

# SESLHD POLICY COVER SHEET



**Health**  
South Eastern Sydney  
Local Health District

<b>NAME OF DOCUMENT</b>	Electrical devices – patient use of personal electrical devices
<b>TYPE OF DOCUMENT</b>	Policy
<b>DOCUMENT NUMBER</b>	SESLHDPD/290
<b>DATE OF PUBLICATION</b>	March 2022
<b>RISK RATING</b>	Medium
<b>LEVEL OF EVIDENCE</b>	National Safety and Quality Health Service Standards, Standard 1
<b>REVIEW DATE</b>	March 2025
<b>FORMER REFERENCE(S)</b>	Area Policy Directive PD 135
<b>EXECUTIVE SPONSOR or EXECUTIVE CLINICAL SPONSOR</b>	Director, Corporate and Legal Services, SESLHD
<b>AUTHOR</b>	Director, Clinical Engineering
<b>POSITION RESPONSIBLE FOR THE DOCUMENT</b>	Head of Facilities Management <a href="mailto:clayton.tubbs@health.nsw.gov.au">clayton.tubbs@health.nsw.gov.au</a>
<b>KEY TERMS</b>	Electrical devices, power cables, personal devices, plug packs, battery operated devices
<b>SUMMARY</b>	The purpose of this policy is to regulate and control the use of personal electrical devices of convenience within the South Eastern Sydney Local Health District. It applies to patients, visitors and staff of the Local Health District and its various facilities.

**COMPLIANCE WITH THIS DOCUMENT IS MANDATORY**  
**This Policy is intellectual property of South Eastern Sydney Local Health District.**  
**Policy content cannot be duplicated.**

Feedback about this document can be sent to [SESLHD-Policy@health.nsw.gov.au](mailto:SESLHD-Policy@health.nsw.gov.au)

## Electrical devices – patient use of personal electrical devices

SESLHDPD/290

### 1. POLICY STATEMENT

The use of personal electrical devices within South Eastern Sydney Local Health District (SESLHD) sites requires controls to minimise risks and ensure the safety of patient locations.

### 2. AIMS

The purpose of this policy is to regulate and control the use of personal electrical devices of convenience within the South Eastern Sydney Local Health District (SESLHD). It applies to patients, visitors and staff.

The policy is designed to reduce risks by removing all unnecessary power cables and plug packs from patient locations.

Additional precautions specific to the use of communication devices such as mobile phones and walkie talkies are outlined in NSW Health guideline, [NSW Health GL2005\\_045 Mobile Phones and Wireless Communication Devices – Interference with Medical Equipment – Use of.](#)

### 3. TARGET AUDIENCE

Hub General Managers, Facility Managers, Department Heads, Nurse Unit Managers, Clinical and Nursing staff

### 4. RESPONSIBILITIES

#### 4.1 Specific responsibilities

In order to ensure that patient-supplied equipment complies with and is maintained to the required standards, it would be preferred for owners of such equipment to obtain permission for use and supply copies of recent electrical testing, up to date maintenance check records and have arrangements in place for its inspection thereafter, as specified by the manufacturer of the device or by a qualified external contractor/service agent of their choice.

**Either the Department Head, Nurse Unit Manager (NUM), clinician or nursing staff** (or their delegate) is to visually inspect patient-supplied equipment and associated power cables/plug packs, using attached Appendix 2: Patient-supplied Equipment – Flowchart, to ensure that there are no signs of damage to the device or cables. This includes battery operated devices.

Note: if patients have been using the device regularly in their home environment, then to the best of our knowledge it can be assumed that the equipment is working correctly. This however does not negate the need to perform the above inspection.

**Admission staff** are to ensure that patients are aware of this Policy.

Patients who are admitted for short durations such as oncology day care patients and dialysis patients should, as far as practical, use battery powered devices only. This will eliminate unnecessary power cables and risks associated with use of mains power in potentially wet environments. Additional batteries should be brought in by the patient if their device is required to run the full length of their stay. Patients with obstructive sleep apnoea may be requested to bring

## Electrical devices – patient use of personal electrical devices

SESLHDPD/290

their continuous positive airway pressure (CPAP) machine and ancillary equipment with them at the time of admission.

**Patients** are also to be made aware that their personal electrical devices, cables and battery chargers/plug packs are to be visually inspected for damage prior to use and that battery only operated devices are preferred. **Any damage to the devices, cables or battery chargers/plug packs revealed by visual inspection will result in the item not being allowed to be used on the premises.**

Patients should also be made aware that the SESLHD does not bear liability for the loss of, theft, or damage to personal electrical equipment.

If the NUM or delegated person has any doubts about the risk involved by allowing the device to be used in the ward, then the Clinical Engineering department should be contacted as soon as possible, to have the device inspected or tested

### 4.2 General Principles

Patients and visitors are not to use their personal electrical devices whilst in SESLHD facilities where the use of the device may:

- Constitute an electrical safety risk;
- Constitute an electromagnetic interference (EMI) risk with the facility's life support medical equipment; or
- Pose a risk to staff and others (e.g. cables on the floor, heavy televisions on cabinets not designed for the weight, cables severed when dropping side rails of beds, cables in vicinity of fluids, etc.)

#### Caution

- In general, permission should be refused for patient-supplied mains-powered equipment to be used in a healthcare facility. (AS/NZS 2500:2020 Clause 5.8.5).
- Use of power boards and extension cords should be discouraged as they may compromise the environmental protection provided in patient locations. Double adaptors and piggy back plugs should not be used. (AS/NZS 2500:2020 Clause 6.7)
- Use of mains powered devices should be discouraged in bathrooms and wet areas.

#### During Use

- Mains operated devices – Where use is permitted by the Department Head or their delegate, ensure any cables are clear of bed rails, are off the floor and remain safe.
- Ensure the mains switch on the power point is turned off, and the device is turned off before plugging the mains cable/plug pack for the device in, turn the power point switch on, turn the device on.

#### After Use

Ensure all devices are turned off, the power is turned off at the wall and the power cable is unplugged from the wall and the complete device is safely stored.

## Electrical devices – patient use of personal electrical devices

SESLHDPD/290

### 5. DEFINITIONS

**E.M.I.** – Electromagnetic Interference – interference in a circuit caused by the radiation of an electric or magnetic field.

**Personal electrical device** – refers to any electrical device that is designed for portable personal use and is brought into the SESLHD facilities for the personal use of patients and visitors. This may include but is not limited to, CPAP machines, portable televisions, laptop computers and mobile phones and their chargers.

**Cardiac-type procedure** - is considered to be undertaken when an indwelling electrical conductor in contact with the heart is accessible outside the patient’s body, and there is a risk of microshock.

**Patient location** – any intended location of the bed, table or seating arrangements for a patient, whether or not occupied by the patient. Of particular importance in this policy are the power points near a patient’s bed or dialysis patient’s chair.

### 6. DOCUMENTATION

Appendix 1: Patient Owned Electrical Equipment Policy Check Sheet Template

Appendix 2: Patient-supplied Equipment – Flow Chart

### 7. AUDIT

Not required.

### 8. REFERENCES

- AS/NZS 3760 – In service safety inspection and testing of electrical equipment
- AS/NZS 2500 – Safe use of medical electrical equipment in health care
- AS/NZS 3551 – Technical management programs for medical devices
- [Safework NSW Code of Practice – Managing electrical risks in the workplace - August 2019](#)
- [SafeWork NSW website](#)
- [SESLHDPR/622 – Biomedical Equipment – Testing, Tagging and Labelling](#)
- [Work Health and Safety Regulation 2017 \(NSW\) - Part 4.7 General electrical safety in workplaces and energised electrical work](#)

**Electrical devices – patient use of  
personal electrical devices**

**SESLHDPD/290**

**9. REVISION & APPROVAL HISTORY**

Date	Revision No.	Author and Approval
May 2007	0	David Brain, Manager Biomedical Services. Approved by SESIH Area Biomedical/Clinical Engineering Management Committee, Matthew Daly, Director Operations and Area Executive Committee on 15 May 2007.
July 2015	1	Revision by Camillo Pavan, Director Clinical Engineering. Consultation with SESLHD Risk Manager, <a href="#">Nurse Manager - Cardiac &amp; Respiratory and Critical Care Clinical Streams</a> and DCEC committee members.
October 2015	2	Document reviewed by Clinical Engineering and endorsed by Executive Sponsor.
March 2022	3	Document reviewed by Clinical/Biomedical Engineering and endorsed by Executive Sponsor.

**Electrical devices – patient use of  
personal electrical devices**

**SESLHDPD/290**

**APPENDIX 1: PATIENT OWNED ELECTRICAL EQUIPMENT POLICY**  
**CHECK SHEET TEMPLATE**

Form to be completed by Department Head/Nurse Unit Managers/Clinician or Nursing Staff.  
This form should be compiled with reference to Flow Diagram 1: Patient Owned Electrical Equipment Flowchart.

Are the mains cables free of any visible damage?	yes	no
Are the mains cables free on any abrasions or cuts?	yes	no
Is the device case free of any visible/obvious damage? (cracks or tape holding device together or covering holes)	yes	no
Is the device free of any obvious sign of having suffered damage due to being dropped? (rattling noises from the device)	yes	no
Is the patient currently using the device at home on a regular basis?	yes	no
If the equipment does not belong to the patient who does it belong to?		

Has the patient supplied any testing documentation or preventive maintenance records for the device?  
If so please copy and attach or note details of documents.

Manufacturer: \_\_\_\_\_

Model: \_\_\_\_\_

Serial No: \_\_\_\_\_

Assessed By – Name: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Electrical devices – patient use of  
personal electrical devices**

SESLHDPD/290

**Appendix 2: Patient Owned Electrical Equipment Flowchart**

