

Guidance on the use of Mobile Communication Devices in healthcare premises



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1. Introduction

Background

- 1.1 Mobile communication devices can be essential in the healthcare environment for good patient management. However, the electromagnetic interference produced by such equipment may have the potential to affect medical devices.

This can be a particular problem when mobile communication devices are brought into a healthcare environment and used by staff, patients and visitors in an uncontrolled manner.

The potential social disruption as a result of uncontrolled noise pollution should also be considered, therefore some restrictions may be required to minimise both the risk of interference with medical equipment and to protect the overall patient healthcare environment.

The integration of camera devices with modern mobile phones also presents new challenges which must be addressed.

Guidance

- 1.2 NHSScotland guidance offers a framework regarding the use of mobile phones and other mobile communication devices. This framework relates to Device Bulletin DB9702 and advice published by the Department of Health (DH) in July 2004 (reference 2004/0287).

The Medicines and Healthcare Products Regulatory Agency (MHRA) issued further guidance on the use of mobile telephones in July 2004, updated in January 2005. This guidance is based on information available on the DH and MHRA websites.

The guidance takes account of developments in mobile communication technology and the growing communication needs of patients, visitors and staff.

A total ban on the use of mobile communication devices in healthcare premises is no longer considered appropriate. It is, however, essential that mobile communication devices should be switched off when in proximity to critical care or life support medical equipment.

It is advised that NHS healthcare bodies should actively manage the use of mobile communication devices in healthcare organisations.

Consideration should be given to designating specific areas where patients, visitors and staff can use their mobile communications devices, thereby ensuring there is no risk of interference with critical medical equipment.

Policy statement

- 1.3 The reasons for not allowing the use of mobile communication devices in certain areas of the healthcare environment 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 should be established within NHS healthcare organisations 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 should be clearly marked with appropriate signage as to whether the use of mobile communication devices are allowed, or not allowed.

NHS organisations should have a written policy regarding the use of mobile communication devices, including camera phones, stating where and in what circumstances such devices are permitted or prohibited.

All staff should be aware of the policy, and the reasons for its content.

2. Policy principles for mobile communication devices

2.1 The 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). Laptop computers, palmtops and gaming devices fitted with higher power wireless networks such as GPRS and 3G.	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. 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). Low power computer wireless networks such as RLAN systems and Bluetooth.	These systems are very unlikely to cause interference under most circumstances and need not be restricted.

Note: Mobile communication devices MUST NOT be used within two metres of any medical equipment. Even when such devices are on standby, they emit a signal. Mobile communication devices MUST be switched off in areas not designated as appropriate for their use.

3. Framework

Patient Privacy and Dignity

- 3.1 There is a legal duty to respect a patient's private life. It is unlikely that allowing the unrestricted use of mobile communication devices, especially those with camera or recording devices, will be compatible with the requirement to maintain patient privacy and dignity.

Good practice will restrict the use of such devices to areas where they are unlikely to encroach on the privacy and dignity of the patient.

Patient confidentiality

- 3.2 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 Data Protection Act 1998 (DPA). Good practice will result in NHS Boards taking all possible steps to protect the rights of its patients and staff and avoid any breaches of the DPA where possible.

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

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.

Nuisance

- 3.3 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 organisations should promote a stress-free environment which will assist in the recovery of patients.

Patients should not be subject to the use by others of mobile communication devices throughout the day and night.

Good practice will result in ensuring that where the use of mobile communication devices is permitted, ring tones are switched to low volume, or vibrate or silent mode is enabled on the device.

Interference with medical equipment

- 3.4 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.

Good practice will ensure that, where the use of mobile communication devices is permitted, that they are not used within 2 metres of any medical device.

Unapproved devices, with resultant health and safety risks

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

This presents at least two identifiable risks which are:

- an essential medical device may be unplugged to allow the use of a mobile communications device charger;
- mobile communication device chargers may not be Portable Appliance Tested (PAT) and may therefore constitute an electrical risk. This will almost certainly be in contravention of the NHS organisation’s policy.

Confusion with alarms and resultant health and safety risks

- 3.6 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. Suggested areas for permitted use of mobile communication devices in healthcare premises

4.1 Designated areas for permitted use in healthcare premises are likely to include some, or all, of the locations listed below:

- general offices remote from ward and theatre areas;
- catering department and dining areas;
- chaplaincy;
- eHealth departments;
- laboratories;
- main entrances and all corridors and offices external to ward areas;
- health records;
- mortuary;
- pharmacy;
- staff changing areas and associated corridors;
- commercial areas.

The above list is not intended to be exhaustive, and local, site-specific risk assessments should be carried out to identify areas where the use of mobile devices may be permitted.

5. Suggested areas for prohibiting use of mobile communication devices in healthcare premises

5.1 Designated areas for prohibiting use in healthcare premises are likely to include some, or all, of the locations listed below:

- theatre and recovery areas;
- outpatient areas;
- ward areas.

Note: While there may be no technical reason to restrict the use of mobile communication devices in ward areas, patients should expect to be treated in a quiet, peaceful environment. The decision regarding the use of mobile communication devices in such areas should be the responsibility of the ward manager (or similar) who has the responsibility for the care of patients within their area. It may be that a general prohibition is imposed unless there is prior agreement with the ward manager for the use of a mobile communication device.

The use of camera phones may also be a particular issue within ward areas and, as such, prohibition on the grounds of patient confidentiality should be considered.

The above list is not intended to be exhaustive, and local, site-specific risk assessments should be carried out to identify areas where the use of mobile communication devices may be permitted.

6. Use of mobile communication devices in healthcare premises

- 6.1 Areas where the use of mobile communication devices are permitted should be clearly marked and identified by using the approved signage available from the MHRA website as shown <http://www.mhra.gov.uk>:



Mobile phones
and GPRS
systems can be
used in this area

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.

The prohibition sign shown below should be used in areas where it is inappropriate to use these devices.



Switch off all
mobile phones and
GPRS systems

These may interfere with
nearby medical equipment

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 healthcare 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 NHSScotland 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.

7. Use of camera telephones and other related devices

- 7.1 Allowing digital imaging via mobile communication devices has the potential to create issues of patient confidentiality and patient consent.

Photographs should only be taken with the consent of all parties likely to be identified in the photograph and in keeping with local and national policies.

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8. Health risks of mobile communication devices

8.1 Radio waves emitted above certain levels can cause heating effects on the body. Guidelines are set to ensure exposure is kept below any damaging levels and all UK mobile phones meet this standard.

There are, however, significant gaps in our knowledge about the long-term effects and, as such, we should always use a precautionary approach to the use of mobile communication devices.

In order to reduce any personal risk by minimising exposure to radio waves, you should:

- use mobile phones for essential purposes only;
- keep calls short.

Further information can be found by contacting the Department of Health via their website at www.dh.gov.uk.

9. Responsibilities

- 9.1 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.

Action must be taken to avoid such risks.

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10. Adverse Incident Reporting

- 10.1 Any concerns about interference must be reported through the healthcare organisation's Risk or Adverse Incident Reporting Procedures.

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11. Conclusion

- 11.1 NHS healthcare organisations should consider a range of risks and issues when preparing their policy regarding where the use of mobile communication devices may be permitted, or restricted, within healthcare premises.

A clear, written, policy should be used that is easily accessible, with the patient at the forefront of any such policy. It will be acceptable for this guidance to form the basis for local policies with the addition of appropriate appendices relating to specific areas or locations.

NHS healthcare organisations should designate, and clearly signpost, areas in healthcare premises where the use of mobile communication devices may be permitted and areas where use is prohibited. Where mobile communication devices may not be used, alternative facilities may be available either beside the bed or other payphone services.

The Scottish Government Health Directorate does not advocate a site-wide ban on the use of mobile communication devices. There should be areas where patients, visitors and staff may use their mobile communication devices.

It should be mandatory that mobile communication devices should not be switched on in any clinical area, including wards, unless there are good reasons why this should not be the case. In certain circumstances, where there may be an exceptional case for considering the use of such a device in a designated prohibited area, the decision should be taken on the basis of a full risk assessment being carried out by the manager responsible for the particular service area.

12. Review of guidance

- 12.1 Health Facilities Scotland (HFS) has been tasked with producing this NHSScotland Health Guidance Note on the use of mobile communication devices in healthcare premises.

HFS will undertake the ongoing monitoring and review of this guidance. Amendments will be issued following policy review or as appropriate, if and when changes in operational process occur or new guidance is received.

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13. References

Device Bulletins DB9702 'Electromagnetic compatibility of medical devices with mobile communications' and DB1999(02) 'Emergency service radios and mobile data terminals: compatibility problems with medical devices' July 2004

www.mhra.gov.uk/Safetyinformation/Generalsafetyinformationandadvice/Technicalinformation/Mobilecommunicationsinterference/CON019620

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