Draft 2	Feedback reviewed and redrafted by Leonie Dunn. Draft version 2 disseminated to Clinical Operation Managers, Inpatients Service Manager, Service Director, Workforce Capabilities, A/Risk Clinical Manager, Peer Support Workers, and SESLHS MHS CAC. Appendix A developed and included

Date	Version Number	Version and approval notes
April 2018	Draft 3	Reviewed by Nursing and Midwives Association representative. Revised Appendix A.
May 2018	Draft 4	Incorporated advice from Chief Risk Officer and Director of Professional Practice Unit. Clarified documentation process under 'Condition of Use'. Amended Appendix A to include storage advice.
June 2018	1	Endorsed by DDDCC.
July 2018	1	Endorsed by SESLHD MHS Clinical Council
August 2018	1	Processed by Executive Services prior to submission to SESLHD Clinical and Quality Council
August 2018	1	Endorsed by Clinical and Quality Council
March 2021	2.0	Updated to include "associated equipment" within the risk assessment, updated to NSQHS v2
March 2021	2.1	Reviewed by DDCC – feedback incorporated into document. Feedback focused on balancing the Prohibited Items Lists against risk-assessing any associated equipment such as headphones and chargers.
1 May 2024	2.2	Review conducted. APPENDIX A – updated with site replacing unit. Removed SESLHD does not provide Wi-Fi. APPENDIX B – added. Endorsed Document Development and Control Committee. Endorsed MHS Clinical Council. Endorsed for publication by Executive Sponsor.

Mental Health Service Inpatient Unit

PERSONAL USE OF MOBILE PHONE / ELECTRONIC DEVICES AGREEMENT

This agreement provides guidelines for the use of mobile phones, personal computers, personal digital assistants (PDAs) and other personal electronic devices to protect the dignity, confidentiality and rights of individuals, maintain security and safety, and minimise disruption to care delivery whilst in a SESLHD Mental Health Inpatient Unit.

I, _____ take responsibility for my phone/tablet/computer/SMART watch whilst I am a consumer of the:

Sutherland

St George

Prince of Wales

Mental Health Service.
(please circle appropriate response)

When using a personal electronic device on the Unit, I agree to:

- Not use the camera or photography functions to record or live stream.
- Only use my camera for keeping in contact with family and friends while I am alone.
- Not record any audio or video while on NSW Health grounds, including with staff, other consumers or visitors
- Respect the privacy of other consumers, visitors or staff e.g., not to share information about others through the use of social media platforms.
- Keep my device on vibrate, silent or low volume setting.
- Ensuring my devices are turned off or switched to silent for group sessions.
- Go to a quiet area to take or make calls.
- Take responsibility for my own devices e.g., knowing their location, keeping them charged, keeping personal information and passwords confidential.
- Not lend my device to other consumers
- Using headphones to listen to music or any other media when in public areas.
- Notify a staff member if I am uncomfortable with anything on my device, bring it to their attention and discuss it with them.
- Not take part in unhealthy behaviours (e.g., bullying, harassment, etc) using my device which, may cause harm to other inpatients.
- Return my device and associated equipment at the end of each day.

I may choose to leave my device(s) in my locker (if available) or send home with my family.

I understand that South Eastern Sydney Local Health District (SESLHD) is not responsible for my data/ texts or calls made by me while on the Unit.

I also understand that once I have been given access, I am responsible for the security of my device and the Hospital is not responsible for loss, theft or damage of my personal device.

Failure to comply with these conditions may result in loss of access to my device, which may be removed and stored securely until review.

Signature of Consumer

Signature of Witness

Date

