
CHISAGO COUNTY WIRELESS TELECOMMUNICATION DEVICE POLICY

I. PURPOSE

The purpose of the Wireless Telecommunication Device (WTD) Policy is to define WTD usage by employees to encourage the enhancement of communications while ensuring efficient, safe, and high-quality customer service to the citizens of Chisago County. WTDs include, but are not limited to, cell phones, pagers, tablets, or similar devices. Chisago County recognizes that WTDs are mission-critical tools to efficiently manage business of the governmental unit. The Internal Revenue Service (IRS) has categorized these tools as “Listed Property” and requires that stringent controls be in place to ensure compliance.

II. POLICY PROCEDURES

The County Administrator and Department Director will determine which position(s) require a WTD and whether the needs are best served through allocation of a County-owned WTD or through a non-County-owned WTD allowance, based upon a tiered monthly allowance plan, as determined by the following criteria:

1. Employee frequently travels for County business; and/or
2. Employee frequently needs to maintain communication with Department while off-site; and/or
3. Employee is concerned for personal safety while conducting County business off-site.

III. GENERAL

- A. Employees will follow all local, state, and federal regulations regarding the use of WTDs while operating motor vehicles or heavy machinery. If possible, employees should pull off the road or use a hands-free device to conduct legally-allowed business using a WTD while operating a motor vehicle. The Sheriff’s Office may promulgate supplemental policies which will supersede the application of this section to licensed law enforcement employees.
- B. All work-related photographs and/or videos captured on a County-owned WTD are considered governmental data and shall be transferred to government computers for proper documentation and storage promptly. Similarly, all work-related photographs and/or videos captured on a non-County-owned WTD are also considered governmental data and shall be transferred to government computers for proper

documentation and storage promptly. Employees must exercise discretion with personal use of WTDs when using either a County-owned WTD or a non-County-owned WTD that receives a WTD allowance.

- C. Employees authorized to use text messaging for County business may only do so for messages that do not need to be retained by Chisago County. Examples include notices of meetings, directions, and non-protected scheduling information, and other routine messages that would not be filed if it were a paper communication. Employees are prohibited from using text messages to send policy, contract, personnel or private client-related County data. Employees are prohibited from sending text messages containing governmental information classified as confidential, private, or non-public in Chapter 13 of Minnesota State Statute. If text messages need to be saved under Chisago County retention policies, employees must be able to transfer messages to their Department's network drive.
- D. If a question arises regarding the retention of an electronic communication on a WTD, the employee shall analyze the information and determine whether retention is required by federal, state or local regulations or policies. Further guidance is available by reviewing the WTD Record Retention Decision Tree attached to this policy. All users, of either County-owned or non-County-owned WTDs, shall preserve all governmental data required to be maintained pursuant to the adopted records retention schedule of Chisago County for the required period on a County-owned server in a format that preserves the integrity of the original record and is easily accessible as required by state and federal laws.

IV. COUNTY-OWNED WTD

- A. If it is determined that a County-owned WTD is required for an employee to perform his/her duties, the County Administrator and Department Director shall determine the appropriate WTD to best fit the work-related needs of the County employee. A data and texting plan, and/or wireless internet access plan for other devices shall be allowed on County-owned WTDs when authorized by the County Administrator and Department Director.
- B. The County-owned WTD is the property of the County and shall be immediately surrendered at the request of the Supervisor and/or Department Director. Employees provided with County-owned WTDs to assist in the performance of their jobs have no expectation of privacy in anything created, stored, sent, or received using the County-owned WTD. Employees issued a County-owned WTD are expected to:
 - 1. Primarily use the WTD for County business. Personal use of a County-owned WTD is allowed when it is incidental and *de minimis*. Incidental personal use is defined as communications of minimal duration and frequency. Such personal use is never allowed for use to operate a personal business or to conduct non-county employment.
 - 2. Ensure WTD use does not create a distraction to the employee or co-workers during work hours.
 - 3. Provide adequate security to prevent unauthorized users from finding confidential or non-public governmental information on the WTD.
 - 4. Care for the equipment in a responsible manner including taking precautions to prevent theft, damage or vandalism.

- C. If a County-owned WTD is damaged due to employee negligence, the employee is responsible for the full cost of the replacement WTD. If the County-owned WTD is lost or stolen, the employee shall immediately notify the M.I.C.S. Department in addition to their Department Director and/or Supervisor.
- D. Employees that are issued a County-owned WTD are prohibited from the following:
 - 1. Using the equipment for personal profit or gain.
 - 2. Using equipment to transmit, receive or distribute pornographic, obscene, abusive, or sexually explicit materials, or materials containing unclothed or partially unclothed people.
 - 3. Violating any local, state, or federal law or engaging in any type of illegal activity.
 - 4. Using the WTD to engage in any type of harassment or discrimination, including but not limited to sexual harassment and harassment based upon race, gender, sex, sexual orientation, religion, national origin, marital status, status with respect to public assistance, disability or any other type of harassment or discrimination prohibited by law and County policy.
 - 5. Using the WTD to engage in any type of commercial enterprise unrelated to the specific purposes and needs of Chisago County.
 - 6. Using the WTD to engage in any form of solicitation.
 - 7. Using the WTD to promote any political causes.

V. NON-COUNTY-OWNED WTD

- A. Employees designated to receive a WTD allowance shall receive a monthly allowance according to the criteria from Section II.1-3, and as based upon the following tiered plan:

Tier 1	\$10.00/month -Occasional use (Average of 50-100 minutes of work-related use per month)
Tier 2	\$15.00/month -Frequent use (Average of over 100 minutes of work-related use per month)
Tier 3	\$30.00/month -Smartphone, Tablet, or similar device with data access (Required for access to email, calendars, internet or software)

- B. Employees receiving the allowance are responsible for:
 - 1. Ensuring the WTD is a permitted, allowable device, as defined by the Acceptable Use for Computer and Network Systems Chisago County policy.
 - 2. If the non-County-owned WTD is lost or stolen, the employee shall immediately notify the M.I.C.S. Department in addition to their Department Director and/or Supervisor.
 - 3. Providing proof of purchase/lease of WTD and work-related usage at intervals to be determined by the Department Director.
 - 4. Replacement or repair of the WTD. However, if the WTD is lost or damaged as a direct result of the work environment, the Department Director or the County Administrator may approve reimbursement in whole or in part, to the employee for said repair or replacement.

5. Assuring sufficient coverage and that service is reliable in Chisago County to meet business needs.
 6. The purchase and installation of a County-approved application which will provide encryption and security protection of County data and network access. If assistance is needed in determining which applications are available, the employee may seek the assistance of M.I.C.S.
 7. Ensuring WTD use does not create a distraction to the employee or co-workers during work hours.
- C. Employees receiving the allowance are prohibited from:
1. Using equipment to transmit, receive or distribute pornographic, obscene, abusive, or sexually explicit materials, or materials containing unclothed or partially unclothed people.
 2. Violating any local, state, or federal law or engaging in any type of illegal activity.
 3. Using the WTD to engage in any type of harassment or discrimination, including but not limited to sexual harassment and harassment based upon race, gender, sex, sexual orientation, religion, national origin, marital status, status with respect to public assistance, disability or any other type of harassment or discrimination prohibited by law and County policy.
- D. The WTD allowance is intended to reasonably cover the costs of the employee's WTD expenses related to work duties, which only take place during work-related time. The initial purchase of the WTD, accessory equipment, and activation fees shall be the sole responsibility of the employee. The employee shall be responsible for all costs exceeding the amount of the WTD allowance to the WTD service provider. No allowance will be paid to an employee when an employee is on unpaid leave status or in a non-work status.
- E. The WTD personal allowance is taxable income and must be reported on the employee's W-2. The allowance shall be paid through the County payroll system.

VI. REFERENCES/ATTACHMENTS

- Chisago County Electronic Data Security Policy #3001
- Chisago County Internet Usage Guidelines
- General Records Retentions Schedule for Counties
- Minnesota State Statute 169.475
- Minnesota State Statute 169.13
- Minnesota State Statute Chapter 13
- Chisago County Wireless Telecommunication Device User Agreement (Attached)
- Personal Wireless Telecommunication Device Allowance Authorization Form (Attached)
- Chisago County Wireless Telecommunication Device Allowance Agreement (Attached)
- Wireless Telecommunication Device Record Retention Decision Tree (Attached)

Wireless Telecommunication Device Policy
CHISAGO COUNTY USER AGREEMENT

I agree to the following regulations regarding the use of either a Chisago County-owned WTD or a non-County-owned WTD receiving monthly allowance during the course of my employment as a Chisago County Employee:

1. I understand that as an employee provided with a County-owned WTD, I am responsible for verifying usage.
2. I further understand that County-owned WTDs are intended to be used for County business but that personal use of a County-owned WTD is allowed when it is incidental and *de minimis*.
3. I understand that monthly bills are monitored, as necessary, to observe WTD usage during employment. The Department Director shall be responsible for determining the monthly allowance necessary for non-County-owned WTDs.
4. I have read and agree to follow the Chisago County WTD Policy. Failure to comply with this Agreement may result in cancellation of my use of a Chisago County-owned WTD, or elimination of my monthly allowance for use of an non-County-owned WTD for conduct of County business, and I may be subject to possible disciplinary action in accordance with the Chisago County Personnel Policy and/or applicable union contracts, up to and including termination of employment.

Employee's Name (Print)

Employee's Signature

Date

Wireless Telecommunication Device Policy
Device ALLOWANCE AUTHORIZATION
(Use for non-County-Owned WTD)

EMPLOYEE NAME: _____

DEPARTMENT: _____

Authorization relating to WTD allowance to this employee, as indicated below:

- Activate allowance payment @ \$10.00 per month (occasional usage per month of approximately 50-100 minutes)
- Activate allowance payment @ \$15.00 per month (frequent usage per month of approximately 100+ minutes)
- Activate allowance payment @ \$30.00 per month for smartphone, tablet, or other device with data access

Service Provider's Name: _____

WTD (cell phone) #: _____

WTD (tablet, or other device) linked email accounts:

I understand and agree that the allowance is intended to provide payment toward the cost of monthly service and associated taxes.

Employee Signature

Date

Department Director Signature

Date

Administration

Date

Return this completed form to the Auditor's Office. A copy will be kept in your payroll file and in the Auditor's Office. Please allow time for processing to coincide with payroll periods.

Payroll Coordinator

Date

Wireless Telecommunication Device Policy
CHISAGO COUNTY MONTHLY ALLOWANCE AGREEMENT

I agree to the following regulations regarding the payment of a WTD monthly allowance to me:

1. I understand that I will be authorized a WTD monthly allowance to be used toward the costs of a non-County-owned WTD service used for Chisago County business purposes.
2. I understand that by accepting this allowance, my non-County-owned WTD is subject to data practice and legal data retention requirements.
3. I understand that by accepting this allowance, I agree to give the County authority to remotely or directly wipe data on the non-County-owned WTD, which may contain personal data, and recover data or the take possession of device when legally necessary.
4. I understand that this allowance will be paid to me through payroll as taxable income.
5. I understand that I will be required to provide reliable non-County-owned WTD service for all business related needs.
6. I agree to provide documentation to my Department Director as required to initiate and to continue my receipt of the non-County-owned WTD allowance.
7. I agree to monitor my work-related usage and notify my Department Director if a tier change is necessary, based on a 6 month average.
8. I understand my receipt of the non-County-owned WTD allowance ceases if I am on unpaid leave status.
9. I understand my entitlement to the non-County-owned WTD allowance ceases if I am in a non-working status (Ex: FMLA, work comp).
10. I understand the non-County-owned WTD allowance shall cease immediately upon my termination of employment, whether for retirement, voluntary or involuntary reasons. Should I terminate employment mid-month, I understand the allowance shall be pro-rated.
11. I understand that any current or future obligation with the non-County-owned WTD service provider is exclusively my responsibility without any liability to Chisago County.
12. I have read, understand and agree to follow the Chisago County WTD Policy. Failure to comply with this agreement may result in cancellation of my entitlement to receipt of the non-County-owned WTD allowance.

Employee Name (Print)

Employee Signature

Date

Wireless Telecommunication Device Policy Record Retention Decision Tree



