

# **UW Medicine**

**UW SCHOOL  
OF MEDICINE**

Date: September 24, 2013

To: UW School of Medicine Department Chairs  
UW School of Medicine Department Directors and Administrators  
UW Medicine Central Budget Leadership  
Dean's Office Unit Leadership

From: David C. Green   
Chief Financial Officer  
Dean of Medicine, SoM  
Box 356340

Re: UW Medicine Mobile Device Use and Allowance Policy ~ School of Medicine Communication

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I write regarding the new UW Medicine Mobile Device Use and Allowance policy, which supersedes the existing University of Washington School of Medicine (SoM) cellular phone policy. Under the new policy effective July 1, 2013, UW Medicine updated the business justifications for approving University of Washington (UW) issued cellular phones, as well as stipends (see attached policy and accompanying FAQs). With the issuance of this policy, all new mobile devices requests must comply with the new UW Medicine policy. All existing UW Medicine mobile devices will need to be reviewed and re-approved prior to January 1, 2014.

### **Actions Required for Existing Devices**

- Each unit should compile a list of all mobile devices in the unit and determine if the existing mobile devices are appropriate to continue based on the revised mobile device approval criteria.
- For those not to be continued, the unit should end the service or transfer the phone number to a personal account by no later than December 31, 2013. Each SoM department with existing mobile devices have accounts with their respective service providers and are authorized to end service or transfer the phone number to a personal account. For dean's office or UW Medicine Central units, please contact Rudy Gonzalez who can assist with the process. For more information see the following UW website:
  - <http://www.washington.edu/itconnect/connect/phones/cell-phones/>
- For all UW owned mobile devices that the unit would like to continue to use and or convert to a stipend, the following steps should be completed:
  - For each request to convert a UW cellphone to a stipend, the supervisor should complete the "UW Medicine Mobile Device Allowance Agreement."
  - The unit head should complete the accompanying "UW Medicine - Mobile Device Tracking Worksheet" to include all requests for a stipend in support of a mobile device

or to continue the use of existing UW mobile devices that the unit is requesting approval effective January 1, 2014.

- These worksheet and accompanying signed “UW Medicine Mobile Device Allowance Agreements” should be submitted to the SoM chief financial officer’s office by no later than December 15, 2013 for review and approval.

***Actions Required for New Mobile Device Requests after January 1, 2014***

- For requests for stipends, the supervisor should complete the “UW Medicine Mobile Device Allowance Agreement” and route to the chief financial officer for review and approval.
- For requests for new UW cellphones or other mobile devices, the approving unit should send an email to the chief financial officer with the following information for review and approval:
  - Employee name
  - Business justification
  - Equipment purchase cost estimate
  - Service cost estimate
- Upon approval of each allowance or UW mobile device, the unit head should update the unit’s “UW Medicine – Mobile Device Tracking Worksheet.”

***Annual Responsibilities***

For units with approved mobile devices, as outlined in section 6A of the UW Medicine policy, the unit head will be responsible for the following:

- Each unit will need to annually submit any new requests for Mobile devices.
- Each unit will need to annually review existing mobile devices and or stipends to ensure they continue to meet the UW Medicine Policy criteria.
- Each unit will need to communicate annually with any employees who are using a UW issued mobile device that they need to comply with UW APS 47.2 as outlined in the policy (mobile devices are limited to business use only).
- Each unit will be required to annually submit an updated “UW Medicine – Mobile Device Tracking Worksheet” to confirm annual review of approved mobile devices for your unit.

I will coordinate with each SoM department administrator or director, dean’s office units and UW Medicine Central Budget unit head to confirm if they have mobile devices they plan to request to continue under the new policy and verify they will be submitting a “UW Medicine – Mobile Device Tracking Worksheet” by December 15, 2013.

If you have any questions related to the UW Medicine policy and or the approval and tracking requirements, please contact me with your questions ([dcgreen@uw.edu](mailto:dcgreen@uw.edu) or 206.685.7481).

## ***Administrative Policies and Procedures***

### **UW Medicine Mobile Device Use and Allowance Policy**

#### **1. Applicability**

This policy applies to UW Medicine entities when they: 1) issue mobile devices to University of Washington faculty, trainees and staff (collectively “UW Medicine Workforce Members”); or 2) provide monthly allowances to UW Medicine Workforce Members for the business use of personally owned mobile devices.

#### **2. Purpose**

UW Medicine is committed to ensuring that its arrangements for mobile devices are consistent with all relevant University of Washington (“UW” or “University”), UW Medicine and state of Washington policies and laws. This *UW Medicine Mobile Device Use and Allowance Policy* establishes the conditions under which UW Medicine entities may issue mobile devices or provide monthly allowances for the business use of personally owned mobile devices to UW Medicine Workforce Members, and outlines the internal processes by which such arrangements are to be approved and administered.

#### **3. Background**

The UW has implemented a UW-wide *Mobile Device Use and Allowance Policy* (Administrative Policy Statement (APS) 55.1), which provides for the use of UW-funded mobile devices or stipends for business purposes:

- A. **UW-issued Devices:** UW entities may purchase mobile devices and pay for the monthly usage cost of the device. The mobile device can be assigned to an individual, and use of the device must be limited to business use in accordance with the Washington State (“State”) ethics policy and UW APS 47.2, *Personal Use of University Facilities, Computers and Equipment by University Employees*.
- B. **Allowable Stipend for Personal Mobile Device Used for Business Purposes:** Administrators and department heads may choose to provide a taxable, monthly allowance to be paid to an individual as an offset for the business use of their personally owned mobile device.

#### **4. UW Medicine Policy**

While permitted by UW Policy, approval of a UW-issued device or a stipend for a personal mobile device for a UW Medicine Workforce Member will be granted only **in rare and limited circumstances** as described in this *UW Medicine Mobile Device Use and Allowance Policy*.

UW-issued mobile devices or UW-approved stipends for mobile device use will be approved only when there is a compelling business need. A compelling business need exists when accessibility through a mobile device is a required element of a UW Medicine Workforce Member's position in the judgment of the UW Medicine individual with authority to approve issuance of a UW-issued device or a stipend to support a mobile device.

UW Medicine has determined that in the academic medical environment a compelling business need is not, by itself, sufficient basis to justify approval of a UW-issued device or a stipend to support a mobile device. This is because mobile devices are widely used by UW Medicine Workforce Members as a matter of convenience and lifestyle choice and the *de minimis* limitations on use of state resources means that individuals with UW-issued devices may also have personal devices. In addition, utilizing personal mobile devices for work use often does not result in significant additional cost to UW Medicine Workforce Members.

Therefore, in addition to a compelling business need, one of the following circumstances must apply in order for a UW-issued device or a stipend to support a mobile device to be approved:

- A. The UW Medicine Workforce Member's position requires international travel on a frequent basis.
- B. The UW Medicine Workforce Member primarily works away from their office at one or more off-site locations in which communication by land line is not possible or practical, and a mobile device is the primary means to communicate with the UW Medicine Workforce Member.
- C. The UW Medicine Workforce Member's pay grade status is professional staff grade 8 or below or the UW Medicine Workforce Member is classified staff.
- D. The mobile device is intended for use within a business unit or clinical service by multiple people and is not assigned to an individual.

- E. The mobile device is allowable as a direct expense under the terms and conditions of a sponsored award for the purposes of the sponsored award. In such situations, this policy applies to the use of the mobile device.

Whether the requirements for approval are present and whether a UW-issued device or a stipend to support a mobile device will be approved are at the discretion of the UW Medicine individual with authority under this policy to approve issuance of a UW-issued device or a stipend to support a mobile device.

## 5. Effective Date

This *UW Medicine Mobile Device Use and Allowance Policy* is effective July 1, 2013, for any new UW-issued mobile devices. For Workforce Members with a UW-issued mobile device, the UW Medicine entity must transition into compliance with this UW Medicine Policy by December 31, 2013.

## 6. Approval Process

When authorized, UW Medicine entities must comply with APS 55.1 and the following additional requirements:

- A. Each individual with delegated authority who approves a UW-issued device or a stipend for a personal mobile device remains responsible for fiscal oversight and compliance with State ethics laws related to personal use of State resources. Those with delegated authority are expected to perform the following oversight processes:
  - i. Maintain and annually review their list of UW Medicine Workforce Members with approved mobile devices or allowable stipends to confirm the UW Medicine Workforce Members still require a mobile device or allowable stipend based on job responsibilities and meets the criteria of this policy.
  - ii. Retain documentation of the annual review and re-approval of mobile devices and/or allowable stipend levels.
- B. In the limited situations described above, mobile device allowances may be provided for the business use of phone, data and text functions of the mobile device. The stipend amounts for phone, data and text shall be as follows:
  - i. Phone - \$25.00/month
  - ii. Data - \$15.00/month
  - iii. Text - \$15.00/month

C. Delegated authority to approve requests for mobile devices and/or stipends under this policy are as follows:

- i. The UW School of Medicine chief financial officer (CFO) has authority to approve for all units of the UW School of Medicine and for other business units that report directly to the chief executive officer, UW Medicine, executive vice president for medical affairs and dean of the School of Medicine, University of Washington (CEO/EVPM/Dean).
- ii. Authority to approve for all other classified and professional UW Medicine Workforce Members working within the business units that report to a vice president for medical affairs is delegated to the vice president or designee.

## 7. Workforce Member Responsibilities

UW Medicine Workforce Members who use a UW Medicine-issued mobile device to conduct UW Medicine business are expected to maintain a personal mobile device for personal use if the UW Medicine Workforce Member engages in any personal use. UW Medicine-issued or personally-owned mobile devices are subject to all applicable policies and laws, including but not limited to those governing the protection of information: protected health information (PHI); personally identifiable information (PII) on students, employees, and research subjects; financial information belonging to the University or individuals (including social security numbers and credit card information); and proprietary information (such as trade secrets).

All UW Medicine Workforce Members are required to configure mobile devices used to conduct UW Medicine business, whether personally owned or provided by UW Medicine, in such a way that protects UW Medicine information. (See [Smartphone Configuration](#) for UW best practices and more information).

If the UW Medicine Workforce Member uses a personal mobile device for UW Medicine business and UW Medicine determines that the confidentiality, integrity, and availability of UW Medicine information is at risk as a result of that use, the UW Medicine Workforce Member may be required to provide UW Medicine unrestricted access to the device and access to the device's data repositories and any content on the device that is related to UW Medicine. UW Medicine reserves the right to remotely wipe data from any device connected to the UW infrastructure (including, but not limited to, a UW-owned or managed Exchange server). UW Medicine may require an employee to remove any UW Medicine-related business information from a personally owned or managed data repository.

UW Medicine Workforce Members receiving a mobile device allowance will have personal responsibility for their mobile devices and related service charges. The device itself, service contract, monthly service charges, and other related charges are the UW Medicine Workforce

Member's responsibility. Further, any data and records associated with the device that are created, used or maintained in the conduct of UW Medicine business are subject to all applicable laws, including public records laws, and have a legally required records retention schedule.

## 8. Summary of Other Relevant UW and UW Medicine Policies

- A. [UW Administrative Policy Statement 55.1, "Mobile Device Use and Allowance Policy"](#)
- B. [UW Administrative Policy Statement 2.2, "University Privacy Policy"](#)
- C. [UW Mobile Device Guidelines](#)
- D. [UW Administrative Policy Statement 47.2, "Personal Use of University Facilities, Computers and Equipment by University Employees."](#)
- E. [UW Cell Phone and Mobile Device Costs on Grants & Contracts](#)

The use of UW Medicine resources, including mobile devices, usage plans, internet access and networks is subject to a number of specific rules and policies. As employees of State agencies, faculty and staff are subject to State law and UW policy<sup>1</sup> that prohibits the use of State resources for personal use, except under certain circumstances. State resources may not be used to support, promote, or solicit for an outside organization or group unless otherwise provided by law and University policy, to assist an election campaign, promote or oppose a ballot proposition or initiative, or lobby the State legislature. Supervisors are responsible for monitoring the use of State resources via regular budgetary review processes and determining whether frequency or volume of use complies with the law. Supervisors are responsible to counsel staff as needed, and revoke access privileges, if necessary.<sup>2</sup> If counseling is required, the supervisor is required to report the matter to the individual with delegated authority to approve mobile devices or stipends.

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1 APS 47.2: Personal Use of University Facilities, Computers, and Equipment by University Employees [<http://www.washington.edu/admin/rules/APS/47.02.html>]).

2 Faculty and staff who violate published University policies regarding the personal use of University resources, facilities, computers, and equipment, or policies regarding outside work and conflict of interest are subject to appropriate disciplinary or corrective action, including dismissal. Allegations of noncompliance with APS 47.2 are handled in accordance with APS 47.10: Policy on Financial Irregularities and Other Related Illegal Acts [<http://www.washington.edu/admin/rules//APS/47.10.html>]. In addition, the state Executive Ethics Board has the authority to investigate allegations of improper use of state resources (per [RCW 42.52.360](#)), and is charged with enforcing laws and rules prohibiting state workers from improperly using state resources. The Executive Ethics Board's determinations and actions are independent of any disciplinary or corrective action taken by the University.

F. Patient privacy must be maintained in all communications. Do not disclose information that may be used to identify patients or their health condition.<sup>3</sup> Relevant UW Medicine privacy policies include:

- i. [PP-07: Use and Disclosure of Protected Health Information to Carry Out Treatment, Payment, and Health Care Operations](#)
- ii. [PP-08: Use & Disclosure of Protected Health Information Requiring Authorization](#)

Phone records, email communications and internet use may be subject to disclosure under the Public Records Act or for audit purposes.<sup>4</sup>

Other relevant UW and UW Medicine policies include, but are not limited to, the following:

- A. [UW Medicine Information Security Policies](#)
- B. [UW Electronic Information Privacy Policy on Personally Identifiable Information](#)
- C. [UW Access and Use Agreement](#)
- D. [UW Information Security policies](#)
- E. [UW Minimum Data Security Standards](#)
- F. [UW Data Management Policy](#)
- G. [UW Guidelines for Electronic Discovery](#)

Approved by:



July 25, 2013

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Paul G. Ramsey, M.D.

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Date

CEO, UW Medicine

Executive Vice President for Medical Affairs and

Dean of the School of Medicine,

University of Washington

3 Disclosing confidential patient information in an inappropriate manner is a federal offense under the Health Insurance Portability and Accountability Act (HIPAA). The sanctions include significant fines and/or criminal penalties. UW Medicine takes violations of patient privacy very seriously. Suspected noncompliance with the privacy rules is handled in accordance with PP-05: Complaints Related to UW Medicine Privacy Practices [[http://depts.washington.edu/comply/docs/PP\\_05.pdf](http://depts.washington.edu/comply/docs/PP_05.pdf)]. Violations of the privacy rules will result in corrective action in accordance with PP-06: Corrective Actions for Noncompliance with Privacy and Information Security Policies [[http://depts.washington.edu/comply/docs/PP\\_06.pdf](http://depts.washington.edu/comply/docs/PP_06.pdf)].

4 See APS 47.2.2 (<http://www.washington.edu/admin/rules/policies/APS/47.02.html>)

