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| Reference Number: UHB 420 Version Number: 1.1 | Date of Next Review: 8 th Aug 2020 Previous Trust/LHB Reference Number: Trust 133 |
| INFORMATION TECHNOLOGY SECURITY IM&T DISPOSAL OF IT EQUIPMENT GUIDANCE | |
| Introduction and Aim This document is written in support of the Information Technology (IT) Security Policy and supporting procedures. It provides a mechanism to achieve and maintain appropriate security arrangements in respect of Cardiff and Vale University Health Board's (the UHB) IT systems that hold confidential and sensitive patient and business information. The UHB must ensure the safety and security of all its UHB IT systems, software and in particular the UHB's Network so as to produce a safe and secure environment in line with NHS and statutory policies and procedures. This document provides further information on disposal of IT equipment to support the IT Security Policy and its related control documentation. | |
| Objectives: <ul style="list-style-type: none"> • Successful implementation of this procedure will address business and performance standards for example the requirement to meet Caldicott standards, Health and Care Standards (2015) • Aspire to meeting BS7799/ISO27001 standards and the Information Governance Toolkit Standards as far as possible in the Welsh context. | |
| Scope: This guidance applies to all of our staff in all locations including those with honorary contracts | |
| Equality Impact Assessment | An Equality Impact Assessment has been completed for the overarching IG and IT Policies. The assessment found that there was some impact on the equality groups mentioned in relation to communication. An action plan has been developed to address those areas. |
| Documents to read alongside this Guidance | Information Governance Policy Information Technology Security Policy Information Technology Security Procedure Information Risk Management Procedure A Guide to Incident Reporting |
| Approved by | Information Governance Sub Committee |
| Accountable Executive or Clinical Board Director | Executive Director of Therapies and Health Science |
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| Version Number: 1.1 | | Date of Publication: 28 th Aug 2018 |
| Approved By: IGSC | | |

Disclaimer

If the review date of this document has passed please ensure that the version you are using is the most up to date either by contacting the document author or the [Governance Directorate](#).

| Summary of reviews/amendments | | | |
|--------------------------------------|--------------------------------|-----------------------|---|
| Version Number | Date of Review Approved | Date Published | Summary of Amendments |
| 1 | 08/08/17 | 30/07/18 | List title and reference number of any documents that may be superseded |
| 1.1 | 08/08/17 | 28/08/18 | Admin changes to reflect current contact details |
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1 Introduction

Information disclosure is a major risk to NHS organisations working with sensitive data, primarily due to the increasing dependence on electronic storage systems and the use of disposable media.

NHS systems contain person identifiable information (PII), patient identifiable data (PID), plus business critical and sensitive data. To prevent unauthorised disclosure it is essential that assured data destruction take place.

This document offers guidance on the security measures requiring consideration when removing data when decommissioning IT equipment.

2 Types of IT Equipment Storage

The following is not an exhaustive list of all possible media types, but instead offers a representative sample of the most common forms of media currently in use within the UHB:

- Hard Disk Drives (HDD)
- Solid State Disk Drives (SSD)
- CD/DVD/BD/Ultra Density Optical (UDO)
- Magnet Tape
- USB/Flash Disk Drives

3 Disposal Management

It is important to maintain an effective method of managing the process of IT equipment disposal. This ensures that all media requiring destruction is correctly stored, organised, and properly accounted for. The use of an IT equipment removal and data destruction process also helps to achieve successful audit results by demonstrating repeatable steps and records of media which was processed.

Departments

Each department should keep a log of all IT equipment and media that may contain sensitive information. Initial minimum maintainable details should include; asset number, asset media type (for example a PC unit with HDD, screen, mouse and keyboard), department receipt date, and its effective end of use date.

If an item of IT equipment requires operational investigation/correction, this can be scheduled through the IT Helpdesk. The IT Helpdesk may advise the IT equipment is beyond economic repair or upgrade, and need replacement in which case the IT equipment will need to be disposed of by the department.

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For disposal of IT equipment the UHB Stores Department should be contacted by the department and a schedule for secure collection of IT Equipment arranged. It is the responsibility of the department to; log the IT equipment details for disposal, ensure secure storage of all IT equipment whilst awaiting disposal collection, and subsequently log the collection details.

UHB Stores Department

A log of all IT equipment collected from departments should be maintained and the IT equipment placed in a stores secure storage area.

At agreed periods of time, the UHB Stores contact the UHB appointed Waste Electric and Electronic Equipment (WEEE) Disposal Company, which has the Communications Electronic Security Group (www.secq.gov.uk) approval, and arrange a scheduled collection of the IT equipment media awaiting destruction.

The log should be updated with collection details and subsequently the destruction certification information received from the UHB's appointed Disposal Company, when destruction is completed.

The destruction certificates upon receipt, and after log update, should be forwarded to the IT Services Department for processing.

IT Services Department

The IT Helpdesk should keep a log registry of the destruction certificates; as these provide evidence guaranteeing the destruction of the IT equipment media by the duly licensed operator as appointed by the UHB.

The certificates clearly state the date issued, the Waste Carrier License reference and the Environment Permit reference, thus confirming that the UHB obligation in this process have been duly discharged.

The certificate documents received should be retained for a period of 6 years.

This document is one of several that sustain the UHB's IT Security Policy and IT Security Procedure.

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Useful Contacts

Appendix 1

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