



TEXAS TECH UNIVERSITY HEALTH SCIENCES CENTER EL PASO

Operating Policy and Procedure

HSC OP: 52.05, **Texting of Protected Health Information (PHI)**

PURPOSE: The purpose of this policy is to define accepted practices, responsibilities and procedures for the transmission of PHI via secure text messaging between clinic providers and staff. Text messaging is a form of informal communication that can be beneficial if used appropriately.

REVIEW: This HSC OP will be reviewed in July of each odd-numbered year (ONY) by the TTUHSC EP Institutional Privacy Officer, the TTUHSC EP Information Security Officer, and the HIPAA Committee, with recommendations for revisions forwarded to the Institutional Compliance Officer by October 1.

POLICY/PROCEDURE:

I. Eligibility

Secure messaging solutions may be used by TTUHSC EP health care professionals. However, the secure messaging solution must first be approved by the Office of Institutional Compliance and the Information Technology Department.

A. TTUHSC EP faculty, staff, and students can use a smart phone, TTUHSC EP managed computer workstation or device, or a personal mobile device to access the secure messaging solution.

II. Scope of Use

A. Text messaging is considered informal communication.

B. Secure text messaging is not intended for use in emergency situations.

C. All messages that reference a patient should include two patient identifiers in order to confirm patient identity.

D. Secure texting should **not** be used as a method to communicate patient orders.¹ Patient orders should be entered directly by the Provider into the Electronic Medical Record. In instances where this is not possible, telephone communication should be used for placing or modifying patient orders. This allows the read-back verification process to take place appropriately.

E. Text messages are not stored as part of the medical record. Text messages are automatically deleted after 7 days and archived for 30 days.

III. Ownership

A. All data transmitted via the secure texting application is the sole property of TTUHSC EP.

¹ The Joint Commission Record of Care, Treatment, and Services Standards frequently asked questions regarding Texting Orders: "it is not acceptable for physicians or licensed independent practitioners to text orders for patients to the hospital or other healthcare setting. This method provides no ability to verify the identity of the person sending the text and there is no way to keep the original message as validation of what is entered into the medical record".

TTUHSC EP has absolute right of access to all of the data sent via secure texting and may exercise its right whenever it is deemed appropriate.

- B. Audits by the Office of Institutional Compliance or Information Technology-Security Division will be conducted as needed to determine compliance with TTUHSC EP policy guidelines.

IV. Registration

- A. Those needing the secure messaging service must first register with Electronic Medical Records in order to be added to the application directory. Contact the Electronic Medical Records Department at 915.215.4022 for registration.

V. Security

- A. Refer to TTUHSC EP IT Policy 56.01, Use of Information Technology Resources for additional guidelines on mobile device security.
- B. Users of mobile devices are responsible for physical security of these devices both onsite and offsite. In the event a mobile device becomes lost or stolen, either personal or TTUHSC EP owned, the responsible TTUHSC EP faculty, staff or student shall report the incident immediately to his/her supervisor, the TTUHSC EP Privacy Officer (IPO), and the TTUHSC EP Information Security Officer (ISO).
- C. Refer to TTUHSC EP IT Policy 56.01 that users should never share logins, passwords, or other security measures and should not disable or alter any security measures configured on a mobile device.

VI. Right to Change Policy.

TTUHSC EP reserves the right to change, modify, amend or rescind this policy in whole or in part at any time without the consent of employees.