

STANDARD OPERATING PROCEDURE FORENSIC – HANDHELD RADIOS

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VALIDITY – All local SOPS should be accessed via the Trust intranet

CHANGE RECORD

Version	Date	Change details
1.0	Sep 2020	New SOP.
2.0	Feb 2023	Reviewed and updated. Approved at ODG (13 February 2023).

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1. INTRODUCTION

The Humber Centre and Pine View use handheld radios in a variety of situations as a means of short distance communication, both within the buildings and without.

2. SCOPE

This procedure applies to all staff within the service who are storing, issuing, using or arranging for the use of handheld radios.

3. PROCEDURE STATEMENT

The service leases a number of handheld radios to support staff in their duties where effective communication over short distances is required (i.e. no more than the grounds agreed with the MOJ)

This use must be in the knowledge that the frequencies used are not 'secure', and that there is the potential for listening in on sensitive patient and/or operational information.

4. DUTIES AND RESPONSIBILITIES

All staff who are expected to store, maintain, use or support the use of handheld radios will be aware of this procedure, and will practice in accordance with it.

5. PROCEDURES

5.1. Frequencies

The service has a licence to use two frequencies:

- Channel 1 – routine radio traffic.
- Channel 2 – fire radio traffic (**no other use**)

5.2. Storage/Charging

Radios will be stored on chargers in reception, except for Fire Radios (set to Channel 2). Each ward at the Humber Centre will retain a radio set to Channel 2 on a solo charger, for use in the implementation of the Fire Procedure.

There will be a daily check of all fire radios at the start of the reception early shift)

5.3. Issue

Staff will be introduced to the use of radios as part of their security induction and their competence will be assessed by their line manager.

Staff will request the issue of a radio in line with the requirements of the task at hand (e.g. embarking on ground leave).

The radio will be issued by reception staff.

Staff carrying the radio will request a radio check prior to proceeding with their task. In the event of ground leave, the patient(s) will remain in the airlock, while staff leave the building to request the radio check.

It is the responsibility of staff carrying the radio to ensure that it is turned on, functioning effectively, and set to Channel 1 (unless for use as a Fire Radio).

5.4. Use

The service does not follow a rigid protocol of language to be used. However, staff will maintain a professional manner when using handheld radios, also staff must follow informational governance standards for maintaining confidentiality as this is an unsecure frequency. Any breach of confidentiality could be considered as gross misconduct under the disciplinary policy.

Staff will be sensitive that radio conversations may be overheard by non-service staff and will not identify patients in their radio communications.

Staff will (wherever possible) use/ wear radios discretely when in public places so as not to attract attention.

Staff will be aware of the following basic terms for use in radio communication.

“Message received and understood”- I have received and understand the message

“Over” – I have finished talking and am listening for your reply

“Out” – I have finished talking and am not expecting a reply

“Say again” – please repeat what you have just said

In the event of an adverse incident staff will convey the urgency of the situation over the radio in a professional manner, bearing in mind that the channels are not secure and that radio traffic may be overheard.

This guidance may be subject to on-the-spot decision making if necessary. It may be that more detail is necessary, and that this needs to be prioritised over the low risk of the message being overheard.

6. IMPLEMENTATION

All new staff will be required to read the service procedures as part of their service security induction and security refresher

7. MONITORING AND AUDIT

This procedure will be reviewed annually by the Security Group.