

Instant Messaging Policy

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What is in this policy?

The Instant Messaging Policy formalises the University Hospitals Bristol NHS Foundation Trust's (the Trust) stance on the use of unapproved instant messaging (IM) apps, such as WhatsApp, Facebook Messenger and Snapchat, and promotes the use of the Trust's secure alternative, Careflow Connect. Please also refer to the Trust's Corporate Social Media Policy and Social Media for Personal Use Policy.

Document Change Control				
Date of Version	Version Number	Lead for Revisions (Job title only)	Type of Revision	Description of Revision
27/07/2018	0.1	Information Governance Officer	Major	First draft
30/07/2018	0.2	Information Governance Officer	Minor	Sections 5, 6 & 7 rewritten in response to feedback
07/08/2018	0.3	Information Governance Officer	Minor	Careflow registration process and storage information added to section 6.4 and assorted minor changes.
14/11/18	0.4	Information Governance Officer	Minor	Revised in light of published IM Guidance from NHS England
19/11/18	0.5	Information Governance Officer	Minor	Addition of section 6.6 and minor amendments to section 6.4
25/01/19	0.6	Information Governance Officer	Minor	Minor additions to sections 6.4, 6.5, 7.1 & 7.3
20/12/19	2.0	Information Governance Officer	Major	Annual review of policy, no major changes to be made. Review period now 36 months.

Sign off Process and Dates				
Groups consulted	Date agreed			
IRMG	16/12/2019			
Policy Assurance Group	N/A			
Risk Management Group	14/01/2020			
Nisk Management Group	14/01/2020			
	1			

- **Stakeholder Group** can include any group that has been consulted over the content or requirement for this policy.
- **Steering Group** can include any meeting of professionals who has been involved in agreeing specific content relating to this policy.
- Other Groups include any meetings consulted over this policy.
- Policy Assurance Group must agree this document before it is sent to the Approval Authority for final sign off before upload to the DMS.

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Do I need to read this Policy?

All Staff who use Instant Messaging Apps

Must read the whole policy

1. Introduction

Instant messaging (IM) is a type of online chat that offers real-time transmission of messages over the internet. Over time, IM platforms have developed from text only, to allowing the transmission of audio and visual messages, as well as location and documents.

Today, most IM takes place on mobile apps such as WhatsApp, Facebook Messenger and Snapchat.

Despite end-to-end encryption on some platforms, these apps have not been approved for the transmission of confidential information by the NHS or the Trust.

The Trust has adopted Careflow Connect, as the approved secure alternative communications and messaging app that links with Medway to provide auditable, patient-centred communications that reduce the reliance on emails, telephones and pagers.

Careflow Connect can be used on all Trust IT devices, and can be downloaded to your personal device.

2. Purpose

The Instant Messaging Policy formalises the Trust's stance on the use of unapproved IM apps, such as WhatsApp, Facebook Messenger and Snapchat, and promotes the use of the Trust's secure alternative, Careflow Connect.

3. Scope

This policy applies to all staff using IM apps such as WhatsApp, Facebook Messenger or Snapchat and those signed up to use Careflow Connect.

4. Definitions

4.1 Instant Messaging

Real-time transmission of messages and other digital media over a data network.

4.2 Encryption

The process of encoding a message or information in such a way that only authorised parties can access it.

4.3 Confidential Information

Information provided in confidence by an individual, that they would expect to not be shared further without their consent or a suitable exemption. This includes medical information, demographic information and information about 3rd parties.

4.4 Group Administrator

A nominated person with control over the messaging group and is responsible for monitoring the content and membership of the group

5. Duties, Roles and Responsibilities

5.1 Trust Board of Directors

- (a) The Trust Board is the Data Controller for the purposes of the General Data Protection Regulation 2018 and Data Protection Act 2018.
- (b) The Board is responsible for seeking assurance that information collected, processed and held within the Trust is processed according to statutory requirements.

5.2 Information Risk Management Group

- (a) Takes overall ownership of the monitoring of this policy
- (b) Monitors incidents in relation to this policy
- (c) Approves corporate use of unapproved IM apps for one way communications

5.3 Information Technology Management Group

(a) Monitors the completion of proactive audits by the Information Asset Administrator

5.4 Information Asset Owner (Chief Information Officer)

(a) Takes overall responsibility for the management of Careflow, or any other IM platform that may be approved by the Trust, and any associated risks

5.5 Information Asset Administrator (Clinical Systems Group Manager)

(a) Manages Careflow or any other IM platform that may be approved by the Trust on a day to day basis

5.6 Group Administrators

- (a) Ensures that the group membership is appropriate for the conversation
- (b) Monitors content for any information governance concerns
- (c) Monitors content in line with other policies

5.7 All Staff

(a) Ensures that no confidential information is sent via unapproved instant messaging apps, including WhatsApp, Facebook Messenger and Snapchat.

(b) Reports any insecure transmission of confidential information on Datix

6. Policy Statement and Provisions

6.1 Information Governance

Regardless of the form of communication (email, phone, IM) used, the principles of information governance still apply.

All staff must ensure that all information used in the performance of their role is secure and that patient and staff confidentiality is maintained at all times.

All communications by staff may be requested under an individual's <u>right of access</u> to information the Trust holds about them or under the <u>Freedom of Information Act</u>.

The use of IM apps does not change your responsibility to maintain a comprehensive medical record. Any advice or decisions made via IM should be transcribed and attributed in the patient's medical record.

NHS England's <u>guidance</u> explicitly states that staff should, "Only use a standalone instant messaging application if your organisation does not provide a suitable alternative".

Section 4.5 of the Staff Conduct Policy states that all staff should understand their responsibilities about the confidentiality of information, and that includes its secure storage. Information in Careflow Connect is stored within the app, whereas other IM apps store information on the device. Staff must not store confidential information on any non-trust provided device.

6.2 Careflow Connect

Careflow Connect is the Trust's alternative messaging platform that links with Medway to provide secure, patient-centred communication. Careflow Connect also has specialist functions to cover task management, patient handover and internal referrals. All conversations and transactions on Careflow are auditable and reduce reliance on email, telephones and pagers.

Careflow Connect is available on any Trust device, including Trust PCs, and can be downloaded from the Apple App Store or Google Play Store for your own mobile device. No information is stored on the device running Careflow Connect.

Careflow Connect is used in much the same way as established messaging apps such as WhatsApp and can be used to communicate with individuals and groups.

Staff wishing to register to use Careflow Connect should log a request with the IT Service Desk either on the <u>self-service portal</u> or by emailing <u>ITServiceDesk@UHBristol.nhs.uk</u>.

Departments and services wishing to make use of the specialist functions listed above, should also log a request with the IT Service Desk to evaluate the change process.

6.3 Device Security

In order to activate Careflow Connect on your personal device, the Trust's Digital Services Department will require confirmation that your device is suitably secured including:

- A passcode, pattern, or biometric security is required to access your device
- The device locks after a short period of inactivity
- The device has the most up to date available version of its operating system and has not been rooted or jailbroken
- Message notifications are disabled on the lock screen
- The Trust's Mobile Device Management Software is installed

6.4 WhatsApp & Other Platforms

IM apps such as WhatsApp, Facebook Messenger and Snapchat have not been approved by the Trust or NHS Digital for sharing confidential information.

Messaging apps have different levels of encryption. Messages are generally encrypted through transmission but are unencrypted once they are received. This means that anybody can access the messages and their contents if they can access the phone.

The ongoing link and data sharing between WhatsApp and its owner, Facebook, is unclear and should their policy change in the future, patients' confidentiality may be at risk.

Messages sent via these unapproved IM apps may be stored on servers located in the US, which has laws that permit several government agencies to access the information if they so wish. The US is also outside of the permitted geography for NHS information to be stored and processed, which also puts the Trust at risk of the breaching the European Union's General Data Protection Regulation.

Any use of WhatsApp or other IM apps to share confidential information in any format is a breach of this policy and should be reported as an Information Governance Incident on <u>Datix</u>.

WhatsApp and other IM apps can be used by staff in a purely personal capacity, but the discussion of patients, confidential information or any communication relating to the conduct of the user's work, e.g. requests to perform tasks, must remain off limits.

WhatsApp and other IM apps can be utilised for official Trust business to send out one way communications to recipients who have signed up to receive updates or as a method to notify staff of serious incidents. Any use of IM apps for these purposes, will be required to complete a Data Protection Impact Assessment, which must be approved by the Information Governance Team and a list will be kept in appendix E of this policy.

6.5 Group Messages

Group administrators, for Careflow Connect and any unapproved IM app, have a number of responsibilities to ensure:

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- Group membership is appropriate for the purpose of the conversation
- All members are aware of their IG responsibilities, particularly when sending messages on WhatsApp or other IM apps
- Content is monitored for IG concerns or issues and any concerns or issues are acted on immediately
- The group is being used appropriately and in line with other Trust policies

Any issues relating to message groups should be reported on Datix.

6.6 Major Network Outages

There may be times, where the Trust's network, and therefore its ability to communicate internally and externally, may be compromised. Examples of times this may occur (not limited to) are:

- Prolonged power outage
- Damage to network cables
- Ransomware or Cyber-attack

If the Trust's network and its ability to communicate via Careflow Connect, email and telephone are compromised, then the use of WhatsApp is permitted under the following precautions:

- Minimal amounts of patient data are to be communicated as necessary to maintain appropriate standards of care
- Transfer any decisions made or advice received into the patient's medical record
- Unlink the app from your photo library and any cloud file storage
- If you are a group administrator, ensure that only the correct people have membership of the group
- Ensure you are communicating with the correct person or group
- Separate social groups and conversations from any that are sharing confidential information

Once the Trust's network is operational, and existing lines of communication are back open, then the use of WhatsApp for sharing confidential information must be discontinued.

7. Standards and Key Performance Indicators

7.1 Applicable Standards

General Data Protection Regulation 2018

Data Protection Act 2018

Freedom of Information Act 2000

Security of Network & Information Systems (NIS) Directive 2018

7.2 Measurement and Key Performance Indicators

Proactive audit logs of the use of the Careflow system by individuals and groups will be generated by the Information Asset Administrator.

The Information Governance Team will monitor any incidents reported to see if any information has been wrongly disclosed via unapproved IM apps.

8. Associated Internal Documentation

Information Governance Policy

Data Protection Policy

Corporate Social Media Policy

Social Media for Personal Use Policy

Dignity at Work Policy

Staff Conduct Policy

Data Protection Impact Assessment SOP

9. Appendix A – Monitoring Table for this Policy

The following table sets out the monitoring provisions associated with this Policy.

Objective	Evidence	Method	Frequency	Responsible	Committee
Acceptable Use of Careflow	Audit Logs	Proactive audit	Quarterly	Information Asset Administrator	IT Management Group
Acceptable Use of other IM apps	Datix Incidents	Investigation	Ad Hoc	Information Governance	Information Risk Management Group

10. Appendix B - Dissemination, Implementation and Training Plan

The following table sets out the dissemination, implementation and training provisions associated with this Policy.

Plan Elements	Plan Details
The Dissemination Lead is:	Information Governance
Is this document: A – replacing an expired policy, B – replacing an alternative policy, C – a new policy:	С
Alternative documentation this policy will replace (if applicable):	[DITP - Existing documents to be replaced by]
This document is to be disseminated to:	All Staff
Method of dissemination:	Newsbeat, DMS + on sign up.
Is Training required:	No
The Training Lead is:	N/A

Additional Comments	
[DITP - Additional Comments]	

11. Appendix C - Equality Impact Assessment (EIA) Screening Tool

Query	Response
What is the main purpose of the document?	To formalise the Trust's position on the use of instant messaging apps such as WhatsApp and promote the use of Careflow.
Who is the target audience of the document (which staff groups)? Who is it likely to impact on? (Please tick all that apply.)	Add ☑ or ☑ Staff & Patients

Could the document have a significant negative impact on equality in relation to each of these characteristics?	YES	NO	Please explain why, and what evidence supports this assessment.
Age (including younger and older people)		$\overline{\mathbf{Q}}$	
Disability (including physical and sensory impairments, learning disabilities, mental health)		V	
Gender reassignment		V	
Pregnancy and maternity		V	
Race (includes ethnicity as well as gypsy travelers)		V	
Religion and belief (includes non-belief)		V	
Sex (male and female)		$\overline{\square}$	
Sexual Orientation (lesbian, gay, bisexual, other)		V	
Groups at risk of stigma or social exclusion (e.g. offenders, homeless people)		V	
Human Rights (particularly rights to privacy, dignity, liberty and non-degrading treatment)		V	

Will the document create any problems or barriers to any community or group?

NO

Will any group be excluded because of this document?

NO

Will the document result in discrimination against any group?

NO

If the answer to any of these questions is YES, you must complete a full Equality Impact Assessment.

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Could the document have a significant positive impact on inclusion by reducing inequalities?	YES	NO	If yes, please explain why, and what evidence supports this assessment.
Will it promote equal opportunities for		Ø	
people from all groups?			
Will it help to get rid of discrimination?		V	
Will it help to get rid of harassment?		V	
Will it promote good relations between		Ø	
people from all groups?			
Will it promote and protect human rights?		V	

On the basis of the information / evidence so far, do you believe that the document will have a positive or negative impact on equality? (Please rate by circling the level of impact, below.)

Positive impact			Ne	gative Impact	
			NONE		

ls	a full	equality	/ impact	assessment	required?	NO
	a ran	cquant	HILIPACE	assessifient	requirea.	

Date assessment completed: 27/07/2018

Person completing the assessment: Information Governance Officer

12. Appendix D - Approved Organisational Use of WhatsApp

Ref No	Platform	Purpose	Lead	Group or Broadcast?	Date Approved
1	WhatsApp	Notify job seekers of vacancies in Facilities and Estates		Broadcast	05/03/2018
2	WhatsApp	Pilot – Junior Doctor Engagement		Broadcast	25/07/2018
3	WhatsApp	Major Incident Notification & Support Group		Group	16/10/2018
4					
5					
6					
7					