

Board Member Mobile Device/s User Agreement

Purpose:

This user agreement (the 'Agreement') confirms that Board Members understand their roles, responsibilities and obligations when using WA health system computing /mobile device resources or bring your own device ('BYOD') resources that utilise the WA health digital health systems.

Policy Framework:

The Digital Health Policy Framework which includes the Digital Health Security Policy and its related documents (including the Acceptable Use of Digital Resources Standard and Bring Your Own Device Standard) establish the minimum obligations incumbent upon all Board Members who have access to WA health system computing/mobile device resources or BYOD resources, including but not limited to e-mail and the internet. This Agreement should be read in conjunction with the relevant sections of the Digital Health Policy Framework.

Declaration:

I, (*print name*): _____

as a Board Member of the, (*tick relevant board name*):

- Child and Adolescent Health Services Board
- East Metropolitan Health Services Board
- Health Support Services Board
- North Metropolitan Health Services Board
- PathWest Laboratory Medicine WA Board
- South Metropolitan Health Services Board
- WA Country Health Services Board

confirm that:

- I am aware of my role/s, responsibilities and obligations when using WA health system computing/mobile device resources or BYOD resources that utilise the WA health system's ICT.
- I am aware of the consequences of breaching this Agreement or any other socially acceptable requirements when using WA health system computing/mobile device resources or BYOD resources that utilise the WA health system's ICT.
- I am aware that I must not violate any written law whether or not expressly mentioned in this Agreement and any breach could result in disciplinary action.

Signed: _____

Date: _____

Once completed, please return your signed Agreement to your Board Secretariat.