

Mobile Working Policy and Guidelines

November 2017

Authorship:	Information Governance Manager (eMBED)			
Committee Approved:	Audit and Governance Committee			
Approved date:	10 November 2017			
Review Date:	November 2020			
	Relevant	Screening	Full / Completed	Outcome
Equality Impact Assessment	Yes	Yes	No	No issues identified
Sustainability Impact Assessment	Yes		Yes	No issues identified
Privacy Impact Assessment	No	No	No	Not Relevant
Bribery Checklist	No		No	Not Relevant
Target Audience:	All CCG Staff			
Policy Reference No:	P708			
Version Number:	V.2			
Publication/Distribution	Website	Email Staff		Others (i.e. SBC)
	Yes	Yes		Yes

The on-line version is the only version that is maintained. Any printed copies should, therefore, be viewed as 'uncontrolled' and as such may not necessarily contain the latest updates and amendments.

POLICY AMENDMENTS

Amendments to the Policy will be issued from time to time. A new amendment history will be issued with each change.

New Version Number	Issued by	Nature of Amendment	Approved by & Date	Date on Intranet
0.1	IG Manager	Document created		
0.2	IG Officer	Addition of form to record equipment issued	IGSG March 2015	
1.0	IG Officer	No Changes Required	IGSG Sept 2015	
2.0	IG Officer	To update for the requirements of the General Data Protection Regulation	10 November 2017	November 2017

Approval Record

Applicable Y/N	Committee / Group	Consultation / Ratification	Date taken to group	Date last Approved
	Governing Body	Ratification		
	Council of Clinical Representatives	Ratification		
	SMT	Ratification		
	Remuneration Committee	Ratification		
Yes	Audit and Governance Committee	Ratification	10/11/17	10/11/17
	Finance and Contracting Committee	Ratification		
	Business Committee	Ratification		
	Communications and Engagement Committee	Ratification		
	Quality and Performance Committee	Ratification		
	Primary Care Co-Commissioning Committee	Ratification		
	Other	Ratification		
	All Employees	Consultation		
	Public	Consultation		
	Yorkshire and Humber Social Partnership Forum	Consultation		

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1 INTRODUCTION

The Scarborough and Ryedale Clinical Commissioning Group (thereby known as the CCG) are much smaller organisations with less funds than that of their predecessor PCT organisations. Mobile working allows the CCG to make cost savings while ensure that staff remains interconnected and able to work from almost anywhere.

The CCG has therefore adopted three levels of agile working with all staff falling into one of these categories:-

1.1.1 Fixed Workers

Fixed workers will:

- Spend most of their time working at one fixed site.
- May have specific, individual equipment / furniture needs to be able to perform their role and work effectively
- Seldom away from their desk except for meetings with colleagues in the office
- Do not need to work from non-CCG sites.

Equipment

- Use of Fixed Phone on Desk.
- Use of Fixed Desktop Computer, or laptop which can sit in a docking station on the desk.

1.1.2 Flexible

Flexible workers will:

- Have the ability to effectively deliver their work utilising space across a range of CCG buildings or locations where wifi is available
- May also spend time attending meetings or working at other Trust, partner, or client sites
- Spend a large percentage of their time attending meetings/other similar events and/or delivering business across a range of internal and external sites
- Have the option and ability to work from any site or location where wifi is enabled

Equipment

- Standard mobile phone
- Laptop computer with standard carry case
- Laptop peripherals - ie., plug in mouse, keyboard, screen if required
- External network access

1.1.3 Flexible Plus

Flexible Plus workers will:

- Have the ability to effectively deliver their work utilising space across a range of CCG buildings or locations where wifi is available

- Spend most of their time working 'on the move'; accessing information or conducting community/client/patient based activities, working across a range of operational / business sites and coming into offices only for meetings or other specific events
- Have the option and ability to work from any site or location regardless of whether there is wifi.

Equipment

- Smart Phone
- Laptop computer with standard carry case
- External network access
- 3G dongle (SIM) - One off initial cost as well as monthly charge
- While there are differences between these staffing groups any CCG member of staff can request remote access. Willful or negligent disregard of this policy will be investigated and may be treated as a disciplinary offence.

2 ENGAGEMENT

This policy has been developed based on the knowledge and experience of the Information Governance team. It is derived from a number of national codes and policies which are considered as best practice and have been used across many public sector organisations.

3 IMPACT ANALYSES

3.1.1 Equality

An equality impact screening analysis has been carried out on this policy and is attached at Appendix 1.

As a result of performing the analysis, the policy, project or function does not appear to have any adverse effects on people who share Protected Characteristics and no further actions are recommended at this stage.

3.1.2 Sustainability

A sustainability assessment has been completed and is attached at Appendix 2. The assessment does not identify and benefits or negative effects of implementing this document.

4 SCOPE

This policy applies to all staff, CCG Members, temporary staff, seconded staff, contractors and others undertaking work on behalf of the CCG etc who are permitted to use equipment of the organisation at home or other place of work, or who may use their own personal or third-party computing resources to connect to networked services of the organisation.

Such equipment includes, but is not limited to:

- Laptop computers

- PDA's or other hand-held devices
- Smartphones

5 DEFINITIONS

Authentication Token

A Authentication token is a small device that is associated with your personal network login account. When you are issued a token you will be required to enter a personal identification number (PIN) upon its first use. When the token is used in conjunction with your network login and password for remote access to the network, you are only given access if the following details are entered correctly:-

- Your Personal Login Name or Username (this is the same login name you use to access the network when at Trust premises)
- Your Personal Password
- Your Token Pin
- The Secure Token rolling Number

6 POLICY PURPOSE AND AIMS

6.1 Requesting Remote Access

Remote access can be requested for any existing staff member or can be requested as part of the setup of a new account.

Requests for remote access should be directed to the IMT Service Desk and should originate from the Line Manager of the individual requiring the access. Once logged the IMT department will process the request.

6.2 Health and Safety

In principle the same considerations should be given to the remote working environment as to the working in the normal office environment. You should ensure your immediate working environment is free of trip hazards, electrical connections are safe etc. It is the employee's duty to always consider the risks surrounding their working environment, and take steps where appropriate.

6.3 Theft

A laptop or other mobile device is a prime target for theft, as they are small, expensive, and generally easy to dispose of.

- You should never leave devices unattended
- You should never leave devices on view in a motor vehicle. Ideally always take equipment with you, however if you have no choice but leave equipment in a vehicle ensure it is locked in the boot and not visible
- Such equipment can also be an issue in a high-risk environment, such as a housing estate. An individual carrying what is clearly a laptop bag is a prime target, so wherever possible ensure you are aware of the risks surrounding you. The use of

rucksacks or other non-obvious bags to carry a laptop may be advisable in some circumstances

6.4 Privacy and Information Governance

The rules applying to information governance in the workplace similar apply to remote working using IT equipment. You should take all steps that are necessary to ensure that information is not disclosed.

In particular, ensure that you are not overlooked when using any system. If you are in a public place, then find a location where it is not possible for anyone to see over your shoulder. CCTV is also prevalent in today's world, particularly in the UK, so it is advisable to be aware of any cameras overlooking your point of work that might be able to see information on your screen. Privacy screens are available on request from the Information Governance Team. These screens fit over the laptop's monitor and reduce the viewing angle of the screen so that it is only visible when looked at squarely to the screen.

The risks associated with a breach of the information governance rules are:

- accidental breach of patient confidentiality
- disclosure of other sensitive data of the organisation to unauthorised individuals
- loss or damage to critical business data
- damage to the organisation's infrastructure and e-services through spread of un-trapped malicious code such as viruses
- the creation of a hacking opportunity through an unauthorised internet access point
- misuse of data through uncontrolled use of removable media such as digital memory sticks and other media
- other operational or reputational damage

6.5 Use of Public Computers or Publicly Available Networks

Great care should be taken using publicly-available equipment, such as an Internet café or hotel PC.

- Ensure that controls exist such that access is controlled. Avoid 'free use' facilities where someone just walk up and use the device. Most Internet cafés have systems which issue a 'one time' password, which allows access only for a prescribed period of time. If this is the case, also ensure you have allowed sufficient time at the end of your period for 'clearing down' any information you may leave behind.
- If you have any doubts that the device is not properly secured (e.g. does not appear to have any anti-virus software installed), then do not use such equipment
- Facilities will be limited when using public equipment, generally to using Outlook Web Access for reviewing and sending emails
- When you have finished, before closing Internet Explorer make sure you clear the browsing history (depending on the version of Explorer, generally Tools->Internet Options->Clear History), and also remove temporary files (generally Tools->Internet Options->Delete Files). Ensure that the 'Delete All Offline Content' box is ticked.

- If you are using a public available network or 'hotspot', make sure that is a secured network (i.e. requires you to put in a pass key). If it is unsecured, do NOT use it, as any data passing between your PC and the network can be captured.

6.6 Storage of Data

You should never store any data on a non-CCG supplied device. This applies to home PCs or PCs used in hotels or Internet cafes

Do not store data on diskette, CD or other similar storage device

6.7 Memory Sticks

If data does need to be stored, then use ONLY a CCG-supplied encrypted memory stick. These are available by request from the IMT department, subject to a manager's approval.

Each encrypted memory stick has a unique serial number and password. Information cannot be accessed unless the password is known. Do not write the password down, and if it needs to be shared with other member of staff, inform the other individual verbally.

Memory sticks should not be labelled with any sort of NHS identification. They are secure, and without the password they are useless. It should not be possible to determine that the memory stick is the property of the NHS.

6.8 Data and Device Encryption

All mobile devices MUST be equipped with encryption software

Laptops supplied by the CCG will have this pre-installed

Other devices, such as Smartphones should also be encrypted. Any device supplied by the IMT department will already be encrypted, however devices ordered directly from the manufacturer or distributor may not. If you are in any doubt, please contact the IMT Service Desk. As a guide an encrypted device will require a password at power-on, whereas an unencrypted one will not.

6.9 Identifying Labels

Remote devices should not carry any identifying labels which immediately indicate they are NHS property. You should make a note of any serial or asset numbers on the devices you have been issued with. These will be required when any loss or theft is reported.

You should also not carry any other identifying paperwork with the laptop, which identifies it as an NHS machine. If possible, always carry paperwork separate from the laptop.

6.10 Confidentiality

As the NHSnet is a closed network and access from other networks is very strictly controlled, staff should be aware that the greatest risk to security is posed by those within the network, and not by outsiders. The NHSnet cannot protect systems from the actions, legitimate or otherwise, of other users. Therefore, all staff should be especially aware of the CCG's security and Internet and E-mail policies. Staff should also ensure that they are meeting the requirements of the Data Protection Act 1998 and General Data Protection Regulation 2016, and at all times behave in accordance with UK law.

Staff working on CCG or associated organisations material/work must at all times take extreme care to ensure that confidentiality is maintained and follow appropriate Trust policies.

Sensitive and confidential material must not be taken out of the conventional workplace without prior approval by a member of staff's line manager

6.11 Incident Reporting

Any incident which has or you believe may have compromised the integrity of the CCG information systems through remote working should be reported within 24 hours of being identified through the existing incident management process. This would include, but is not limited to:-

Loss or theft of any supplied equipment

Accidental loss or disclosure of information such as login names, passwords or PIN numbers that could cause the CCG information systems to be compromised.

Loss or disclosure of any other confidential information.

Loss or theft of equipment should be reported to the IMT Service Desk immediately. This will ensure that steps can be taken to prevent the equipment being used on the CCG network, and in some cases allow the equipment to be disabled remotely.

7 ROLES, RESPONSIBILITIES AND DUTIES

Review and Maintenance	Information Security Officer
Approval	CCG Management Team
Local adoption	Line managers (in scope)
Compliance	All staff and contractors (in scope)
Monitoring	Service Desk, System Engineers, Audit

8 IMPLEMENTATION

This policy will be published on the CCG website and all staff will be made aware of its publication through communications and team meetings.

Breaches of this policy may be investigated and may result in the matter being treated as a disciplinary offence under the CCG's disciplinary procedure'.

9 TRAINING AND AWARENESS

The Senior Management Team and line managers are responsible for ensuring that all staff are aware of the policy which will be available on the CCG intranet.

10 MONITORING AND AUDIT

Adherence to this policy will be monitored through the incident reporting system and also through standard IMT monitoring KPI's. Where there is a suspected issue an investigation will be performed and staff found to be breach guidance may be subject to disciplinary actions.

11 POLICY REVIEW

The policy and procedure will be reviewed at least every three years by the CCG in conjunction with managers, and Trade Union representatives if appropriate, with changes made as required and the outcome published. Where review is necessary due to legislative change, this will happen immediately.

Audit and Governance Committee has delegated responsibility for monitoring and reviewing the policy and will report any concerns to the Governing Body.

12 REFERENCES AND ASSOCIATED DOCUMENTATION

This policy should be used in conjunction with the following policies:

- Acceptable Computer Use Policy
- Data Protection and Confidentiality Policy

13 APPENDIX 1 – GUIDANCE WHILE WORKING REMOTELY

All staff

Users must take precautions to ensure that no breach of confidentiality or inappropriate disclosure can arise as a result of unauthorised access by others resident at, or visiting the remote location.

Under no circumstances must anyone other than the authorised user be allowed access to the connection, even for seemingly harmless activities.

Users must ensure that PC is located in a discrete location where the screen is not easily overlooked.

Users must take particular care to log off from the remote connection when not in use.

Users are responsible for the security of personal logins and password security. **You should never tell anyone your personal network password under any circumstances.**

Users are responsible for your Authentication token and your associated PIN. **You must never tell anyone your PIN. If you suspect someone knows your PIN you must IMT Service Desk immediately in order to have the token disabled.**

Users are responsible for any loss of their Authentication Token. **If you lose your Authentication token you must report this to IMT service Desk immediately.**

You or your department are responsible for any costs associated with lost or stolen Authentication tokens.

Equipment should not be left in vehicles overnight

14 APPENDIX 2 RECORDS OF MOBILE EQUIPMENT ISSUED FORM

Name :	
Job Title :	
Line Manager and Directorate :	
Contact Telephone :	
	Date Issued :
Please Tick If You Use :	
Laptop (specify make, model and serial no.)	
Tablet (specify make, model and serial no.)	
USB pens / drives (memory sticks) - Please give reference no. if one available	
VPN (RAS) Token (specify serial no.)	
iPhone (please specify if this is mobile and data) Mobile phone (please specify number)	
SIM Number	
IEMI Number	
<p>This form must be completed by all staff using portable equipment, including personally owned devices when accessing the network remotely using VPN (RAS) Token. I confirm that I have received a portable device and have read, understood and will comply with the Mobile Working Policy.</p>	
Print Name :	Signature :
	Date :
Manager :	

Equality Impact Assessment Strategy Policies

General Information	
Policy:	Mobile Working Policy and Guidelines
Date of Analysis:	15/11/17
Policy Lead: (Name, job title and department)	Corporate Services Manager
What are the aims and intended effects of this policy?	This Policy defines the types of worker .e.g. fix desk or flexible and provides guidance to staff who work remotely
Are there any significant changes to previous policy likely to have an impact on staff, patients or other stakeholder groups?	None
Please list any other policies that are related to or referred to as part of this analysis	None
Who is likely to be affected by this policy?	General Public <input type="checkbox"/>
	Service Users <input type="checkbox"/>
	Staff <input checked="" type="checkbox"/>
What engagement / consultation has been done, or is planned for this policy and the equality impact assessment?	Not applicable
Promoting Inclusivity and NHS Scarborough and Ryedale CCG's Equality Objectives. How does the project, service or function contribute towards our aims of eliminating discrimination and promoting equality and diversity within our organisation? How does the policy promote our equality objectives	Not applicable

Equality Data

Data provided below is from Census 2011

Age

Age Range	Number	%
0-14	17,672	14.9
15-44	39,530	33.2
45-64	15,427	13.0
65-74	9,083	7.6
85+	3,820	3.2

Gender

JSNA 2016

	%
Male Residents	49.6
Female Residents	50.4

Race / Nationality

BME – 2011 Census Data

	%
White	97.5
Mixed	0.8
Asian	1.2
Black	0.2
Other	0.2

Languages – 2011 Census Data

	%
English	97.5
Polish	0.8
Other EU Language	0.6
Other	1.86

Gypsy and Travellers – 2011 Census Data

Scarborough	37
Ryedale	81

Disability

2011 Census Data

	%
Long Term Health Problem/Disability	21 .3
Limiting Long Term Illness	20 .4

Projecting Adult Needs and Service Information (PANSI)-2017 Estimates

	Scarborough	Ryedale
Limiting Long Term Illness - day to day activities limited a little	7,507	3,455
Limiting Long Term Illness - day to day activities limited a lot	6,513	2,462
Mobility - unable to manage at least one activity on their own	5,210	2,509
Learning Disability – Including Down’s syndrome	947	469
Learning Disability – Autistic Spectrum Disorders and Down’s Syndrome	81	134
Visual Impairment - Moderate or severe	3,323	1,588
Hearing Impairment – some hearing loss	17,167	8,370
Hearing Impairment – Moderate or Severe	2,215	1,070
Dementia	1,973	959
Depression	2,474	1,585
Learning Disability – Baseline	1,454	708
Learning Disability – Moderate - Severe	415	1,128
Learning Disability – Autistic Spectrum Disorders	592	289
Learning Disability – Down’s syndrome	38	18
Physical Disability – Moderate	5,176	2,620
Physical Disability – Serious	1,605	824
Physical Disability – Personal Care	3,198	1,639
Visual Impairment – Serious	39	19
Hearing Impairment – Some hearing loss	69,328	3,565
Hearing Impairment – Severe	395	203
Mental Health Problems	4,331	2,096

Sexual Orientation	In relation to sexual orientation, local population data is not known with any certainty. In part, this is because until recently national and local surveys of the population and people using services did not ask about an individual's sexual orientation. However, nationally, the Government estimates that 5% of the population are lesbian, gay or bisexual communities.																																
Gender Reassignment	There are not any official statistics nationally or regionally regarding transgender populations, however, GIRES (Gender Identity Research and Education Society - www.gires.org.uk) estimated that, in 2007, the prevalence of people who had sought medical care for gender variance was 20 per 100,000, i.e. 10,000 people, of whom 6,000 had undergone transition. 80% were assigned as boys at birth (now trans women) and 20% as girls (now trans men). However, there is good reason, based on more recent data from the individual gender identity clinics, to anticipate that the gender balance may eventually become more equal.																																
Religion / Belief	<p><u>2011 - Census Data</u></p> <table border="1" data-bbox="379 768 1225 1171"> <thead> <tr> <th></th> <th colspan="2">%</th> </tr> </thead> <tbody> <tr> <td>Christian</td> <td colspan="2">67</td> </tr> <tr> <td>Buddhist</td> <td colspan="2">0.3</td> </tr> <tr> <td>Hindu</td> <td colspan="2">0.1</td> </tr> <tr> <td>Jewish</td> <td colspan="2">0.1</td> </tr> <tr> <td>Muslim</td> <td colspan="2">0.5</td> </tr> <tr> <td>Sikh</td> <td colspan="2">0.1</td> </tr> <tr> <td>Other Religion</td> <td colspan="2">0.4</td> </tr> <tr> <td>No Religion</td> <td colspan="2">24.3</td> </tr> <tr> <td>Religion not stated</td> <td colspan="2">7.4</td> </tr> </tbody> </table>				%		Christian	67		Buddhist	0.3		Hindu	0.1		Jewish	0.1		Muslim	0.5		Sikh	0.1		Other Religion	0.4		No Religion	24.3		Religion not stated	7.4	
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Assessing Impact

Is this policy (or the implementation of this policy) likely to have a particular impact on any of the protected characteristic groups?

(Based on analysis of the data / insights gathered through engagement, or your knowledge of the substance of this policy)

Protected Characteristic:	No Impact:	Positive Impact:	Negative Impact:	Evidence of impact and, if applicable, justification where a <i>Genuine Determining Reason</i> ¹ exists (see footnote below – seek further advice in this case)
Gender	X			
Age	X			
Race / ethnicity / nationality	X			
Disability	X			
Religion or Belief	X			
Sexual Orientation	X			
Pregnancy and Maternity	X			
Transgender / Gender reassignment	X			
Marriage or civil partnership	X			

What sources of equality information have you used to inform your piece of work?

(Please refer to the JSNAs and Population data, previous engagement findings, research, patient experience reports etc.)

Not applicable

What measures have been put in place to mitigate any potential impact?

Not applicable

1. ¹ The action is proportionate to the legitimate aims of the organisation (please seek further advice)

Action Planning:

As a result of performing this analysis, what actions are proposed to remove or reduce any risks of adverse impact or strengthen the promotion of equality?

Identified Risk:	Recommended Actions:	Responsible Lead:	Completion Date:	Review Date:

Sign-off

All EIAs must be signed off by a member of SMT

I agree with this assessment / action plan

Signed off by (Name/Job Title)

Signed: Sally Brown

Date: 15/11/17

SUSTAINABILITY IMPACT ASSESSMENT

Instructions

Sustainability is one of the CCG's key priorities and consequently the CCG has made a corporate commitment to address the environmental effects of its activities across all service areas. The purpose of the Sustainability Impact Assessment is to record any positive or negative impacts that a Policy / Board Report / Committee Report / Service Plan / Project is likely to have on each of the CCG's sustainability themes. The Sustainability Impact Assessment enables any relevant impacts to be identified and potentially managed.

The Sustainability Impact Assessment is based on assessing the impact of the activity against a series of criteria covering environmental sustainability issues. It would be most desirable for activities to score positively in as many areas as possible, although it is likely that some areas will score positively against some themes, and negatively against others.

Using the Sustainability Impact Assessment template

To complete the Sustainability Impact Assessment template, you should consider whether the Policy / Board Report / Committee Report / Service Plan / Project will have a positive or negative impact on each of the themes by placing a mark in the appropriate column. When you think there is likely to be an impact, please provide some annotations regarding the nature of the impact, and any actions that will be taken to address that impact. Users should note that not every theme will be relevant. Where this is the case the 'No Specific Impact' column should be marked. Users should also consider the following tips:

1. Make relative not absolute judgements (e.g. a new energy efficient service would score positively even if it consumes more energy than if no service were provided).
2. Be aware that small positive changes could be outweighed by negative ones (e.g. new energy efficient lighting in the short term may outweigh the benefits of maintaining current lighting).
3. If there are both positive and negative impacts, these need to be recorded in order to give a balanced view. Be objective and unbiased.
4. Concentrate on the most key significant issues - there is the potential to consider the appraisal in a very detailed way. This should be avoided at this stage.
5. Judge a proposal over its whole lifespan and remember that some impacts may change over different timescales.

If you require assistance in completing the Sustainability Impact Assessment please contact the Corporate Services Team

Domain	Review questions	Assessment of Impact Negative = -1 Neutral = 0 Positive = 1 Unknown = ? Not applicable = n/a	Brief description of impact	If negative, how can it be mitigated? If positive, how can it be enhanced?
Models of Care	<p>Will it minimise 'care miles' making better use of new technologies such as telecare and telehealth, delivering care in settings closer to people's homes?</p> <p>Will it create incentives to promote prevention, healthy behaviours, mental wellbeing, living independently and self-management?</p> <p>Will it provide evidence-based, personalised care that achieves the best possible health and well-being outcomes with the resources available?</p> <p>Will it reduce avoidable hospital admissions or permanent admissions to residential care or nursing homes?</p> <p>Will it pay for services based on health outcomes rather than activity for example through personal budgets?</p> <p>Will it deliver integrated care, that co-ordinate different elements of care more effectively and remove duplication and redundancy from care pathways?</p> <p>More info: http://www.sduhealth.org.uk/areas-of-focus/clinical-and-care-models.aspx</p>	n/a		
Travel	<p>Will it reduce 'care miles' (telecare, care closer) to home?</p> <p>Will it reduce repeat appointments?</p> <p>Will it provide / improve / promote alternatives to car based transport (e.g. public transport, walking and cycling)?</p> <p>Will it support more efficient use of cars (car sharing, low emission vehicles, community transport, environmentally friendly fuels and technologies)?</p> <p>Will it improve access to services and facilities for vulnerable or disadvantaged groups or individuals?</p> <p>More info: http://www.sduhealth.org.uk/areas-of-focus/carbon-hotspots/travel.aspx</p>	n/a		
Facilities Management	<p>Will it reduce the amount of waste produced or increase the amount of waste recycled?</p> <p>More info: http://www.sduhealth.org.uk/areas-of-focus/carbon-hotspots/waste.aspx</p> <p>Will it reduce water consumption?</p> <p>Will it improve the resource efficiency of new or refurbished buildings (water, energy, density, use of existing buildings, designing for a longer lifespan)?</p> <p>Will it improve green space and access to green space?</p> <p>More info: http://www.sduhealth.org.uk/areas-of-focus/carbon-hotspots/energy.aspx</p>	n/a		

Adaptation to Climate Change	<p>Will it support mitigation of the likely effects of climate change (e.g. identifying proactive and community support for vulnerable groups; contingency planning for flood, heatwave and other weather extremes)?</p> <p>More info: http://www.sduhealth.org.uk/areas-of-focus/community-resilience/community-resilience-copy.aspx</p>	n/a		
Procurement	<p>Will it specify social, economic and environmental outcomes to be accounted for in procurement and delivery in line with the Public Services (Social Value) Act 2012?</p> <p>Will it stimulate innovation among providers of services related to the delivery of the organisations' social, economic and environmental objectives?</p> <p>Will it reduce waste, environmental hazards and toxic materials for example by reducing PVC, antibiotic use, air pollution, noise, mining and deforestation?</p> <p>Will it reduce use of natural resources such as raw materials, embedded water, and energy to promote a circular economy?</p> <p>Will it support the local economy through local suppliers, SMEs or engage with third sector or community groups?</p> <p>Will it promote ethical purchasing of goods or services e.g. increasing transparency of modern slavery in the supply chain globally?</p> <p>More info: http://www.sduhealth.org.uk/areas-of-focus/commissioning-and-procurement/procurement.aspx</p>	n/a		
Workforce	<p>Will it provide employment opportunities for local people?</p> <p>Will it promote or support equal employment opportunities?</p> <p>Will it promote healthy working lives (including health and safety at work, work-life/home-life balance and family friendly policies)?</p> <p>Will it offer employment opportunities to disadvantaged groups and pay above living wage?</p> <p>More info: http://www.sduhealth.org.uk/areas-of-focus/social-value.aspx</p>	n/a		
Community Engagement	<p>Will it promote health, increase community resilience, social cohesion, reduce social isolation and support sustainable development?</p> <p>Will it reduce inequalities in health and access to services?</p> <p>Will it increase participation including patients, the public, health professionals and elected officials to contribute to decision making?</p> <p>Have you sought the views of our communities in relation to the impact on sustainable development for this activity?</p> <p>Will it increase peer-support mechanisms?</p> <p>More info: http://www.sduhealth.org.uk/areas-of-focus/community-resilience.aspx</p>	n/a		
Estimated carbon benefit	<p>What is the estimated carbon benefit (in terms of tCO₂e) from the implementation of this project? As opposed to the current business as usual position. Speak with your sustainability manager and see the following guidance:</p> <p>More info: http://www.sduhealth.org.uk/areas-of-focus/carbon-hotspots/pharmaceuticals/cspm/sustainable-care-pathways-guidance.aspx</p>	n/a		

18 APPENDIX FIVE – PRIVACY IMPACT ASSESSMENT

Privacy Impact Assessment (PIA)

Screening Questions

The below screening questions should be used to inform whether a PIA is necessary. This is not an exhaustive list therefore in the event of uncertainty completion of a PIA is recommended.

Please contact the Corporate Services Team of IG Manager (eMBED) if you need any assistance

Marking any of these questions is an indication that a PIA is required:

Screening Questions		Tick
1	Will the project involve the collection of identifiable or potentially identifiable information about individuals?	<input checked="" type="checkbox"/>
2	Will the project compel individuals to provide information about themselves? i.e. where they will have little awareness or choice.	<input checked="" type="checkbox"/>
3	Will identifiable information about individuals be shared with other organisations or people who have not previously had routine access to the information?	<input checked="" type="checkbox"/>
4	Are you using information about individuals for a purpose it is not currently used for or in a new way? i.e. using data collected to provide care for an evaluation of service development.	<input checked="" type="checkbox"/>
5	Where information about individuals is being used, would this be likely to raise privacy concerns or expectations? i.e. will it include health records, criminal records or other information that people would consider to be sensitive and private.	<input checked="" type="checkbox"/>
6	Will the project require you to contact individuals in ways which they may find intrusive? i.e. telephoning or emailing them without their prior consent.	<input checked="" type="checkbox"/>
7	Will the project result in you making decisions in ways which can have a significant impact on individuals? i.e. will it affect the care a person receives.	<input checked="" type="checkbox"/>
8	Does the project involve you using new technology which might be perceived as being privacy intrusive? i.e. using biometrics, facial recognition or automated decision making.	<input checked="" type="checkbox"/>

Please retain a copy of this questionnaire within your project documentation.

**If you have ticked any of the questions above – please complete a full Privacy Impact Assessment –
The most up to date version of the form is available on the CCG website at:**

<http://www.scarboroughryedaleccg.nhs.uk/publications/policies-2/>