



Public – To be published on the Trust external website

# Title: IT & Telephony Re-assignment and Disposal Procedure

# Ref: IT-0020-002-v3

Status: Approved Document type: Procedure Overarching policy: IT &Telephony Procurement Reassignment and Disposal Policy





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#### 1 Introduction

Having this procedure in place gives assurance to patients, carers and their families that our staff are using IT equipment and software that meets all required standards and ensures their information is kept safe and confidential. It also respects the values and opinions of staff, by:

- Ensuring they have the necessary IT tools to carry out their roles
- Supporting individually any workplace adjustments that might be needed, and
- Providing a mechanism for staff to discuss their requirements.

#### 2 Purpose

To ensure the security and integrity of the Trust's IT infrastructure, any IT & Telephony equipment used for Trust purposes must be officially purchased and tested for compatibility, and disposed of in a safe, secure and economical way.

It is also important to keep and maintain accurate records of all IT & Telephony equipment reassigned or disposed of, within the Trust.

This procedure covers the re-assignment and disposal of all IT and Telephony equipment including software within the Trust, and describes:

- The re-assignment and disposal process for IT and Telephony equipment, including software, 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.

#### 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
•	Volunteers
•	Budget Holders
•	Line Managers



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

#### 4 Related documents

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



The IT & Telephony Procurement, Re-assignment and Disposal Policy 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.



# 5 Step-by-step instructions for reassignment and disposal of IT & telephony equipment

Step	Who	Task
1	Budget Holder / Line Manager	Identify the need for the IT or Telephony equipment to be re- assigned or disposed of. E.g. when a user of the equipment leaves, moves or no longer requires the equipment. (Including software.)
2	Budget Holder / Line Manager	Identify whether the IT or Telephony equipment can be re- assigned within the team or section. If the equipment can be re-assigned locally go to step 13.
3	Budget Holder / Line Manager	Identify whether the IT or Telephony equipment needs to be disposed of, and ensure that the equipment has been cleared of all data where possible. Note: items returned to the Information Service Desk will be cleared of data before destruction or re-assignment – <b>ALL Data will be lost and</b> <b>will not be recoverable</b> .
4	Budget Holder / Line Manager	Log a Webcall through the <u>TEWV online store</u> (Select the IT Recycle Option) with the Information Service Desk to have the equipment disposed of, providing the information requested on the form, and the nominated contact.
5	Information Service Desk Clerk	Receive the request for disposal and clarify the requirements for disposal. Where possible with small items of equipment e.g. mobile phones Information Service Desk will request that the item is returned to the IT Contracts and Asset Team for re-assignment. e.g. Mobile phones or data sticks. Any items received by the IT Contracts and Asset Team for re- assignment will be re-assigned to the next suitable procurement order for this item. Larger items will be collected by the Trusts contracted disposal company.
6	Information Service Desk Clerk	Clarify any outstanding issues on information regarding the request.
7	Budget Holder / Line Manager	Responds to any outstanding information requests on the disposal order.
10	Third Party Supplier	Receives the call for disposal and liaises with the nominated person at the address provided on the order.
11	Third Party Supplier	<ul> <li>Where appropriate equipment must 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</li> </ul>





		Asset Team. Receives the order for disposal and liaises with the nominated person at the address provided on the order.
		the nominated person at the address provided on the order.
12	Budget Holder / Line Manager	Inform the Information Asset Administrator of any changes required to the Department Information Asset Register. Where an item, which has any ongoing charges has been reassigned within a team, this must be reported to the Information Service Desk, e.g. Mobile phones, Mobile Working equipment etc. Please log a Procurement Webcall through the <u>TEWV online store</u> . The IT Contracts and Asset Team will then request a transfer of the costs, billing allocations and where relevant phone numbers to the new allocated user. New branch codes and cost centres must be included to ensure prompt payment to the Third Party Supplier, and correct budget allocations.
13	Information Asset Administrator/Budget Holder / Line Manager	Change or delete the entry for the equipment on the Department Information Asset Register. Inform the Information Asset Administrator of any changes required to the Department Information Asset Register.
14	Information Asset Administrator	Ensure that any items of equipment that are deemed as Trust assets (i.e. have a value of £5000 or more) are updated and recorded by submitting an amendment to the Trust Capital Asset Register Trustee for inclusion in or removal from the central Capital Asset Register. Change or delete the entry for the equipment on the Department Information Asset Register.
15	Information Asset Administrator	Will ensure that a regular audit of IT & Telephony equipment takes place to verify and ensure the accuracy of the Information Asset Register. Ensure that any items of equipment that are deemed as Trust assets (i.e. have a value of £5000 or more) are updated and recorded by submitting an amendment to the Trust Capital Asset Register Trustee for inclusion in or removal from the central Capital Asset Register.
16	Information Asset Administrator	Will ensure that a regular audit of IT & Telephony equipment takes place to verify and ensure the accuracy of the Information Asset Register.

## 6 Definitions

Term	Definition			
Information Asset Administrator (IAA)	<ul> <li>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.</li> </ul>			



IT	&	Telephony	Equipment
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• This includes hardware and software used by the Trust to conduct its business.

#### 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 Training needs analysis

Staff/Professional Group	Type of Training	Duration	Frequency of Training
All	Read Procedure	20 minutes	Annually or when changes are applied

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

	able Standard/Key rmance 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	Monthly	IMT Management Meeting



## 9 Document control (external)

To be recorded on the policy register by Policy Coordinator						
Date of approval:	08 September 2021					
Next review date:	08 September 2024					
This document replaces:	IT-0020-002.v2	IT-0020-002.v2				
This document was approved	Name of committee/group	Date				
by:	Heads of Information	02 September 2021				
This document was ratified	Name of committee/group	Date				
by:	Digital Performance and Assurance Group	08 September 2024				
An equality analysis was completed on this document on:	20 August 2021					
Document type	Public					
FOI Clause (Private documents only)	n/a					

#### Change record

Version	Date	Amendment details	Status
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	Published
		Tasks for the Information Service Desk Analyst changed to the IT Asset Team roles. References to cost for disposal and Cardea removed	





#### Appendix 1 - Equality Analysis Screening Form

#### Please note; The Equality Analysis Policy and Equality Analysis Guidance can be found on the policy pages of the intranet

Name of Service area, Directorate/Department i.e. substance misuse, corporate, finance etc.	Information Depart	ment,	Finance and Information	Dire	ectorate	
Policy (document/service) name	IT & Telephony Re-assignment and Disposal Procedure					
Is the area being assessed a…	Policy/Strategy		Service/Business plan		Project	
	Procedure/Guidanc	ce		x	Code of practice	
	Other – Please state					
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 (This is the date you are asked to write or review the document/service etc.)	18 Aug 21					
End date of Equality Analysis Screening (This is when you have completed the equality analysis and it is ready to go to EMT to be approved)	20 Aug 21					

You must contact the EDHR team if you identify a negative impact.





1. Who does the Policy, Service, Function, Strategy, Code of practice, Guidance, Project or Business plan benefit?

This procedure has been created to ensure that staff have easy access to clear information regarding the Trust's process for re-allocation and disposal, of IT & Telephony equipment.

2. Will the Policy, Service, Function, Strategy, Code of practice, Guidance, Project or Business plan impact negatively on any of the protected characteristic groups below?

Race (including Gypsy and Traveller)	No	<b>Disability</b> (includes physical, learning, mental health, sensory and medical disabilities)	No	Sex (Men, women and gender neutral etc.)	No
Gender reassignment (Transgender and gender identity)	No	<b>Sexual Orientation</b> (Lesbian, Gay, Bisexual and Heterosexual etc.)	No	Age (includes, young people, older people – people of all ages)	No
<b>Religion or Belief</b> (includes faith groups, atheism and philosophical belief's)	No	<b>Pregnancy and Maternity</b> (includes pregnancy, women who are breastfeeding and women on maternity leave)	No	Marriage and Civil Partnership (includes opposite and same sex couples who are married or civil partners)	No

**No** – Please describe any positive impacts/s

Staff will understand how they can re-assign and dispose of IT assets 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.





<ol> <li>Have you considered other sources of information such as; legislation, codes of practice, best practice, nice guidelines, CQC reports or feedback etc.?</li> <li>If 'No', why not?</li> </ol>				No			
<ul> <li>Sources of Information may include:</li> <li>Feedback from equality bodies, Care Quality Commission, Equality and Human Rights Commission, etc.</li> <li>Investigation findings</li> <li>Trust Strategic Direction</li> <li>Data collection/analysis</li> <li>National Guidance/Reports</li> <li>Staff grievances</li> <li>Media</li> <li>Community Consultation/Consultation Groups</li> <li>Internal Consultation</li> <li>Research</li> <li>Other (Please state below)</li> <li>ITIL guidance</li> <li>National Cyber Security Group</li> <li>DS&amp;P Toolkit requirements</li> </ul>							
4. Have you engaged or consulted with service users, carers, staff and other stakeholders including people from the following protected groups?: Race, Disability, Sex, Gender reassignment (Trans), Sexual Orientation (LGB), Religion or Belief, Age, Pregnancy and Maternity or Marriage and Civil Partnership							
No – Please describe future plans that you may have to engage and involve people from different groups							
As central asset management progresses, this procedure will need to be re-written, as part of this work a wider consultation will be undertaken.							





5. As pa	art of this equality analysis have	e any train	ing needs/service needs been iden	tified?		
Νο	Please describe the identified training needs/service needs below					
A training need has been identified for;						
Trust staff		No	Service users	No	Contractors or other outside agencies	No
Make sure that you have checked the information and that you are comfortable that additional evidence can provided if you are required to do so						



### 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		

	Title of document being reviewed:	Yes/No/ Not applicable	Comments
	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	
10.	Publication		
	Has the document been reviewed for harm?	N/A	
	Does the document identify whether it is private or public?	Yes	
	If private, does the document identify which clause of the Freedom of Information Act 2000 applies?	N/A	