Computer, Internet and Email Usage Policy (including using own devices for work purposes)

Introduction

- The Practice's computers and IT network are invaluable resources which must be used appropriately
- The internet offers access to almost infinite sources of information
- Email offers a fast, inexpensive and convenient way to communicate both inside an outside the Practice
- The Practice wishes to ensure that these resources are used responsibly and productively
- Employees who work remotely, for example from home, or who bring their computers (or other devices, for example mobile telephones or tablets) into work or access work-related data on them should also adhere to his policy.
- This policy should be read in conjunction with the practice's data protection policy and use of social media policy.

Applicability

The policy applies to all employees and Partners, and also applies to other people who work at the Practice e.g. self-employed staff, temporary staff and contractors and who have access to the Practice's computer systems.

The Policy

Access to and use of computers

- You must keep confidential your username/password and must not divulge these to anyone. A lost or forgotten username or password must be reported to the Deputy Practice Manager
- If you think your username/password may be known to someone else, notify the Deputy Practice Manager immediately
- It is illegal under the Computer Misuse Act ('the Act') to steal or guess someone's
 username/password and to use this information to access, modify or delete data
 which you are not authorised to access, or to alter settings on a computer or
 otherwise affect its operation. It is also an offence under the Act to use someone's
 username/password to access a computer through which to commit other illegal
 acts such as 'hacking' into someone's bank account and stealing funds. Offences
 under the Act carry penalties of imprisonment and/or a fine.
- If you are suspected of any such offences the Practice's Disciplinary Procedure will be invoked. If after investigation is becomes apparent that you have offended under terms of the Act, prosecutions may be brought

The internet

Internet access to be solely for business use

- You must not create personal web pages or web logs ('blogs') using Practice time and resources
- You must not visit social networking websites such as (but not limited to)
 Facebook, MySpace, Bebo, Twitter, YouTube
- You must not surf for or download unsuitable (especially pornographic) material
- Suitable anti-spyware, adware, anti-phishing, worm, trojan and any other appropriate protection software must be kept up to date and not circumvented
- You must not engage in activities of questionable legality (e.g. gambling)
- The Practice Manager's Assistant is authorised to supervise and create/update the website
- Any material downloaded from the internet must be checked for viruses
- Any copyright, licence or usage terms on material or software downloaded from the internet must be observed
- Any licence or usage fees due on material or software downloaded from the internet must be paid (prior authorisation for the expenditure must be obtained)
- The Practice must not be committed to any purchases over the internet unless authorised by The Practice & Business Manager
- Secure transactions must be used for any purchases over the internet
- Internet usage may be monitored to ensure compliance with the Policy
- Penalties for mis-use include withdrawal of access and if necessary the implementation of the appropriate policy for Harassment^[*] or Discrimination^[*] offences or the Practice's Disciplinary Procedure^[*]
- If, in your own time, you create your own blog or place information on social networking sites, You Tube, or any other publically available location on the internet, it will be a disciplinary matter if you make any direct or indirect reference to the Practice or your employment at the Practice

Email

Usage of external email (i.e. email over the internet or NHSnet) to be solely for business purposes

- Incoming emails and any attachments must be checked for viruses/automatic virus checking must not be circumvented. Anti virus software must be kept up to date
- Emails (both internal and external) must not contain unsuitable information or attachments e.g. defamatory/discriminatory/bullying/harassing material or comments
- All emails sent externally must include a standard disclaimer (an example is shown below)
- Any confidential information (especially patient identifiable information) sent in an email must be encrypted
- You must not reveal or publicise confidential or proprietary information about the Practice
- You must not represent personal opinions as those of the Practice
- Care must be take in addressing emails (especially when using 'copies to', address books and distribution lists) to ensure that emails are sent only to the intended recipients
- You must not access, change, or use another person's username/password/email account or files for which you do not have explicit authorisation. If you are asked to

check someone else's email (e.g. when that person is on holiday or off sick), this must be authorised by [insert role].

- Email usage and content may be monitored to ensure compliance with the Policy
- Penalties for mis-use include withdrawal of access and if necessary the implementation of the appropriate policy for Harassment^[*] or Discrimination^[*] or the Practice's Disciplinary Procedure.^[*]

Use of Personal Devices

If an employee wishes to use their own device for work-related activities, they should contact [insert role] in writing with the name and model of the device and the purpose for which it is intended to be used;

Before using their own device for work-related purposes, an employee must ensure that they use a strong password to lock their device. The device must be capable of locking automatically [and deleting data automatically] if an incorrect password is entered after several attempts [or if the device is inactive for [specify period of time.

Use encryption software on their devices to store personal data securely;

Ensure that if they transfer data (either by email or by other means), they do so via an encrypted channel (for example a vpn for individual services);

Ensure that they assess the security of any open network or wi-fi connection (employees should not use unsecured wi-fi networks);

Not download unverified or untrusted apps that may pose a threat to the security of the information held on their devices:

Not, under any circumstances, use corporate personal information for any purpose other than for their work and as directed or instructed by the practice;

Use different applications for business and personal use;

Ensure that they have a system of software in place for quickly and effectively revoking access that a user might gain to a device in the event of loss or theft;

Make sure that any software that they use is genuine software installed under an appropriate licence agreement between the employee and the relevant manufacturer to prevent any security vulnerabilities;

- Report the loss or theft of a device used for work-related activities immediately to The Practice & Business Manager
- Report data breaches of which they become aware to The Practice & Business Manager immediately;

When accessing any document on the practice's [server/network/private cloud], employees must always log out of the practice's [server/network/private cloud] between sessions;

Not, under any circumstances, use public cloud-based sharing or public back-up services without prior authorisation from [name of individual/the data protection officer];

Not download or access certain applications or types of data that require the identification of the employee's location or an additional level of authentication;

An employee must ensure that their device is subject to mobile-device management so that if the device is stolen, upgraded, recycled for money or given to family or friends, the employee is able to locate the device remotely and delete data on demand. The employee must limit the purpose of mobile-device

management to the detection of the device and the remote deletion of data. If the device is stolen, the employee must be able effectively to wipe any confidential data on the device immediately by way of a remote "locate and wipe" facility;

If employees require any technical support with their devices, they should ensure that the third party providing such support has access to any data insofar as is necessary to complete his/her work and that data is not transferred to a third-party device unless there is no other way of rectifying the technical problem. If data is transferred to a third-party device, the third party must warrant, and the employee must ensure, that the information is removed permanently from such third-party device once the problem has been rectified;

Employees must not retain personal data for longer than is necessary for the purpose for which it is being used, unless there is a requirement to retain it for longer to comply with any legal obligation. If an employee is in any doubt, they should contact [name of individual/the data protection officer];

Employees must ensure that if they delete information, it is deleted permanently rather than left in the device's waste-management system. An employee may need to use overwriting software to achieve this. However, this is not always practicable because, for example, the information is stored or categorised with other information that is still live. In these circumstances, it is sufficient for the employee to put the information "beyond use";

This means that the employee must:

ensure that they do not use the personal information to make any decision that affects an individual or in a manner that affects an individual in any way;

not give any other practice access to the personal data in any way;

surround the personal data with appropriate technical and practical security; and commit to the permanent deletion of the information if and when this becomes possible.

If an employee uses removable media, for example a USB stick, to transfer personal data, they must ensure that the personal data is deleted once the transfer is complete;

Any individual whose personal data is held by the practice has the right to make a subject access request (see the practice's Data Protection Policy for more information). This means that, if an individual makes a subject access request, the practice may need to access your device to retrieve any data that is held on it about the individual:

You must allow the practice to access the device and to carry out a search to find any information about the individual held on the device;

Employees must ensure that if family or friends use their devices, they are unable to gain access to any personal information that is work-related by, for example, password-protecting it;

If an employee leaves the practice, they must delete all work-related personal data on their own device prior to their last day with the practice;

Monitoring will consist of spot checks.

Applications that have been installed for personal use will not be monitored: monitoring will be limited to business-related applications

Data Protection

Queens Park Group Surgery is the data controller in relation to work-related personal data that is held on personal devices. The Practice & Business Manager is the practice's data protection officer and is responsible for the implementation of this policy. If employees have any questions about data protection in general, this policy or their obligations under it, they should direct them to the Practice & Business Manager contactable on 01234 351661

The General Data Protection Regulations 2018 requires the practice to process any personal data in accordance with the six data protection principles (see the practice's Data Protection Policy). "Processing" includes obtaining personal information, retaining and using it, allowing it to be accessed, disclosing it and, finally, disposing of it. The sixth data protection principle requires the practice to ensure that personal data is protected by appropriate technical and practical measures against unauthorised or unlawful processing or disclosure, and against accidental loss, damage or destruction.

Employees may store special category data on a personal device only if the device has a sufficiently high level of encryption.

Monitoring

As part of its ongoing obligations under the GDPR, the practice will monitor data protection compliance in general and compliance with this policy, in particular [in accordance with an impact assessment that the practice has carried out to ensure that monitoring is necessary and proportionate]. This monitoring is in the practice's legitimate interests, to ensure that the policy is being complied with, and to ensure that the practice is complying with its legal obligations under the GDPR.

Monitoring will normally be conducted by members of the practice's Practice & Business Manager. The information obtained through monitoring may be shared internally, including with members of the HR team, your line manager, managers in the business area in which you work and IT staff if access to the data is necessary for performance of their roles. However, information would normally only be shared in this way if the practice has reasonable grounds to believe that this policy has not been followed.

The information gathered through monitoring will be retained only long enough for any breach of this policy to come to light and for any investigation to be conducted. Data is normally securely destroyed after [number of days/weeks, depending on reasons for monitoring.

Workers have a number of rights in relation to their data, including the right to make a subject access request and the right to have data rectified or erased in some circumstances. You can find further details of these rights and how to exercise them in the practice's Data Protection Policy. If workers believe that the practice has not complied with their data protection rights, they can complain to the Information Commissioner.

"Special category data" is information about an individual's:

racial or ethnic origin;

political opinions;

religious beliefs or philosophical beliefs;

trade union membership (within the meaning of the Trade Union and Labour Relations (Consolidation) Act 1992);

physical or mental health or condition (including genetic or biometric data); and sex life or sexual orientation.

Information related to criminal records and convictions is also treated as special category data for the purposes of this policy.

Consequences of non-compliance

If an employee is suspected of breaching this policy, the practice will investigate the matter under its disciplinary procedure. If any breaches are established, this could result in disciplinary action up to and including dismissal. An employee may also incur personal criminal liability for breaching this policy.

EMAIL DISCLAIMER

The following disclaimer must be appended to every external email sent from the Practice.

E-MAIL DISCLAIMER - IMPORTANT INFORMATION

The contents of this e-mail are confidential and protected by copyright. The email is intended for the named addressee only. If you are not the named addressee (or a person acting on behalf of and with the authority of the addressee) and have received this e-mail by mistake any copying, disclosure or dissemination of the contents of this e-mail to any third party is strictly forbidden by the sender. If you have received this e-mail in error, please contact the sender immediately by return of e-mail (xxx@xxxxx.xxx.xx) and then delete this e-mail and destroy any copies thereof. Please also note that Dr Khokher & Partners endeavours at all times to keep its network free of viruses. You should, however, scan this e-mail and any attachments to it for any viruses. Dr Khokher & Partners will not be held responsible for any viruses which may be transmitted upon receipt of this e-mail or the opening of any attachment thereto. Unless otherwise stated, any views or opinions presented are solely those of the author and do not necessarily represent those of Dr Khokher & Partners. Emails may be monitored.