Policy: It is the policy of the Division of Mental Health and Developmental Services to ensure staff utilize personal communication devices provided by the Division/Agencies in accordance with the following procedures.

Purpose: The purpose of this policy is to define the use, provide rationale for reimbursement when warranted, and describe how the utilization of personal communication devices will be monitored by Agency directors or supervisors. For the purpose of this policy, personal communication devices include, but are not limited to; cellular phones, PC tablets, and personal digital assistants (PDA's), such as Blackberry®, or Sprint Treo® devices.

Procedures:

I. Justification for Purchase:

A. The purchase of each personal communication device must be for a valid state business purpose. The rationale for the decision to purchase a personal communication device must be clearly documented before the purchase.

B. The service plan used must be the most economical for the planned usage. The rationale for the decision of which plan and/or cellular service to use must be clearly documented before the purchase. Periodic monitoring of actual phone usage should be completed to determine the continued appropriateness of the service plan being purchased.

II. Personal Communications Device Use Guidelines:

A. Division personal communication devices can be used for emergency personal uses within the limits and guidelines of SAM 1616.0.

B. No additional charges are to be accrued above the monthly service plans, unless approved by immediate supervisor; such as disaster operations etc. Consideration should be given to whether it would be more economical for the Division to reimburse the employee for the state business use of a personal communication device.

C. Employees may be reimbursed for the cost of state business calls placed on a personal communication device. The Division may reimburse the employee for any portion of the monthly service charge associated with a personal communication device used for state business purposes.

D. This equipment becomes loaned property to be in continuous possession of the authorized staff member.

E. Unless on pre-approved annual or sick leave, the undersigned individual agrees that this cellular phone must be active during:
1. Standard working hours (Monday-Friday 8:00am-5:00pm); and
2. Disaster activations or related assignments; and
3. When specifically requested by MHDS.

F. If this equipment is lost, or stolen, it must be replaced by the undersigned individual. The Division will be responsible for any repair of any equipment when the damage is not due to negligence.

G. If any individually identifiable health information as covered under HIPAA Health Insurance Portability and Accountability Act and/or MHDS Policy 6.002, is stored on any personal communication device, access to said device must be password protected at all times.

H. It is the responsibility of the undersigned individual to delete all personal information prior to relinquishing ownership of the equipment.

III. Review of Monthly Bills:

A. Agency accounting personnel will review each personal communication device bill. A copy of any bill containing a charge for personal usage will be forwarded to the employee responsible for the personal calls. The employee must reimburse the state for any such charges within 5 working days of the receipt of the bill.

IV. Monitoring of Policy Compliance:

A. The attached Division personal communication device loan/authorization shall be completed and signed by each Division employee assigned a Division purchased personal communication device. (Attachment A)

B. Agency directors and/or immediate supervisors will be responsible for the monitoring of personal communication device usage to ensure compliance with this policy and the continued appropriateness and justification for the use of personal communication devices and the service plans being purchased.

V. Each Division agency shall develop specific written procedures to implement the provision of this policy or shall incorporate this policy into the agency policy manual.

Harold Cox

Administrator

Attachment A: Division Personal Communication Device Loan/Authorization

Effective Date: 6/19/97
Date Revised: 7/1/05, 10/13/06; 12/12/07; 2/22/08
Date Approved by MHDS Commission: 9/27/96

ATTACHMENT A

DIVISION CELLULAR PHONE LOAN/AUTHORIZATION

A signature affixed to this form constitutes an agreement to authorize the use of MHDS equipment expressly for work of the Division with the following understandings:

A. This equipment can be used for emergency personal uses within the limits and guidelines of SAM 1616.0. It is the employee's responsibility to understand and adhere to SAM and MHDS policies regarding cell phone use.
B. This equipment becomes loaned property to be in continuous possession of the authorized staff member.
C. Unless on pre-approved annual or sick leave, the undersigned individual agrees that this cellular phone must be active during:
   1) Standard working hours (Monday-Friday 8:00 AM - 5:00 PM); and
   2) Disaster activations or related assignments; and
   3) When specifically requested by MHDS.

DESCRIPTION OF EQUIPMENT (be specific):
MAKE:

MODEL:

SERIAL #: n/a

NV ID TAG #: n/a

NOTATIONS:

I accept this equipment loan with the above-specified understandings.

Signature of authorized staff: _____
loanee *date*

Name of authorized staff: (please ty*pe or print*) _____

Witness: _____