


DMH POLICY

Title: Personally-Owned Electronic Device Use	Policy #: 24-01 Date Issued: March 11, 2024 Effective Date: March 11, 2024
Approval by Commissioner: 	
Signature: Brooke Doyle, M.Ed., LMHC	Last Reviewed: February 2024

I. PURPOSE

Electronic Devices are often people’s primary link to the community and may be the main way that people stay in touch with friends, family, and employers, keep calendars, pay bills, receive education, and collect and access other important information. For an individual hospitalized, maintaining connection to natural supports in the community facilitates their own recovery and successful re-integration into the community.

Electronic Devices may also be utilized for the purposes of Telehealth, in education, and other recovery resources and supports in accordance with this policy and established Department of Mental Health (DMH) guidelines and policies.

This policy establishes standards for the possession and usage of a personally owned Electronic Devices at a Facility. Electronic Devices owned by DMH and distributed to Patients in Facilities or individuals in DMH community settings shall be governed by separate and distinct, established DMH guidelines and policies.

The benefit of permitting Electronic Devices and the skills gained in handling computer and communication technology as an aspect of recovery must not compromise the Facilities’ responsibility for assuring Patient privacy, confidentiality, public safety and a therapeutic environment. It is both the Patient’s and employees’ responsibility to ensure their Electronic Devices are used appropriately and in accordance with all DMH policies, regulations, and procedures.

This policy repeals and replaces DMH Policy #12-01.

II. SCOPE

This policy applies to all Patients, DMH employees, contractors, and visitors, at Facilities using a personally owned Electronic Device. This policy does not apply to the recovery from addictions programs.

III. DEFINITIONS

Electronic Devices: Personally owned electronic equipment for communication and personal use which include, but are not limited to, the following: laptops and personal computers with and without Wi-Fi capabilities, iPods and other MP3 players with Wi-Fi capabilities, cell phones, smart phones, iPads and any other Wi-Fi compatible devices, and any communication devices that contain built-in cameras, audio or video recording devices.

Electronic Device Accessories (“Accessories”): Items that include, but are not limited to, the following: charging units, batteries, battery packs, cases, headsets, and other items and add-ons for use with the Electronic Devices.

Facility: An adult psychiatric inpatient hospital, unit or bed contracted for or operated by DMH, including DMH-operated units in a Department of Public Health hospital.

Facility Director: The chief executive officer, chief operating officer, chief of psychiatric Operations, program director, center director, or other administrator designated by the Facility to have administrative oversight of a Facility.

Livestream: The live transmission of an event over the internet.

Patient: A person hospitalized in a Facility.

Patient Care Area: Area of the Facility devoted exclusively to Patient care such as a day room, Patient bedroom, or activity room.

Reasonable Cause: A combination of facts and circumstances that would warrant a reasonable person to believe that an individual has used an Electronic Device in violation of this policy. Reasonable Cause exists if, in the opinion of the Facility Director, or designee, it is more likely than not that the individual has violated this policy. Reasonable Cause cannot be merely an opinion or hunch. The person must consider all facts and circumstances known to him or her.

Telehealth: The provision of healthcare remotely by means of telecommunications technology.

Treatment Team: The multidisciplinary clinical team providing and directly overseeing the care and treatment for a Patient.

Use of Personally-Owned Electronic Device Agreement (“Agreement”): The form that a Patient signs agreeing to terms and conditions regarding the use of personally-owned electronic devices, including, without limitation, privacy and security; limits around use and possession; and monitoring of electronic device use.

IV. POLICY

A. Overview

1. Possession and use of personal Electronic Devices by Patients, employees, contractors and visitors is permitted in Facilities of the Department subject to the provisions of this policy and any accompanying procedures and protocols.
2. Employees and contractors are prohibited from using their own personal Electronic Device in Patient Care Areas or while involved in the direct care of Patients unless the use of such Device is necessary to perform their job function.
3. Patients, employees, contractors and visitors are generally prohibited from using a camera/webcam to Livestream, photograph or record any individuals or any aspect of the Facility or its surroundings and/or to feign or threaten to do so. However, a camera/webcam may be used:
 - i) by a duly authorized investigatory or oversight entity that needs to take photographs or make recordings in the course of carrying out their official responsibilities;
 - ii) by a Patient in order to participate in an authorized Livestream Telehealth appointment or other authorized recovery-oriented supports; or for purposes of participating in Livestream personal interactions with family or friends;
 - iii) when necessary to provide a reasonable accommodation of an individual’s disability, such as hearing, seeing, speaking or immobility disabilities.

The use of a camera/webcam to Livestream, photograph or record images or sound may be authorized for other purposes by the Facility Director, or designee, in accordance with applicable DMH privacy regulations and procedures. In all instances, the use of an Electronic Device must occur in a place and manner that is protective of the privacy of others and does not compromise the security of the Facility.

4. This policy is not intended to impede the use of Electronic Devices as accommodations for individuals with disabilities such as hearing, seeing, speaking or immobility disabilities. The use of Video Phone methods for communication that includes a person who is deaf is one such example,

provided that the use occurs in a place and manner that is protective of the privacy of others and does not compromise the security of the Facility.

5. Patients, employees, contractors and visitors, must comply with this policy and protocols or procedures implemented under this policy. Facilities must post and/or provide written materials that explain the provisions of this policy and any such protocols or procedures.
6. Patients and visitors who fail to comply with the provisions of this policy and protocols or procedures implemented under this policy or with the terms of the Electronic Devices Agreement may be required to relinquish their Electronic Devices while at a Facility. Employees who violate this policy may be subject to disciplinary action. Contractors who violate this policy may be subject to action under the contract, including contract termination.

B. Clinical Assessment to Determine Appropriateness for a Patient to Use Their Electronic Device

As part of the admissions process, and thereafter from time to time, the admitting team or Treatment Team, shall determine if it is clinically appropriate for a Patient to obtain, use and maintain their Electronic Device and its Accessories in accordance with DMH procedures. Any determination it is not clinically appropriate for a Patient to possess and use an Electronic Device, must include a reasonable timeline for re-assessment of the Patient's ability to obtain/regain use of their Electronic Device, as clinically appropriate. All decisions regarding appropriate Electronic Device use must be documented in the Patient's medical record.

C. Responsibility for Patient and Treatment Team to Review Policy Requirements & Sign Agreement Form

If deemed reasonable to permit the Patient to have an Electronic Device, a member of the Treatment Team shall review the Electronic Device Use policy and Agreement with the Patient and the Patient must sign an Agreement in accordance with DMH procedures.

D. Restrictions on Usage of Electronic Devices

1. Neither the owner nor others may use Electronic Devices for illegal purposes, such as the violation of a restraining order or for illegal internet usage or in violation of any Facility/DMH protocols or policies.
2. Patients are not permitted to loan their Electronic Devices to others or to use other Patient's Electronic Devices.
3. Use of imaging (photographing or video recording) and audio recording functions on Electronic Devices is prohibited; provided, however, that the

Facility Director may approve the use of such functions if clinically appropriate or if such use is an accommodation for a disability.

4. Patients' use of personal Electronic Devices while participating in treatment, groups or evaluation activities is not allowed; unless such use is approved for Telehealth or an approved accommodation for a disability.
5. In order to enhance a safe and therapeutic environment for Patients and protect the privacy of Patients, a Facility may designate specific public areas (e.g., chapel, library) of the Facility where Electronic Devices may be limited.
6. A Patient's use of an Electronic Device may be restricted by the Facility on an individualized basis if such use disturbs roommates or other Patients.
7. Electronic Device use is prohibited in all areas of the Facility where such use is prohibited due to possible electromagnetic interference and is clearly indicated by signage. Electronic Devices must be turned off in these locations. If there is a need for immediate prohibition in an area where medical equipment or devices are being used unexpectedly, staff may authorize an immediate restriction of Electronic Devices use in that area.

E. Violations of Rules for Permitted Use of Electronic Devices/Patients Considered Unsafe

1. Individuals who fail to comply with the restrictions and limitations on the use of Electronic Devices will not be permitted to possess or use such Devices.
2. If there is Reasonable Cause to believe that an Electronic Device has been used in violation of this policy or a Patient is considered unsafe, such Device and/or Accessories may be secured and shall be subject to inspection and returned in accordance with DMH procedures.
3. The Treatment Team for a Patient who has lost the privilege to possess or use an Electronic Device and/or Accessories as a result of a violation of this Policy or for safety considerations shall determine reasonable conditions upon which the Patient may resume possession or use of the Device and/or Accessories pending clinical stability and appropriate behavior and will inform the Patient of such conditions.

G. Safety Inspections

Facilities shall ensure any Electronic Device and their charging unit is deemed safe in accordance with procedures.

V. POLICY IMPLEMENTATION

Facility Directors and the Director of the Office of Inpatient Management are jointly responsible for implementing this policy. The Office of Inpatient Management shall develop and issue procedures for implementing this policy. Facilities may develop their own protocols, consistent with this policy and applicable DMH Procedures.

VI. REVIEW OF THIS POLICY

This policy and its implementation shall be reviewed annually.