

## **Data Protection Impact Assessment**

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#### Introduction

Data protection by design is about considering data protection and privacy issues upfront in everything you do. It can help you ensure that you comply with the UK General Data Protection Regulation's fundamental principles and requirements, and forms part of the focus on accountability.

A Data Protection Impact Assessment (DPIA) is a tool that we use to identify and reduce the data protection risks of our processing activities. They can also help us to design more efficient and effective processes for handling personal data.

The UK General Data Protection Regulation requires the Trust to put in place appropriate technical and organisational measures to implement the data protection principles effectively and safeguard individual rights. This is 'data protection by design and by default.'

In essence, this means we have to integrate or 'bake in' data protection into our processing activities and business practices, from the design stage right through the lifecycle. This concept is not new and **is now a legal requirement**.

#### When and who should complete a DPIA?

- A DPIA must be completed wherever there is a change to an existing process or service or if a new process or information asset is introduced that is likely to involve a new use or significantly changes the way in which personal data, special categories of personal data or business critical information is processed. No commitments to, or installation of systems, should take place before the DPIA has been signed off.
- Information Assets Owners (IAO) and Information Assets Administrators (IAA) must complete the DPIA.
- Relevant stakeholders (internal and external suppliers) should be consulted throughout the DPIA process.

### Who do I send the completed DPIA to for review?

• Information Governance Team <a href="mailto:sfh-tr.information.governance@nhs.net">sfh-tr.information.governance@nhs.net</a>.

### What if I need help?

Please contact the Information Governance Team <u>sfh-tr.information.governance@nhs.net</u> or <u>SFHT Phonebook (nnotts.nhs.uk)</u>



# IMPORTANT – PLEASE COMPLETE ALL QUESTIONS. IF YOU THINK A QUESTION DOES NOT APPLY INSERT N/A AND EXPLAIN WHY.

Project title:	SnapComms
Reference number:	
Implementing organisation:	Sherwood Forest Hospitals NHS Foundation Trust
Key contacts involved in the DPIA (name and job title)	Richard Brown, Head of Communications Nicola McCormack, Project
Information Asset Owner (name and job title)	Richard Brown, Head of Communications
Information Asset Administrator (name and job title)	Communication Team

#### Step 1 – What is the aim of the project being undertaken

Q1	Project description: Describe in sufficient detail for the project to be understood	SnapComms is a multi-channel communication tool to reach and engage with employees on Trust devices including desktop and mobile.
		SnapComms will support rapid communication with 100% visibility to targeted groups of employees in the event of serious incidents, or other time critical events.

#### Q2 Why are we doing it? Currently the Trust communicates with employees via email, intranet, and screen Summarise why there is a need for savers. None of these methods guarantee implementation or change and the the recipient reads, takes notice or acts. benefits it will realise. They are also not immediate. The Trust needs to communicate relevant time critical information to key groups of employees. These channels also do not allow for an audit trail to evidence that messages have been received and read by recipients. Examples of how these pop-ups might be used include: Emergency pressures, and changes to



<ul><li>protocols as a result</li><li>Escalation of current operation levels</li><li>Serious incidents</li></ul>
These communications are time critical, and relevant to key employees regardless of their location (on or off site), and their access to email or a Trust device. The ability to push communications direct to a Trust device ie desktop agent, mobile app, or via text will ensure that messages can be cascaded immediately, and appropriate action taken.

Q3	What is the nature of your relationship with the data subject (patient, employees) whose data will be used?	Employing organisation
	For example, do you provide direct care to the data subjects, are they your patients?	

Q4	Individuals need to be told how their information is processed.		
	Have you consulted the data subject or their representative about using this data? If not, please explain why you have not consulted them?	No, this is not required	
	Please provide details and an example of how this consent (if appropriate to rely on consent as a legal basis) to processing of their data was given? (Preferably embed document)	Not applicable	
	What information will you give individuals informing them of what you are doing with their data? i.e. this is consent to the processing of their personal data, not consent to treatment	Communication team will issue notices in the weekly staff bulletin to inform all employees of the new system and how the messages will be used.	
	Is this information covered by our existing fair processing information or	Not applicable	



leaflet? If Yes, provide details. If No, please provide text to be added to our fair processing information.

Patient¹
Staff²

Explain why you believe they would consider the proposed new use of their data as being reasonable or expected?

If SnapComms was unavailable we would revert to business-as-usual processes ie. all user emails, staff bulletin and social media platforms.

# Has an assessment been made that the information collected is the minimum required to meet the aim of the project?

Use of data should not be the first resort if the objective can be achieved without its use. You must justify why the use of all the data is necessary and proportionate. For example, do you need to use all the fields, can you not achieve the same objective with fewer data fields and/or a smaller data set?

Yes, User name Domain Name Full Name Job Title

Base (SFH-KMH or NHIS)
Last Device accessed name
Last connected date
Active groups
Disabled groups
Active Directory Groups
Email Address

The data that is captured is all present within the Trusts Active directory. This information is synchronised across to ensure that the correct and up to date data information is used.

Without this sync the approach to identify who will receive the communication would be time consuming and add additional tasks to the onboarding and off-boarding process within the Trust.

Has consideration been given to how the same objective or outcome may be achieved without using this data, using less data, or employing a different method - explain in full? SnapComms is one communication tool that forms part of a tool kit. The pop-ups will introduce a new and instant source of information that an e-mail would not provide, unless the individual was accessing their e-mails at that exact time.

<sup>&</sup>lt;sup>1</sup> https://www.sfh-tr.nhs.uk/for-patients-visitors/your-medical-record/

<sup>&</sup>lt;sup>2</sup> https://www.sfh-tr.nhs.uk/work-for-us/your-employees-information/



### Step 2: What type of data is being processed?

otop 2. What type of data is being proceedar				
Q6	Fully describe ALL the data that will be use the data item i.e. MRI images, patient, name, address, IP address, NHS/D number  User name Domain Name Full Name Job Title Base (SFH-KMH or NHIS) Last Device accessed name Last connected date Active groups Disabled groups Active Directory Groups Email address	me, Why is it necessary?		
Q7	Will you use special categories of person	onal data?		
	political opinions			
	racial or ethnic origin			

Q7	Will you use special categories of personal data?		
	political opinions		
	racial or ethnic origin		
	religious or philosophical beliefs		
	trade-union membership		
	genetic data		
	biometric data for the purpose of uniquely identifying a natural person		
	data concerning health		
	data concerning a natural person's sex life or sexual orientation		

Q8	Q8 Approximately how many individuals will be in the dataset?			
	<11 individuals			
	11 – 50 individuals			
	51 – 100 individuals			
	101 – 300 individuals			
	301 – 500 individuals			
	501 - 1,000 individuals			
	1,001 - 5,000 individuals			
	5,001 - 10,000 individuals	х		
	10,001 - 100,000 individuals			
	100,001 or more individuals			



# How large and expansive are the records sets being used, what will it consist of?

The data is held externally and due to the type of file we are unable to quantify the size.

# **Q10** What geographical area will the data be drawn from or cover? For example, Mansfield, Ashfield, Newark and Sherwood patients. Derbyshire patients?

All employees. Patient data is not being processed.

# Q11 What is the source of this data?

If the data is being taken from an existing system, identify what system that is and for what was the originally purpose that data was collected?

How will this data be accessed?

If it is new data/system that is being collected, describe how this data collection will be done i.e. digital, paper, removeable media?

The data items are being taken from Active Directory (AD). Microsoft Active Directory is a directory service, which can create groups to simplify the administration of user accounts or computers in different Active Directory domains by collating them and assigning ubiquitous access rights. Once part of an Active Directory group, a user can easily access all the resources and directory services common to the group without making multiple requests.

The data is captured when the SnapComms Client is installed onto the device and logged into by the individual. This will be updated when a new device is issued, and a new client is installed.

Q12	Q12 How will this data be used?		
	Will this data be used or combined with other data sets, if so what are these other data sets?	No	
	What will this data show you that is relevant to the project aim and purpose?	Not applicable	
	Describe the access controls in place. Will the supplier also have access to	SnapComms will be managed by the communications team and may be rolled	



the data?	out to other appropriate teams in the Trust. SnapComms will have access to the data in the portal.
Complete the Account Management and Access Standard Operating Procedure <sup>3</sup>	Account Management.docx
Account Management & Acce	

Q13	Describe proportionality measures		
	Explain how the processing achieves your purpose?	Active Directory represents the most efficient and effective use of configuring this system to the Trust's requirements.	
	Is there another way to achieve the same outcome, give details of alternatives you have rejected and provide the reasons why?	No, current ways of working (email, social media) are not sufficient.	
	Please explain why a smaller amount of data cannot be used.	Not applicable	
	Does the National Data Opt-Out apply (allows patients to opt out of their confidential patient information	Yes	No
	being used for research and planning)?		

What is the duration of this processing? Is this one-off processing or will it continue for a specified period?
1 year, option to renew

Q15	How long will the data be kept and he	How long will the data be kept and how will it be deleted?	
	NHS data needs to be retained in	1 year. Upon termination of the contract	

 $<sup>^3\ \</sup>underline{\text{https://www.sfh-tr.nhs.uk/about-us/policies-and-procedures/non-clinical-policies-procedures/information-governance/?id=13618}$ 



accordance with the Records the Trust will instruct SnapComms to Management Code of Practice<sup>4</sup>. You destroy all confidential information. can check the schedule here<sup>5</sup>. Has provision been made to ensure you are able to accommodate this? If No, describe how the data will be managed. If a third party is processing data, how Contract in place between SnapComms will we ensure data is deleted when and the Trust required? Appropriate evidence would be an embedded copy of the contract or agreement containing this detail What will happen to the data at the SnapComms will be disconnected from end of the project/activity or end of Trust systems, with no personal data being contract with a third party? Will it be transferred to external supplier at any point. returned or deleted and how will this be done? Most contracts specify NHIS to support with project management what happens to data at the end of of the decommissioning of this project, if contract. If this is not subject to and when decision is taken to contract, how will you ensure the data decommission. held by any third party is deleted? Embed extract of contract as necessary with highlighted sections.

#### Q16 Have the personal/special categories of data been minimised?

Please explain why a smaller amount of data cannot be used and explain why all the data fields are necessary to achieve the objective. You are required to minimise the amount and level detail of any data set. For example, dates of birth should not be used where age would provide sufficient information to achieve the project aim.

The data is captured to be able to identify and target the correct active individual, based on Active directory groups. This is the basis of how the communication can be sent to a specific individual or group of users.

Without this sync the approach to identify who will receive the communication would be time consuming and add additional tasks to the onboarding and off-boarding process within the Trust.

<sup>&</sup>lt;sup>4</sup> https://www.sfh-tr.nhs.uk/about-us/policies-and-procedures/non-clinical-policies-procedures/information-governance/?id=8647

<sup>&</sup>lt;sup>5</sup> <u>https://transform.england.nhs.uk/information-governance/guidance/records-management-code/records-management-code-of-practice-2021/#appendix-ii-retention-schedule</u>



How will you prevent function creep?	SnapComms and the Trust have a contract in place. Data processing responsibilities have been included in the contract.
How will you ensure high standards of data quality?	The SnapComms App will refresh the Active Directory information from Windows every 6 hours by default. The refresh will occur whenever the age of the cached directory information is at least 6 hours old. The refresh duration can be customized inside the Content Manager. Refresh will also occur the first time a particular user logs onto a desktop.

Q17	Is the data anonymised or pseudonymised in any way?	Anonymised	Pseudonymised
	If the data is pseudonymised please describe how this has been done and the technical controls in place ie pseudonymised data provided to a third party and the 'key' for reidentification to be retained by the Trust.	Not applicable	
	If the data is pseudonymised describe how the data will be transferred ie using HL7. ie Data will be sent using HL7. SSL (Security Socket Layer) and HTTPS (Hypertext Transfer Protocol over Secure Socket Layer) are used in the encrypted transmission of data.	Not applicable	
	Have you considered whether using anonymised/pseudonymised data is a suitable alternative, please explain how this has been considered and why it is not suitable?	Identifiable data is req would be unable to ale	·
	What steps have been taken to minimise the risk of re-identification of anonymised or pseudonymised data?	Not applicable.	



## **Step 3 – Data security**

Q18	Where will	the data be	be stored?		
	Will the data	a be stored o	n our servers or servers/cloud extern	nal to the Trust?	
	Internal	External	Server	Cloud*	
				$\boxtimes$	
	If external, where the UK, EU/elsewhere? the location/London, Eng	vill this be EEA or Provide country ie	The Trust's data will be processed within the UK	in Azure Databases	
	If the data is outside of the what safegue in place?	e EU/EEA,	Not applicable.		
	If a supplier they must co supplier ass framework b	omplete the urance	Copy of NHIS - Supplier Assurance Fr		
Supplier Assurance Framework TEMPLATE		15 <sup>th</sup> June 2023 - NHIS have review risk.	ved and assessed as low		
		y another e supplier) roduct/ oplier ie le,	Yes, the Trust's data is processed the UK	in Azure Databases within	
	If the data is the cloud the assessment completed by supplier	e following must be by the	Cloud Assessment (Snapcomms).xlsx  15 <sup>th</sup> June 2023 – this has been ide	ntified as Class I, low risk.	



If the data storage or processing is being done by a supplier, what certifications do they hold?

When were they, and the proposed storage mechanism, subjected to an external penetration test and is a report available? (Please embed any documentary evidence)

	Certificate	Externation Penetration Test undertak (date)	ion ken	External Penetration Test Report
Cyber Essentials +/ Cyber Assessment Framework (CAF)				
ISO 15489 Records Management				
ISO 27001 Information Security Standards	SnapComms	4 <sup>th</sup> July 20	022	Secure
	(Everbridge) ISO 270			Documentation.pdf
ISO/IEC 27701:2019 Ext to 27001/27002				
ISO 27017 Cloud Services				
ISO 27018 PII in public clouds				
Digital Technology Assessment Criteria for Health and Social Care (DTAC)				
ISO 9001 Quality Management Systems				
Other, please specify	SOC 2 Type II	31 <sup>st</sup> Mar 2023	ch	
If a supplier is used are	Yes			No
they registered with the ICO. Check the register <sup>6</sup> and provide				Х
the certificate number			nisations that do not decide ed are exempt. SnapComms	

<sup>&</sup>lt;sup>6</sup> https://ico.org.uk/ESDWebPages/Search



		is a data processor and do not have to register with the ICO.		
	If a supplier is used, have they completed	Yes	No	N/A
	the Data Security and Protection Toolkit, search the register here <sup>7</sup>			
	If yes, complete the following	Organisation code	Status	Date Published
		YGM1C	Standards Met	28 <sup>th</sup> June 2021

Q19	How will this data he see	How will this data be secured during storage and when being moved?		
QIJ	Tiow will this data be se	burea during storage and when being moved:		
	Will it be encrypted when stored and/or moved, if so what type of encryption will be employed?	The data at rest is encrypted using Transparent Data Encryption (TDE) within Microsoft Azure datacenters.  This encrypts the storage of an entire database by using a symmetric database encryption key (RSA 2048-bit).  SnapComms uses HTTPS/TLS 1.2 for secure communication over the internet.		
	Will it be on a server protected by firewall and network intrusion detection?	Yes, Microsoft Defender for Cloud to detect any unauthorised access to the system. This is Microsoft's cloud security posture management (CSPM) and cloud workload protection solution (antivirus/malware).		
	What technical controls are in place to prevent hacking of the data by unauthorised persons?	SnapComms employees have strict role based access controls using privileged accounts, including quarterly access reviews and multi-factor authentication (MFA).		
	When being moved will it be secured through encrypted file transfer, secure transmission through SLL/TLS/SHS, please explain the specific technical standards that will apply?	SnapComms' uses HTTPS/TLS 1.2 for secure communication over the internet.  https://www.ssllabs.com/ssltest/analyze.html?d=svc.snapcomms.com		

<sup>&</sup>lt;sup>7</sup> https://www.dsptoolkit.nhs.uk/OrganisationSearch



Do you have a business continuity plan for the information?	Yes, SnapComms have a Business Continuity Management Manual Policy. The Trust's communications team have a business continuity plan and is reviewed regularly.		
What types of backups are undertaken i.e. full,	Full	Differential	Incremental
differential or incremental?			

Q20	Who will have access to this data and how will this access be controlled?		
	Will the data be kept on a system that is password controlled, what is the password length and how often does it have to be changed? Who will administer these access controls?	SnapComms user pass of 8 complex characters use of multi-factor auth changed every 180 day	s and, due to enforced entication (MFA),
	Is there an ability to audit access to the information? Can the supplier audit our data?	Yes, all access to the T for auditing purposes.	rust's data is logged
	What other security measures are in place, such as physical security, smartcard, Active Directory, multiple factor authentication?	The Trust's data is pprocessed in Microsoft Azure datacenters. Microsoft manages physical security.	
		Logical access is control Directory usernames/pafactor authentication (Naccess is assigned using controls.	assword and multi- IFA). All network
	Is training available to employees for	Yes No	
	the new system?		

Q21	If you are using devices such as laptops to access data, how are these secured and managed?
	SnapComms will only be used on Trust issued devices. Laptops are locked down with domain level security controls. Controls include disk encryption, remote wipe and malware protection. Encrypted VPN connections, authentication via username/password and multi-factor authentication (MFA). Session time out defaults to 15 minutes. Note that SnapComms do not have access to the Trust's data, except for a select few for-support purposes while helping your team with troubleshooting.

Q22 Is this data an attractive target for criminals and hackers; does it contain



information that may be used for identity/financial fraud of possibly being vulnerable to exploitation?	or reveal a person
Yes	No
$\boxtimes$	
Rate its attractiveness from 0 to 10 below. <a href="https://nationalcrimeagency.gov.uk/what-we-do/crime-threats/cyber-crime">https://nationalcrimeagency.gov.uk/what-we-do/crime-threats/cyber-crime</a>	
8	
The following security has been reviewed and put in place to ensure that the application is locked as soon as possible:	
<ul> <li>The application has been processed through the cyber security checks, in which it has passed.</li> <li>Access to the content centre is managed internally and</li> </ul>	
<ul> <li>will only be created by the communications team.</li> <li>Access from the supplier SnapComms to the content centre is restricted and will only be used when technical support is required.</li> </ul>	
If a cyber-attack were successful, the communications team would revert to other communication tools to ensure business continuity and the 3 <sup>rd</sup> party supplier SnapComms that hosts the system would be contacted.	
If this is a risk describe how you will manage it in stage 8.	



#### Step 4 – Data use and sharing

#### Q23 Will this data be shared with anyone else?

If yes, explain who these other parties are and why the data is being shared?

SnapComms sub-processor are published at: <a href="https://www.snapcomms.com/dpa#annex4">https://www.snapcomms.com/dpa#annex4</a>

#### Q24 Are other people processing this data?

If a third party such as a company is storing or otherwise managing or using our data, please explain what they doing and why they are doing it?

#### **Microsoft Azure - Hosting Infrastructure**

One Microsoft Way, Redmond, WA 98052, USA Microsoft Azure is an ever-expanding set of cloud services (laaS & PaaS) used by SnapComms to deliver its SaaS offering. <a href="https://azure.microsoft.com/en-us/global-infrastructure/geographies/">https://azure.microsoft.com/en-us/global-infrastructure/geographies/</a>

Start Date: 2017, Registration number: UEN201906581Z

#### **Stack Path- Content Delivery**

2021 McKinney Ave. Suite 1100, Dallas, TX 75201, USA

StackPath is a secure Content Delivery Network service used by SnapComms to improve content delivery performance.

https://www.stackpath.com/whystackpath/network/

Start Date: 2019, Registration number: USTX0801564505

#### **Pendo- Analytics Provider**

301 Hillsborough St Ste 1900, Raleigh, NC 27601, USA

Pendo.io, Inc. ("Pendo") is a third-party analytics provider that SnapComms uses to capture how users interact with the Service. SnapComms uses this information to analyze and improve the services.

https://www.pendo.io/data-privacy-security/ Registration number: 46-3519724

#### Twilio, Inc.- Email

375 Beale Street, Suite 300, San Francisco, California 94105, USA SendGrid, Inc. ("SendGrid") is an email delivery

service provider used within the SnapComms



	application to send notification and password reset email messages.  https://sendgrid.com/files/SendGrid-FAQ.pdf Start Date: Dec 2017, Registration number: USDE4518652  Elasticsearch - Search Engine 800 W El Camino Real, Suite 350, Mountain View, CA 94040, USA Elasticsearch is a full-text search and analytics engine that SnapComms uses to store, search, and analyze log data quickly and in near real time. https://www.elastic.co/guide/en/cloud/current/ec-reference-regions.html Start Date: 2020, Registration number: USTX0801802463
If we are using a third-party product that requires maintenance where they access our networks, explain how this will be managed (will they remotely connect, how will this access be managed).	Third-party suppliers do not require access to SnapComms or the Trust's networks. SnapComms send the minimum data via Secured API.
Is there a process in place to remove personal data if data subject refuses/removes consent? ie The right to restrict processing/the right to object - People can request the use of their data to be restricted in certain circumstances. These will be considered on a case-by-case basis.	Yes, there is a process in place in the Trust and SnapComms.
Are arrangements in place for recognising and responding to requests for access to personal data?	The Trust has a policy and procedure for responding to subject access requests. Further information for employees on how to access their records is here: <a href="https://www.sfh-tr.nhs.uk/work-for-us/your-employees-information/">https://www.sfh-tr.nhs.uk/work-for-us/your-employees-information/</a> .

C	225	Describe the data flows	
		Please complete the data flow template below to detail how the data is collected, moved and used?	Data flows to be completed as part of the annual data flow mapping exercise undertaken by the communications team.



New Flow Map UPDATED.xlsm	
Are there security or data protection concerns in any of the data flow stages you identify? If so, please indicate where and what steps you are taking to reduce these risk?	Data flows to be completed as part of the annual data flow mapping exercise undertaken by the communications team. A review will be undertaken by Information Governance following the completion of the exercise.

## **Step 5 – Processing by or with a supplier/third party**

Q26	26 If you are using a supplier or organisation to process, store or otherwise interact with this data, if not answer N/A									
	What is the arrangement between the Trust and the supplier/third party concerned?	All master agreements with sub-processors obligate the sub-processor to process the data solely for the purposes stated in such master, including any data protection addendums thereto.								
		snapcomms-uk-eme a-hyperlink-master-s								
	What activities will the supplier/third party conduct i.e. storage, transport, processing of data on their platform	SnapComms will host the data in a secure cloud environment.								
Q27	What steps or measures will you put in place to manage these risks? What measures will you take to ensure processors comply? PLEASE ATTACH COPIES/ RELEVANT	Technical and administrative data privacy controls are in place via our Third-Party Service Provider Qualification policy and contractual agreements.								
	SECTIONS OF ANY CONTRACT/ AGREEMENT.	SnapComms' conducts an annual review of all critical sub-processors, aligned with our "Third-Party Service Provider Qualification Policy"								
		Contract agreements with our sub- processors are internal document only and cannot be shared.								



## **Step 6 – Consultation**

Q28	Consider how to consult with those who have an interest in this project								
	Describe when and how you will seek individuals' views or justify why it is not appropriate to do so. i.e. do we need wider public engagement.	The DPIA was reviewed at the Information Governance Working Group for wider stakeholder engagement.							
	Who else do you need to involve within the Trust? i.e. Digital Innovations Approval Group (DIAG).	NHIS, Communications and Operation teams leading the project							
		Digital Innovations Approval Group (DIAG) already appraised and have approved the project to continue, subject to clinical oversight for its usage (now approved).							
		All Trust communications to be sent, forewarning users of the pop-ups appearing ahead of planning Trust-wide go-live date of week commencing 26th June 2023.							
	Do you need to ask the data processors (supplier) to assist?	No							
	Do you plan to consult information security experts, or any other experts?	No							



### Step 7 – Lawful basis

Q29								
	a) the data subject has given consent to the processing of his or her personal data for one or more specific purposes. Please note, do not use this if it is for direct care, (e) maybe more appropriate							
	b) processing is necessary for the performance of a contract to which the data subject is party or in order to take steps at the request of the data subject prior to entering into a contract							
	c) processing is necessary for compliance with a legal obligation to which the controller is subject							
	d) processing is necessary in order to protect the vital interests of the data subject or of another natural person							
	e) processing is necessary for the performance of a task conducted in the public interest or in the exercise of official authority vested in the controller							
Q30	What is your lawful basis for processing special categories of person Select all that apply	nal data?						
	a) the data subject has given explicit consent to the processing of those personal data for one or more specified purposes. Please note, do not use this if it is for direct care, (h) and/or (i) maybe more appropriate							
	b) processing is necessary for the purposes of carrying out the obligations and exercising specific rights of the controller or of the data subject in the field of employment							
	c) processing is necessary to protect the vital interests of the data subject or of another natural person where the data subject is physically or legally incapable of giving consent							
	e) processing relates to personal data which are manifestly made public by the data subject							
	h) processing is necessary for the purposes of preventive or occupational medicine, for the assessment of the working capacity of the employee, medical diagnosis, the provision of health or social care or treatment or the management of health or social care systems and services							
	i) processing is necessary for reasons of substantial public interest, i.e.							



public health, such as protecting against serious cross-border threats to health	
j) processing is necessary for archiving purposes in the public interest, scientific or historical research purposes or statistical purpose	



#### **Stage 8 – Risk Template**

For advice on completing this Risk Template please contact the Risk & Assurance Manager

Completed by: Gina Robinson	Role: Information Security Officer	Date completed: 12th June 2023

#### **Guidance notes:**

**Confidentiality -** Are there any risks to the confidentiality of personal data? Do employees have a legitimate relationship in order to process personal data? Is personal data disclosed to people who do not require it?

**Integrity** - Systems must be designed so that the input and management of information is not prone to human error and that the flow of information does not result in loss or alteration. Data should be complete and accurate and not tampered with during or after submission. Ensuring that during the process of transmission data integrity is maintained.

**Availability** - System design must include appropriate access controls and checks, so that the information in the system has consistency, accuracy, can be trusted as correct and can be relied on when providing healthcare. Data is available and delivered to the right person, at the time when it is needed and that there is accessibility to systems at all times. Having safeguards in place for power outages, natural disasters, hardware failures and systems upgrades.

Examples of risks that are common in projects is included below. Please amend/delete, as necessary.

Risk description What event could		Cur	rent		Gaps in control	Acc e ri	epta sk	ıbl	Mitigating
happen which would impact on the activity? What would cause it to happen? What would the consequence be?	Primary controls What is in place now to prevent the risk from occurring or to act as a contingency if it does occur?	Consequence	Likelihood	<b>o</b> )	If the risk is not controlled to an acceptable level, what are the issues that need to be addressed?	Consequence	Likelihood	(C ×	actions required What needs to be done to reduce the risk to an acceptable level?



Risk description What event could		Cur	rent		Gaps in control	Acc e ri	cepta sk	abl	Mitigating
happen which would impact on the activity? What would cause it to happen? What would the consequence be?	Primary controls What is in place now to prevent the risk from occurring or to act as a contingency if it does occur?	Consequence	Likelihood	Rating (C x L)	If the risk is not controlled to an acceptable level, what	Consequence	Likelihood	Rating (C x L)	actions required What needs to be done to reduce the risk to an acceptable level?
Loss of system access due to connection failure or server failure either via NHIS or 3rd party supplier.  This could result in the service being disrupted or unavailable.  The consequences of this could be enforcement action and reputational damage to the Trust	Full system back-up processes and ISO 27001 accreditation in place  Business continuity plan in place  Regular updates from supplier to advise users of any planned updates and a process is in place to contact all main users for support during any unplanned downtime	1	2	2		1	2	2	
Loss of system data due to connection failure or server failure by third party supplier.	Full system back-up processes and ISO 27001, accreditations in place  Business continuity plan in place	1	2	2		1	2	2	



Risk description What event could		Cur	rent		Gaps in control	Acc e ri	cepta sk	abl	Mitigating
happen which would impact on the activity? What would cause it to happen? What would the consequence be?	Primary controls What is in place now to prevent the risk from occurring or to act as a contingency if it does occur?	Consequence	Likelihood	Rating (C x L)	If the risk is not controlled to an acceptable level, what are the issues that need to be addressed?	Consequence	Likelihood	Rating (C x L)	actions required What needs to be done to reduce the risk to an acceptable level?
This could result in the service being disrupted or unavailable.									
The consequences of this could be enforcement action and reputational damage to the Trust.									
If the system is not recorded on the information asset register, the system may not be brought back online in response to a cyber attack	In the Trust we have a business continuity plan if the service was unavailable. The department would default back to the current practice and contact employees via all user emails, social media, updating the website/intranet	2	2	4		2	1	2	SnapComms will need to be added to the divisional information asset register and the data flows mapped and recorded as part of the annual IAO returns to the SIRO



Risk description What event could		Cur	rent		Gaps in control	Acc e ri	cepta sk	abl	Mitigating
happen which would impact on the activity? What would cause it to happen? What would the consequence be?	Primary controls What is in place now to prevent the risk from occurring or to act as a contingency if it does occur?	Consequence	Likelihood	Rating (C x L)	If the risk is not controlled to an acceptable level, what are the issues that need	Consequence	Likelihood	Rating (C x L)	actions required What needs to be done to reduce the risk to an acceptable level?
Data is accessed inappropriately due to lack of access controls. Movers and leavers access not removed. Data is inappropriately processed and/or disclosed	Username and password controls in place. Access is managed within the communications team. Account Management and access procedure to be audited on a regular basis. Appropriate access according to role. IG Training in place	2	2	4		2	2	4	





## Step 8 – Legal compliance

To be amended by Information Governance from the responses provided in the previous stages.

UK General Data Protection Regulation 2018	Compliance
Principle 1 – Personal data shall be processed fairly and lawfully and, in a transparent manner	<ul> <li>We have identified an appropriate lawful basis (or bases) for our processing.</li> <li>We are processing special category data and have identified a condition for processing this type of data.</li> <li>We do not do anything generally unlawful with personal data.</li> <li>Fairness</li> <li>We have considered how the processing may affect the individuals concerned and can justify any adverse impact.</li> <li>We only handle people's data in ways they would reasonably expect, or we can explain why any unexpected processing is justified.</li> <li>We do not deceive or mislead people when we collect their personal data.</li> <li>Transparency</li> </ul>
	<ul> <li>We are open and honest and comply with the transparency obligations of the right to be informed.</li> </ul>
Principle 2 – Personal data shall be collected for specified, explicit and legitimate purposes and not further processed in a manner that is incompatible with those purposes	<ul> <li>We have clearly identified our purpose or purposes for processing.</li> <li>We have documented those purposes.</li> <li>We include details of our purposes in our privacy information for individuals.</li> <li>We regularly review our processing and, where necessary, update our documentation and our privacy information for individuals.</li> <li>If we plan to use personal data for a new purpose other than a legal</li> </ul>



Principle 3 – Personal data shall be adequate, relevant and limited to what is necessary in relation to the purposes for which they are processed	<ul> <li>obligation or function set out in law, we check that this is compatible with our original purpose, or we get specific consent for the new purpose.</li> <li>We only collect personal data we actually need for our specified purposes.</li> <li>We have sufficient personal data to properly fulfil those purposes.</li> <li>We periodically review the data we hold and delete anything we do not need.</li> </ul>
Principle 4 – Personal data shall be Accurate and, where necessary, kept up to date, having regard to the purposes for which they are processed, are erased or rectified without delay	<ul> <li>We ensure the accuracy of any personal data we create.</li> <li>We have appropriate processes in place to check the accuracy of the data we collect, and we record the source of that data.</li> <li>We have a process in place to identify when we need to keep the data updated to properly fulfil our purpose, and we update it, as necessary.</li> <li>If we need to keep a record of a mistake, we clearly identify it as a mistake.</li> <li>Our records clearly identify any matters of opinion, and where appropriate whose opinion it is and any relevant changes to the underlying facts.</li> <li>We comply with the individual's right to rectification and carefully consider any challenges to the accuracy of the personal data.</li> <li>As a matter of good practice, we keep a note of any challenges to the accuracy of the personal data</li> </ul>
Principle 5 – Kept no longer than is necessary.	<ul> <li>We know what personal data we hold and why we need it.</li> <li>We carefully consider and can justify how long we keep personal data.</li> <li>We have a policy with standard retention periods.</li> <li>We clearly identify any personal data that we need to keep for public interest archiving, scientific or historical research, or statistical purposes.</li> </ul>
Principle 6 – Appropriate security, including protection against unauthorised or unlawful processing and against accidental	We undertake an analysis of the risks presented by our processing and use this to assess the appropriate level of security we need to put in place.



loss, destruction or damage.	<ul> <li>When deciding what measures to implement, we take account of the state of the art and costs of implementation.</li> <li>We have an information security policy and take steps to make sure the policy is implemented.</li> <li>When deciding what measures to implement, we take account of the state of the art and costs of implementation.</li> <li>We make sure that we regularly review our information security policies and measures and, where necessary, improve them.</li> <li>We have assessed what we need to do by considering the security outcomes we want to achieve.</li> <li>We have put in place technical controls such as those specified by established frameworks like Cyber Essentials.</li> <li>We understand that we may also need to put other technical measures in place depending on our circumstances and the type of personal data we process.</li> <li>We use encryption and/or pseudonymisation where it is appropriate to do so.</li> <li>We understand the requirements of confidentiality, integrity and availability for the personal data we process.</li> <li>We make sure that we can restore access to personal data in the event of any incidents, such as by establishing an appropriate backup process.</li> <li>We conduct regular testing and reviews of our measures to ensure they remain effective, and act on the results of those tests where they highlight areas for improvement.</li> <li>Where appropriate, we implement measures that adhere to an approved code of conduct or certification mechanism.</li> <li>We ensure that any data processor we use also implements appropriate technical and organisational measures.</li> </ul>
Principle 7 – Accountability principle	<ul> <li>We take responsibility for complying with the UK GDPR, at the highest management level and throughout our organisation.</li> <li>We keep evidence of the steps we take to comply with the UK GDPR.</li> </ul>
	We put in place appropriate technical and organisational measures,



such as:
☐ adopting and implementing data protection policies (where
proportionate);
☐ taking a 'data protection by design and default' approach - putting
appropriate data protection measures in place throughout the entire lifecycle of our processing operations;
□ putting written contracts in place with organisations that process personal data on our behalf;
☐ maintaining documentation of our processing activities;
☐ implementing appropriate security measures;
☐ recording and, where necessary, reporting personal data breaches;
☐ carrying out data protection impact assessments for uses of personal data that are likely to result in high risk to individuals' interests;
□ appointed a data protection officer; and
☐ adhering to relevant codes of conduct and signing up to certification
schemes (where possible).
☐ We review and update our accountability measures at appropriate
intervals.



## **Step 9 - Assessment Summary**

To be completed by Information Governance.

Outcome of Data Protection Impact Assessment	
Project is not recommended to proceed, as significant risks have been identified.	
Project to proceed once identified risks have been mitigated as agreed.	х
Project has met required legislative compliance and poses no significant risks. No further action required.	

Summary of Data Protection Impact Assessment; including legislative compliance and identified risks		
Legislative Compliance:	Suggested text, remove, amend, as necessary.	
	Article 6(1)(e) processing is necessary for the performance of a task carried out in the public interest or in the exercise of official authority vested in the controller.	
	Article 9(2)(h) allows processing for the provision of healthcare (direct care) or the management of healthcare systems (invoice validation, commissioner reporting, quality audits – essentially, mandated activity)	
	Article 9(2)(i) allows processing for "ensuring high standards of quality and safety of health care." – which would cover research, audit, service improvement and addressing public health/inequalities	
Summary of Risks	Suggested text, remove, amend, as necessary.	
	Cyber security, loss of data, inappropriate access to data, inability to access data and Information Asset Management.	
Identified risks		
The risk	Mitigation	
Loss of system access	Full system back-up process in place	



Loss of system data	Full system back-up process in place
Data is accessed inappropriately	Individual usernames and passwords are provided



## **Step 10 - Recommendations for Action**

Summary of recommendations (amend/delete as necessary)			
Recommendations	Recommendations	Agreed deadline for action	
Information Asset Administrators to ensure SnapComms is added to the information asset register and data flows are mapped and recorded	IAO/IAA	30 <sup>th</sup> June 2023	
Ensure business continuity plans are in place	IAO/IAA	30th June 2023	
Account management Standard Operating Procedure generated and implemented, routine audit to take place	IAO/IAA	30 <sup>th</sup> September 2023	



### Step 11 - Project signoff

	Name	Job Title	Date
Information Asset Owner*	Richard Brown	Head of Communications	20 <sup>th</sup> June 2023
Data Protection Officer	Jacquie Widdowson	Information Governance Manager	19 <sup>th</sup> June 2023
Senior Information Risk Owner	Sally Brook Shanahan	Director of Corporate Affairs	27 <sup>th</sup> June 2023
Caldicott Guardian	Dr David Selwyn	Medical Director	23 <sup>rd</sup> June 2023
Chief Digital Information Officer	Richard Walker	Chief Digital Information Officer	June 2023
Patient safety <sup>8</sup>	Not applicable		

The Data Protection Impact Assessment must be reviewed and approved by the Information Asset Owner, Data Protection Officer, Senior Information Risk Owner and Caldicott Guardian. Approval does not close the data protection risks related to this project.

\*It is important that the risks and the original scope of the project are reviewed on a regular basis to ensure any new confidentiality, integrity or availability risks are identified, documented, and mitigated wherever possible. All amendments must be approved following the approvals process.

<sup>&</sup>lt;sup>8</sup> DCB0129: Clinical Risk Management: its Application in the Manufacture of Health IT Systems - NHS Digital