



Public – To be published on the Trust external website

# Smartphone Re-assignment and Disposal Procedure

### Ref: IT-0020-002-v4

Status: Approved Document type: Procedure Overarching Policy: <u>IT & Telephony Procurement Re-assignment and</u> <u>Disposal Policy</u>





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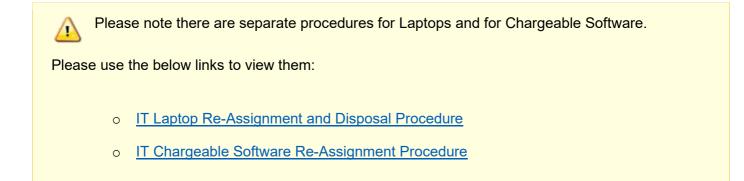
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#### **1** Introduction

This procedure supports the <u>IT & Telephony Procurement, Re-assignment and Disposal Policy</u> with regards to smartphones.



This procedure covers the re-assignment and disposal of Smartphones within the Trust, and describes:

- The re-assignment and disposal process for Smartphones and explains what is required at each step.
- The recording of items re-assigned and disposed of, their location and who is responsible for this.
- The retention of Smartphones for staff moving teams along with appropriate budget placement.

#### 2 Purpose

To ensure the security and integrity of the Trust's IT infrastructure in a safe, secure and economical way.

Specifically following this procedure will help the Trust to:

• Ensure staff have the necessary IT tools to carry out their roles.



• Ensure that IT & Telephony equipment used for Trust purposes must be officially purchased and tested for compatibility

- Demonstrate that we dispose of equipment in a safe, secure and economical way.
- Support individual staff with any workplace adjustments that might be needed.
- Provide a mechanism for staff to discuss their requirements,
- Reduce the number of new phones purchased each month
- Support the upgrade of End Of Life (EOL) devices to improve security
- Improve the management and use of smartphone assets
- Reduce the number of support calls logged due to issues encountered with inherited phones
- Support the use of Multi Factor Authentication (MFA) within the Trust.
- maintain accurate records of all IT & Telephony equipment re-assigned or disposed of, within the Trust.

#### 3 Who this procedure applies to

This procedure is relevant to, but not limited to, the following groups who use or have access to Trust IT & Telephony equipment. These groups were initially consulted when the procedure was developed.

- Staff
- Service Users
- Students Excluding any rotational staff
- Volunteers
- Budget Holders
- Line Managers
- Finance Services





- Information Services / Service Desk / Desktop Team
- Information Asset Owners / Information Asset Administrators
- External Suppliers

#### 3.1 Who this procedure does not apply to

This procedure does **not** apply to Resident Doctors and other rotational staff whose smartphones are managed jointly by the Central Asset Management (CAM) Team and Medical Development.

#### 4 Related documents

This procedure describes what you need to do to implement 4.1.2 and 4.1.3 section of the <u>IT &</u> <u>Telephony Procurement, Re-assignment and Disposal Policy</u>

The <u>IT & Telephony Procurement, Re-assignment and Disposal Policy</u> defines how Trust IT equipment is to be re-assigned and disposed, which you must read, understand and be trained in before carrying out the procedures described in this document.

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- o IT Laptop Re-Assignment and Disposal Procedure
- o IT Chargeable Software Re-Assignment Procedure



### 5 Step-by-step instructions for reassignment and disposal of Smartphones

Step	Who	Task	
1	Budget Holder / Line Manager	<ul> <li>Identify that a member of staff with a smartphone is either moving or leaving the team. See below options:</li> <li>Member of staff moving to another team within the Trust – Follow steps 2-4</li> <li>Member of staff leaving the Trust altogether –go to step 5</li> <li>Member of staff has changed role and no longer requires their smartphone - go to step 5</li> </ul>	
2	Budget Holder / Line Manager	People moving team (who will require the use of a smartphone) should take their existing smartphone with them to their new role. You should remove the asset from your asset register*. If the mover will not require a smartphone in their new role, then go to step 5 *Any staff member joining your team who brings a smartphone with them will need adding to your asset register	
3	CAM Team	Centralised Asset Manager (CAM) Team will receive a list of internal movers each month, cross check this against smartphone records and automatically update the budget for the monthly costs.	
4	CAM Team	CAM will check purchase records and liaise with Finance to reimburse the budget holder for the current value* of the smartphone (this cost will be transferred to the **receiving teams budget) *If the smartphone is over 4 years old or was issued to the manager FOC then the value will be £0 and no reimbursement will be made **If a staff member joins your team and brings a smartphone with them you will be charged the current value of that phone	
5	Budget Holder / Line Manager	Identify whether the smartphone can be re-assigned within the team or section. If the equipment can be re-assigned locally go to step 6. If the smartphone cannot be re-assigned locally then go to step 10	
6	Budget Holder / Line Manager	Smartphones will need returning to The Asset Management Team before they can be allocated to a new user. They should be sent via the internal post to Flatts Lane Centre marked for the attention of the Asset Management Team with a note of the new user's email address and preferred delivery site.	





7	CAM Team	Upon receipt of the smartphone, the team will assess if the device is still usable. If not, they will notify the Budget Holder/Manager that the device will be disposed of (see steps 12-15) and they will need to request a new device if still required. If the device is still usable go to step 8	
8	CAM Team	Smartphone will be wiped/reset and prepped to be delivered back to the new user. Asset management records will be updated to reflect the change of owner	
9	CAM Team	The team will arrange for the smartphone to be delivered to the requested site and the correct enrolment guide sent via email to the new user.	
10	Budget Holder / Line Manager	f the smartphone cannot be re-assigned locally it should be returned to the Asset Aanagement Team	
11	CAM Team	Upon receipt of smartphones that are no longer required the team will assess if they can be reissued or need to be disposed of and either assign them to a new user or arrange disposal as appropriate	
12	CAM Team	All smartphones identified for disposal will be factory reset to remove all data, the associated mobile number will be ceased/re-assigned as appropriate and internal records updated to reflect that the device is due for disposal	
13	CAM Team	Will log a call with our Third Party Supplier to arrange disposal of smartphone	
14	Third Party Supplier	Receives the call for disposal and liaises with the Asset Management Team to collect the smartphones	
15	Third Party Supplier	<ul> <li>Where appropriate equipment <b>must</b> be:         <ul> <li>Removed from the Third Party Supplier's IT equipment inventory list and placed on the disposals list which is sent to the Information Service Desk.</li> </ul> </li> <li>Remove and destroy any data storage systems securely and provide a certificate of destruction to the IT Contracts and Asset Team.</li> </ul>	



Staff moving team within the Trust (who will require the use of a smartphone) **MUST** take their existing smartphone with them to their new Trust role.

#### **6** Definitions





Term	Definition
CAM Team	Central Asset Management Team
Information Asset Administrator (IAA)	• IAAs ensure that policies and procedures are followed, recognise actual or potential security incidents, consult their IAO on incident management, and ensure that information asset registers are accurate and up to date.
IT & Telephony Equipment	<ul> <li>This includes hardware and software used by the Trust to conduct its business, including Smartphones</li> </ul>
End of Life Devices (EOL)	• This refers to IT equipment that is no longer cyber secure and does not hold the technology to continue with security updates.
MFA	• Multi-factor authentication (MFA) is an additional way of checking that it is really you when you log in to your account. It helps to ensure cybersecurity and help protect against loss from or damage to Trust infrastructure.

#### 7 How this procedure will be implemented

- This procedure will be published on the Trust's intranet and external website.
- Line managers will disseminate this procedure to all Trust employees through a line management briefing.

#### 7.1 Implementation action plan

Activity Expected outcome Timescale	Responsibility	Means of verification/ measurement
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movers and leavers a and liaising with the relevant managers a to ensure their for	0	Monthly	Asset Lead	Workforce Report sent to Asset Team Manager.
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#### 7.2 Training needs analysis

Staff/Professional Group	Type of Training	Duration	Frequency of Training
All	Read Procedure		Annually or when changes are applied.

## 8 How the implementation of this procedure will be monitored

Number	Auditable Standard/Key Performance Indicators	Frequency/Method/Person Responsible	Where results and any Associate Action Plan will be reported to, implemented and monitored; (this will usually be via the relevant Governance Group).
1	Disposal report from Supplier tallies 100% with internal record of requests for disposal	Monthly, manual reconciliation, Centralised Asset Management Team	Digital and Data Management Meeting (DDMM)
2	100% Reconciliation of both Internal Movers and leavers reports against list of devices reallocated or disposed	Frequency = Monthly Method = manual reconciliation Responsible = Centralised Asset Management Team	Digital and Data Management Meeting (DDMM)





#### 9 References

- ITAM (IT Asset Management) Best Practice
- ITIL (Information Technology Infrastructure Library) guidance
- National Cyber Security Group
- <u>NHS England Data Security and Protection toolkit</u>

#### 10 Document control (external)

To be recorded on the policy register by Policy Coordinator

Required information type	Information
Date of approval	11 October 2024
Next review date	11 October 2027
This document replaces	IT-0020-002-v3 IT and Telephony Reassignment and Disposal Procedure
This document was approved by	D&D Architecture Boards
This document was approved	03 October 2024
This document was ratified by	Digital and Performance Assurance Group
This document was ratified	11 October 2024
An equality analysis was completed on this policy on	29 May 2024
Document type	Public
FOI Clause (Private documents only)	n/a

#### Change record

Version	Date	Amendment details	Status
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2			Withdrawn
3	20 Aug 2021	Put into new Format Links to old intranet and reference to InTouch changed to refer to new Intranet and TEWV online store Tasks for the Information Service Desk Analyst changed to the IT Asset Team roles. References to cost for disposal and Cardea removed	Withdrawn
4	June 2024	Put into new Format and title updated. Procedure steps amended to reflect re-assignment and internal possession of smartphones. Action plan created to ensure procedure can be implemented.	Approved

#### **Appendix 1 - Equality Impact Assessment Screening Form**

#### Please note: The <u>Equality Impact Assessment Policy</u> and <u>Equality Impact Assessment</u> <u>Guidance</u> can be found on the policy pages of the intranet

Section 1	Scope
Name of service area/directorate/department	Digital & Data Department
Title	Smartphone Re-assignment and Disposal Procedure
Туре	Procedure/guidance
Geographical area covered	Trust Wide
Aims and objectives	This procedure has been created to ensure that staff have details on the procedure to re-assign and securely dispose of IT assets
Start date of Equality Analysis Screening	22 Apr 2024
End date of Equality Analysis Screening	29 May 2024

Section 2	Impacts	
Who does the Policy, Procedure, Service, Function, Strategy, Code of practice, Guidance, Project or Business plan benefit?	This procedure has been created to ensure that stat have easy access to clear information regarding the Trust's process for re-allocation and disposal, of Smartphones In addition this revision supports staff retaining Trus IT equipment when they move teams, which supports staff with any reasonable adjustments in place and enables staff to efficiently and effectively	
Will the Policy, Procedure, Service, Function, Strategy, Code of practice, Guidance, Project or Business plan impact negatively on any of the protected characteristic groups? Are there any Human Rights implications?	<ul> <li>carry out their role.</li> <li>Race (including Gypsy and Traveller) NO</li> <li>Disability (includes physical, learning, mental health, sensory and medical disabilities) NO</li> <li>Sex (Men and women) NO</li> <li>Gender reassignment (Transgender and gender identity) NO</li> <li>Sexual Orientation (Lesbian, Gay, Bisexual, Heterosexual, Pansexual and Asexual etc.) NO</li> <li>Age (includes, young people, older people people of all ages) NO</li> <li>Religion or Belief (includes faith groups, atheism and philosophical beliefs) NO</li> <li>Pregnancy and Maternity (includes pregnancy, women / people who are breastfeeding, women / people on maternity leave) NO</li> <li>Marriage and Civil Partnership (includes opposite and same sex couples who are married or civil partners) NO</li> <li>Armed Forces (includes serving armed forces personnel, reservists, veterans and their families) NO</li> <li>Human Rights Implications NO (Human Rights - easy read)</li> </ul>	
Describe any negative impacts / Human Rights Implications	None	

Describe any positive impacts / Human Rights Implications	Staff will understand how they can re-assign and dispose of smartphones in the correct manner and where to seek guidance, by following the Procedure the Trust will use only approved equipment and ensure equipment is disposed of in a secure manner, this in turn supports the Data Security and Protection toolkit and Cyber Security.
	The procedure should help reduce the number of new phones purchased each month, along with the new reimbursement process. Overall this should see a positive impact on the Trust financial budgets.

Section 3	Research and involvement	
What sources of information have you considered? (e.g. legislation, codes of practice, best practice, nice guidelines, CQC reports or feedback etc.)	NHS England, in terms of the 2 stage Multi Factor authentication.	
Have you engaged or consulted with service users, carers, staff and other stakeholders including people from the protected groups?	Yes	
If you answered Yes above, describe the engagement and involvement that has taken place	Engaged with Centralised Asset Project Steering Group. Requested all Trust staff to offer feedback on consultation.	
If you answered No above, describe future plans that you may have to engage and involve people from different groups		

Section 4	Training needs
As part of this equality impact assessment have any training needs/service needs been identified?	No
Describe any training needs for Trust staff	N/A
Describe any training needs for patients	N/A
Describe any training needs for contractors or other outside agencies	N/A

Check the information you have provided and ensure additional evidence can be provided if asked.





#### Appendix 2 – Approval checklist

Title of document being reviewed:	Yes / No / Not applicable	Comments
1. Title		
Is the title clear and unambiguous?	Yes	
Is it clear whether the document is a guideline, policy, protocol or standard?	Yes	
2. Rationale		
Are reasons for development of the document stated?	Yes	
3. Development Process		
Are people involved in the development identified?	Yes	
Has relevant expertise has been sought/used?	Yes	
Is there evidence of consultation with stakeholders and users?	Yes	
Have any related documents or documents that are impacted by this change been identified and updated?	Yes	
4. Content		
Is the objective of the document clear?	Yes	
Is the target population clear and unambiguous?	Yes	
Are the intended outcomes described?	Yes	
Are the statements clear and unambiguous?	Yes	
5. Evidence Base		
Is the type of evidence to support the document identified explicitly?	Yes	
Are key references cited?	Yes	
Are supporting documents referenced?	Yes	



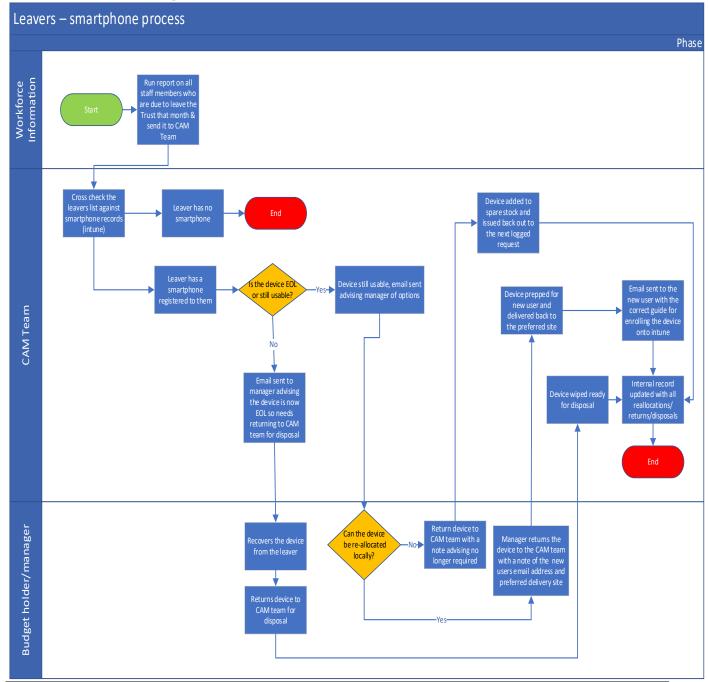


6. Training		
Have training needs been considered?	Yes	
Are training needs included in the document?	Yes	
7. Implementation and monitoring		
Does the document identify how it will be implemented and monitored?	Yes	
8. Equality analysis		
Has an equality analysis been completed for the document?	Yes	
Have Equality and Diversity reviewed and approved the equality analysis?	Yes	
9. Approval		
Does the document identify which committee/group will approve it?	yes	D&D Architecture Board and DPAG
10. Publication		
Has the policy been reviewed for harm?	yes	No harm
Does the document identify whether it is private or public?	yes	Public
If private, does the document identify which clause of the Freedom of Information Act 2000 applies?	n/a	
<b>11. Accessibility</b> (See intranet accessibility page for more information)		
Have you run the Microsoft Word Accessibility Checker? (Under the review tab, 'check accessibility'. You must remove all errors)	Yes	
Do all pictures and tables have meaningful alternative text?	Yes	
Do all hyperlinks have a meaningful description? (do not use something generic like 'click here')	Yes	





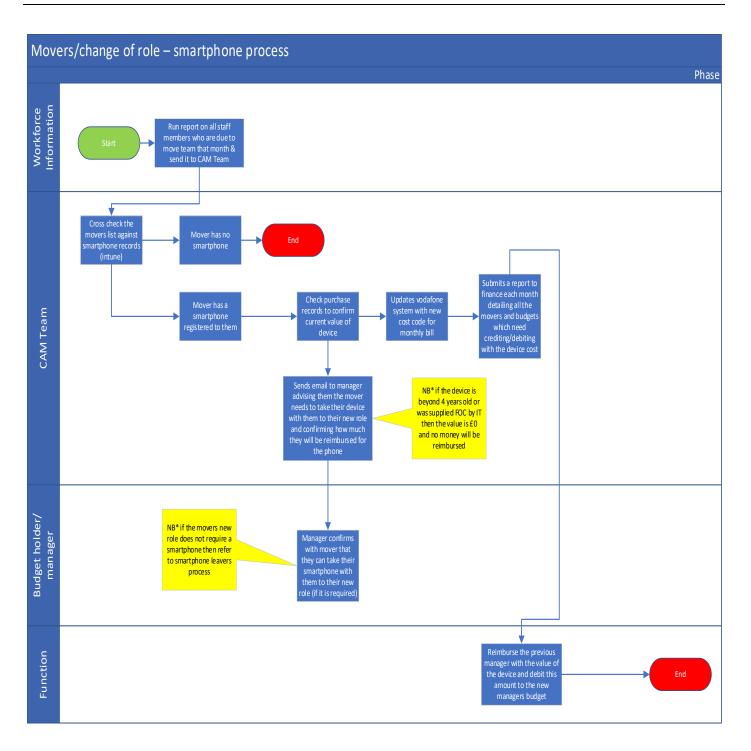
#### Appendix 3 – High level flow charts



A more accessible text version is available on request.







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