

NHS Western Isles

Policy Statement

Email Etiquette

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Version 3

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PLEASE REFER TO THE NHS MAIL ACCEPTABLE USE POLICY FOR FURTHER INFORMATION.

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1. Introduction

Every email sent by an NHS Western Isles member of staff creates a recorded profile of the sender and the organisation, therefore email correspondence must conform to NHS Western Isles Standards of Behaviour as well as professional Codes of Conduct/Practice.

The content of emails has the potential to be released at any time under the Freedom of Information (Scotland) Act 2002 or as part of a Public Inquiry (e.g. the UK or Scottish COVID Inquiries) so email content should always be professional and appropriate.

Email should be used with care and consideration and, in the first instance, consideration should be given as to whether it is the best way to achieve an objective or communicate (for example a face to face/Teams meeting or discussion is more appropriate in situations where an ongoing conversation is required, although email is helpful when a record of communication is necessary).

Emails should be concise, clear and respectful, with a clear indication included about whether a response or specific action is required from the recipient, and when the response is needed by.

Emails are the same in terms of information as all our communications – i.e. information should be shared on a **‘need to know’ basis only**. This is particularly important when confidential or sensitive information is being shared.

2. Prefixes – for internal emails

To assist staff, NHS Western Isles has an approved prefix standard for the ‘Subject Line’ in certain internal emails. This should indicate the purpose of the correspondence and the expected response (or not) to help staff manage and prioritise emails.

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The prefixes are listed below:

PREFIX	DESCRIPTION
ACT	Action required/for action
FOR INFO	For your information
REQ	Request
URG	Urgent – use judiciously, along with the '!' high priority icon, giving consideration to the importance of the message for the person receiving the email. You should not use URG unless your message requires immediate action.
SOC	Social email to colleague(s)
[EOM] (suffix)	End of message – for example 'FOR INFO: Generator switch over at 3pm today EOM' saves recipient opening the full email.
STAFF BULLETIN	Used in emails to all mail users with information of importance.
ADV	Adverts/vacancy information.

3. Emailing with consideration

NHS Western Isles staff receive a high volume of emails on a daily basis and the volume of emails makes it difficult and sometimes frustrating for staff to prioritise the importance of messages.

The prefixes above will help staff to prioritise emails. Staff should also ensure that they only copy (cc) colleagues into emails appropriately. For example, do not copy senior members of staff into emails routinely, when communicating with colleagues. Senior staff should only be 'cc'd into emails in situations where the information is immediately relevant to them.

Particular care must also be taken when forwarding emails. It is essential that staff review the email trail/history to ensure that all the preceding content is appropriate to the new email recipient. A number of emails may contain sensitive or confidential information that should not be circulated beyond a specific group.

4. Use of the 'Bcc' field

'Bcc' stands for 'blind carbon copy'. As the name suggests, 'Bcc' keeps the recipients' email addresses hidden. Thus, the Bcc list is a secret to everyone but the sender. Bcc functions differently in relation to email threads. While 'To'

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and 'Cc' recipients will receive replies going forward, 'Bcc' recipients will not. They will only receive the initial email.

'Bcc' functions this way because it is usually intended for impersonal, mass emails that do not warrant a response.

When a Bcc recipient 'replies to all', their recipient status will suddenly be exposed to the rest of the recipients. If you believe a 'Bcc' recipient may respond, consider using 'Cc' instead to ensure transparency.

Bcc is appropriate where you have a large mailing list, in situations where the email does not require a response and when recipients do not know each other. It is best to avoid using Bcc in most situations if you are emailing colleagues. It could potentially reduce your co-workers' perception of your workplace integrity, in particular if the individual you have Bcc'd replies to all.

5. Additional Message options

Under the 'three dots' on the top right-hand-side of Outlook emails, there are 'Message Options'.

When sending a message of a personal, private or confidential nature, there is an option to mark it as such using this feature, and this is recommended so that the recipient is clear on the sensitivity of the communication.

Under this feature, there is also the option to:

- Request a read receipt
- Request a delivery receipt
- Encrypt a message
- Digitally sign a message

The first two features, in particular, are useful when evidence is required that important messages have been received and opened/read.

6. Managing your mailbox

Email is an important communication tool used by NHS Western Isles staff on a daily basis to share information with individuals or groups.

Every staff member is allocated an nhs.scot email account and every staff member is individually responsible for reading their emails and for effectively managing their email accounts.

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There are size limits on all NHS email accounts and all staff must ensure that they manage their mailboxes effectively. Accounts that are not managed effectively often result in full mailboxes, which means that no more emails can be received. This is a significant risk as it means that communications from NHS Western Isles and other colleagues cannot be received. It also means that potentially damaging emails (e.g. emails containing a virus) could be stored within the system, presenting an unacceptable risk. Emails containing viruses, even if they are stored and not immediately opened, can still be damaging. The virus can spread through network connections.

Mailboxes that have exceeded the approved limit will be gathered by the Communications Department, on a monthly basis (the Communications Department gets notified when an 'all users' email has been rejected due to a mailbox being full).

Those staff with full mailboxes/their managers will be contacted, and staff will be given four weeks to address the issue.

Failure to address the issue could result in steps to address the matter through formal policy.

7. All Mail Users emails

NHS Western Isles, as an organisation, uses email to share important information with staff via the 'all mail users' function.

Only certain individuals have access to the 'all mail user' function, which allows emails to be sent to all staff working for NHS Western Isles.

Those with access to 'all mail users' are:

- The Head of Communications, Claims and Patient Information
- The Communications Department (via the wi.coms@nhs.scot email)
- The Executive Assistant to the Chief Executive
- The Human Resources Department (to issue vacancy emails)
- The Executive On-Call, via the on-call phone

Consideration will be given to the nature and purpose of the communication before issuing an 'all users' email, to ensure appropriate use. Anything not considered sufficiently urgent or relevant will not be sent by 'all users', and may

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be included, for example, in the Team Brief, or sent to a more restricted circulation list.

8. Email signatures

NHS Western Isles encourages the use of email signatures, mainly to ensure that people receiving your emails know who you are and how to contact you. Email signatures also present an opportunity to publicise or promote appropriate campaigns or projects.

For signatures, the following information should be included (bracketed items are optional):

- Name
- Position
- Address
- Landline/Extension
- (Mobile)
- (appropriate corporate message or campaign logo)
- (NHS Western Isles social media links/NHS Western Isles website link)
- (Gaelic version of signature)
- (Teams link)
- (You may also wish to add an appropriate photo to your email ID – it helps ensure people are sending the email to the correct individual)

Standard font should be used (Arial or Garamond) in either black or dark blue.

Staff must not include personal or political website addresses, statements, icons, pictures or logos in email signatures.

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9. Do and Don't Quick Reference

DO	DON'T
Do use the subject line and an approved prefix to highlight email purpose and content.	Don't 'reply to all' without considering whether everyone requires a copy of the response.
Do keep emails short and concise.	Don't copy, send or forward anything that could be libellous, sensitive or offensive.
Do re-read your message before you send it and use spell check.	Don't customise email format to an extent that it creates additional effort to read.
Do use the phone, or Teams, or speak to people face to face if possible and where more appropriate (particularly when the information is required at short notice – e.g. last minute cancellation of meeting).	Don't use CAPITALS to write an email, this is seen as shouting.
Do take responsibility to let senders of routine emails know if you no longer require them.	Don't reply to an email when angry!
Do ensure, when sending large attachments, that they are only sent by email where necessary, as large attachments can block colleagues' mailboxes and cause frustration.	Don't send out an email if the wording or tone could be considered rude or offensive.
Do ensure that you keep distribution lists up to date.	Don't mark an email 'urgent' unless it is.
Do give some thought before attaching emails to emails, or forwarding email trails – and ensure you do not share sensitive information inappropriately.	Don't print off emails, unless necessary.
Do ensure that you manage your inbox and ensure that your mailbox isn't full.	Never open or forward suspicious messages – always report the message (click on report in the Outlook toolbar, select 'report phishing' or 'report junk' in the dropdown list. Do not send suspicious emails to the Communications Team.
Do make it clear to patients that email must not be used for urgent clinical advice. Where email addresses are	Don't use shared mailboxes for confidential, sensitive or private information.

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supplied to patients/families, an autoreply should be in place so that expectations are clear (i.e. what the mailbox should be used for, that it is not monitored 24/7, that urgent issues should be directed to NHS24/emergencies to 999).	
Do check your 'junk email' and delete periodically.	Don't use NHS email accounts for social media and other third-party application subscriptions unrelated to your NHS work.
Do use common sense in email use and have respect for busy colleagues.	Don't send group emails unless appropriate – only send a group email when it's useful to all those receiving it.
Use a signature that contains job title and contact information. This ensures that people know who you are and how to get directly in touch with you.	Don't put in an email anything that you would not be comfortable with if it was made public – remember copies of emails can be requested under certain legislation.
Do use the out of office facility. This is a requirement when staff go on Annual Leave or planned leave (e.g. Maternity or Parental).	Don't use the Bcc function inappropriately.
Do check your outbox for undelivered messages.	
Do take personal responsibility for emails you send and receive.	
Do refer to the NHS Western Isles Acceptable Use Policy for further information.	Do not use emails as a filing system.

10. Acceptable use of email (clinical communication)

Where email addresses are supplied or made available to patients/relatives, it must be made clear that they **must not use email to seek urgent clinical advice**.

The purpose of the email address as a method of communication should be clear, so that expectations are unambiguous, and patients do not expect to have

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one-to-one 24/7 access to a clinician, or think that they can email an individual staff member to bypass existing systems.

For the majority of services, unless unavoidable, it is advised the email is not used for clinical communication. One particular risk is that an email address is provided, taken down or communicated incorrectly (e.g. with a minor spelling error) and, as a result, confidential or sensitive information could be shared with the wrong person – or a patient is under the impression that they have communicated with a service when in fact the information has not been received by that service.

Email is also more at risk of being subject to a cyber attack – which puts the confidentiality of email information, as well as the record of information (if it has not been downloaded and added to a patient's notes), at risk.

When clinicians share email addresses widely with those external to the NHS, it also becomes more challenging to recognise phishing emails or emails with damaging content that could present a major risk to NHS Western Isles systems, if opened, or if links are clicked on.

Where email is used between clinicians and patients to discuss any symptoms, care or treatment, full records of the communication must be included in the patient's medical record timeously. In the event of a member of staff leaving the organisation, managers **must ensure** that any information relevant to a patient's medical record is extracted from the emails, prior to the email address being deleted.

The use of email for clinical communication has an additional risk when using shared mailboxes in terms of confidentiality and data protection. Services must give careful consideration, therefore, to who has access to the shared mailbox, so that staff members do not have inappropriate access to patient information communicated by email.

11. Use of Autoreply

Autoreply is required when staff are taking periods of planned leave.

However, autoreply is also useful to use in circumstances where staff share email addresses with patients/relatives or for shared mailboxes. This is to ensure that

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the expectations of the intended purpose of that email address as a method of communication is clear.

Autoreply messages can be set to respond to external or internal messages as appropriate.

Autoreply options are as follows (any or parts of these can be used or adapted to suit), and staff can develop their own autoreply messages as appropriate:

- Thank you for your email.
- Please note that this email address is not monitored 24/7. We will respond to your email during working/business hours.
- This email address receives a high volume of emails. We will respond to your email as soon as possible.
- This email address is not intended to be used for clinical communication or to discuss care or treatment. Please visit the NHS Western Isles website for information, or contact the department by phone during business hours.
 - or
- This email address is not monitored 24/7 and must not be used for urgent clinical advice. For **urgent issues**, you should contact NHS24 on 111 and in **emergency situations**, you should call 999 or attend the Emergency Department. If your communication is not urgent, we will respond to you during business hours/ as soon as possible.
- Please note that this is a shared mailbox and ensure that you do not share sensitive or confidential information via email.
- We welcome feedback on our services. You can share feedback via Care Opinion, or internally by
 - speaking to a member of staff
 - visiting our website: www.wihb.scot.nhs.uk/feedback
 - contacting 01851 704704 (ext 2236) Monday-Friday between 10am-4pm.
- If your email relates to a complaint, details on the process are available at www.wihb.scot.nhs.uk/get-involved/complaints/

12. Shared Mailboxes

Many departments and services now use 'shared mailboxes'. The creation of a shared mailbox has to be approved by a line manager, and shared mailboxes are set up by the IT Department.

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Staff are advised to carefully consider whether setting up a 'shared mailbox' is appropriate and necessary for the service. Shared mailboxes often result in additional work for staff to monitor communications received through that route, so that additional burden should be considered when establishing a 'shared mailbox'.

When 'shared mailbox' email addresses are shared with colleagues or members of the public/patients, the intention of the mailbox should be made clear so that the intended purpose of that email address as a method of communication is clear. For example, urgent information should not be shared via a shared mailbox if the mailbox is not monitored on an ongoing basis.

Shared mailboxes should always have an autoreply message to reiterate the purpose of the mailbox/what it is not intended for, and to clarify whether the mailbox is monitored on an ongoing basis, or when to anticipate a response.

There should also be careful consideration in terms of who has access to a shared mailbox, so that staff do not have access to information that is sensitive or confidential, if they have no legitimate reason to have sight of that information.

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