London Ambulance Service NHS
NHS Trust

Policy for the Acceptable Use of IT and Communications Systems

DOCUMENT PROFILE and CONTROL.

Purpose of the document: This policy relates to the use and monitoring of LAS IT and communications systems, including telephones, mobile telephones, facsimile machines, computers (including laptops and personal organisers), email, the internet, the intranet and extranet.

Sponsor Department: IM&T Information Security

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Links to Related documents or references providing additional information		
Ref. No.	Title	Version
	Information Security Technology Techniques – Information Security Management System Requirements 27001: 20052013– British Standards Organisation	
	Regulation of Investigatory Powers Act, 2000 http://www.opsi.gov.uk/Acts/acts2000/ukpga_20000023_en_2 Computer Misuse Act, 1990	
	Data Protection Act 2018	
	GDPR	
	Freedom of Information Act 2000	
TP/012	Data Protection Policy	
TP/022	Freedom of Information Policy	

Document Status: This is a controlled record as are the document(s) to which it relates. Whilst all or any part of it may be printed, the electronic version maintained in P&P-File remains the controlled master copy. Any printed copies are not controlled nor substantive.

1 Introduction

This Policy supports the Information Security Policy (TP/048) and relates to the appropriate usage, and monitoring of, the London Ambulance Service NHS Trust (LAS) IT and Communications systems, including telephones, mobile telephones, facsimile machines, computer devices (including workstations, laptops, tablets, iPads, and personal organisers), email, the Internet, the LAS intranet and extranet services.

The Trust provides the IT and communication systems for business purposes and the use of these systems at all times is subject to this Policy. All information stored, processed or forwarded on them may be monitored for security and assurance purposes.

Effective security is a team effort involving the participation and support of every LAS employee and authorised users who deals with information and/or information systems.

It is the responsibility of every user to read and understand these requirements, and to conduct their activities accordingly.

2 Scope

This Policy applies to all LAS employees, contractors and partners who use the Trust's IT and communication systems.

3 Objectives

This Policy is to ensure that all staff are aware of their responsibility to use Trust IT and communication systems and to raise awareness to staff that security of Trust resources and information is everyone's responsibility.

4 Responsibilities

SIRO

The Senior Information Risk Owner (SIRO) is accountable to the Trust Board for Information Security and responsible for reporting Information Security risks to the Risk Compliance and Assurance Group.

Caldicott Guardian

Responsible for protecting the confidentiality of patient and service-user information and this policy supports the Caldicott function.

Data Protection Officer

Responsible for LAS obligation under Data Protection legislation, ensuring the confidentiality and management of personal and sensitive data.

Information Governance Manager

Responsible for maintaining records and applying information management through liaison with other LAS functions to deliver effective Information Security.

Information Security Manager

Responsible for maintaining and reviewing information processing systems against information security controls and maintaining Information Security Management System (ISMS) pertaining to technical policies, standards and guidelines.

Information Governance Group (IGG)

Chaired by the SIRO and Director of Corporate Governance this Group will monitor the implementation of this policy.

Information Asset Owners (IAO)

Information asset owners are the custodians of identified business information. Their role is to understand what information is held, what is added and what is removed, how personal information is moved, and who has access and why. IAO are required to understand and address risks to the information, and ensure that information is fully used within the relevant laws, and provide written input to the SIRO on the security and use of the assets they are responsible for.

Line Managers

Responsible for ensuring staff work in line with the Information Security Policy and other published security policies and controls.

Line managers are responsible for notifying Human Resources when staff join, move or leave their teams and also for collecting any security badges, smart cards, laptops, mobile devices or any other equipment that were previously handed to their staff.

All staff and third parties

Responsible for ensuring information security is appropriately considered and that the Information Security Policy and these key controls are adhered to.

5 Definitions

For the purposes of this policy the following definitions apply:

Confidential	Material containing person identifiable information or marked “confidential”. For example; patient notes, staff records, referrals, etc
Data	Information which is: being processed by means of equipment operating automatically in response to instructions given for that purpose

	recorded with the intention that it should be processed by means of such equipment recorded as part of a relevant filing system or with the intention that it should form part of a relevant filing system.
Data subject	An individual who is the subject of personal data.
Identifiable Natural Person	An identifiable natural person is one who can be identified, directly or indirectly, in particular by reference to an identifier such as a name, an identification number, location data, an online identifier or to one or more factors specific to the physical, physiological, genetic, mental, economic, cultural or social identity of that natural person.
Information Commissioner	A person appointed by Government to administer the provisions of Data Protection legislation and Freedom of Information Act.
Password	Confidential authentication information composed of a string of characters
Patient information / Personal information / Personal data	see “person identifiable information”
Person identifiable information	Data which relate to a living individual who can be identified: from that data and other information in the possession of, or likely to come in the possession of, the Data Controller and includes any expression of opinion about the individual and any indication of the intentions of the Data Controller or any other person in respect of the individual. GDPR includes a wide range of personal identifiers to constitute personal data, including name, identification number, location data or online identifier, reflecting changes in technology and the way organisations collect information about people.

Data Controller	A controller determines the purposes and means of processing personal data.
Data Processor	A processor is responsible for processing personal data on behalf of a controller.
Processing (in relation to data)	Obtaining, recording or holding the information or data or carrying out any operation or set of operations on the information or data, including: organisation, adaptation or alteration of the information or data retrieval, consultation or use of the information or data disclosure of the information or data by transmission, dissemination or otherwise making available alignment, combination, blocking, erasure or destruction of the information or data
User	Any individual employees, contractors and agents ("staff") who use the Trust's IT and communication systems.
Blogging	The act of posting information on a type of website, usually maintained by an individual with regular entries of commentary, descriptions of events, or other material such as graphics or video. Entries are commonly displayed in reverse chronological order as a form of diary.

6 Acceptable Use of IT and Communications Systems

LAS staff and contractors are responsible for exercising good judgment regarding the reasonableness of their actions in using IT systems. Good judgement would include avoiding any actions that may be considered offensive, obscene, illegal or likely to do damage to the Trust's reputation.

If in doubt about the acceptability of an action, a staff member must refer to their line manager for guidance.

7 Unacceptable Use

Breach of this policy in regards to the use of the Trust's IT and communication systems will be considered a serious disciplinary matter and will be dealt with in line with the Trust's disciplinary process. Examples of offences which may

be considered to be misconduct or gross misconduct include: (This list is not exhaustive)

7.1 The unauthorised removal, copying or distribution of any and all data especially sensitive LAS information, including patient records, financial data or other corporate sensitive reports;

7.2 The deliberate introduction of a virus or malicious software (malware) to a Trust computer;

7.3 Installing or attempting to install unauthorised software;

7.4 Misuse of the computer system which results in any claim being made against the Trust;

7.5 The connection of an unauthorised device to the LAS network (i.e. connecting a non-Trust device such a privately owned laptop, wireless access point or a switch/router to the LAS network. (This does not include connection to the Guest Wireless Network, which is a separate network);

7.6 Use of the LAS IT systems for the creation or distribution of material as part of a criminal activity;

7.7 Excessive visiting of non-job-related internet sites during the agreed working hours;

7.8 Accessing pornography, gambling, hatred sites or any illegal material on the internet and/or circulating it;

7.9 Sending abusive e-mails or other communication;

7.10 Unauthorised copying or modifying of copyright material;

7.11 The unauthorised copying and/or removal of LAS source code, software or data files.

8 Personal Use and Ownership

While LAS wishes to provide a reasonable level of personal privacy, users must be aware that the data they create on LAS ICT systems remains LAS property. Due to the need to protect LAS information resources, the LAS cannot guarantee the privacy of personal information on any device used for LAS business.

For security and network maintenance purposes, designated authorised individuals, within the LAS, may monitor equipment, systems and network traffic at any time.

Privately owned equipment, such as laptops, tablets, iPads, PDA's, mobile phones or music players may never be attached directly to LAS ICT

equipment or network ports. Remote access to certain LAS applications (i.e. Global Rostering System (GRS), Online Web Outlook (OWA) is permitted via privately owned devices. The LAS reserves the right to inspect any device brought within its premises or connected to its networks for monitoring, auditing and security purposes

9 Passwords

Passwords play a significant role in maintaining security of LAS systems. Each LAS system will have rules covering the strength of password required, which will include: the minimum password length, how often the password needs to be changed, and the policy for password reuse.

While IM&T will impose these technical controls to enforce some complexity of password choice, the Trust is still dependent on users selecting strong passwords. Users must use passwords that conform to LAS strength requirements.

Staff are responsible for keeping their user account details confidential; this includes usernames and passwords for the network and LAS applications.

Use of generic accounts is not permitted.

Each User must be aware that all activity undertaken using their account will be attributable to them individually.

9.1 Protecting your password

The following rules apply to all users and systems:

- Users must never divulge passwords to anyone. The Service Desk or System Administrators do not need to know users' passwords;
- If a user's password has been divulged in any way it must be changed immediately and an incident raised with the Service Desk;
- lf a user needs to write down a password, it must be secured in an envelope that has been signed and the seals taped. The envelope must be stored in a lockable container that is appropriate for the sensitivity of the system;
- Users must not reuse a password on any other system - each password must be unique;
- When logging on to a system or unlocking the device, users must ensure that they are not being overlooked when typing the password on the keyboard.

10 E-mail

Users are required to comply with the following rules for email usage:

10.1 Email correspondence is not private. Emails can be easily intercepted, copied, forwarded and stored without the original sender's knowledge.

Users must take into account the fact that any email they send may be read by a person other than the intended recipient.

10.2 Email attachments must not be downloaded to a non-LAS computer while accessing the Trust's network remotely through the Webmail service.

10.3 Sensitive or confidential information, especially relating to patients' personal identifiable information must be not be sent externally to any non-London Ambulance email address. However, the HSCIC NHSmail service is appropriate for this type of communication. Alternatively, if you need to send a secure email to a non-NHS third party you can do so via Egress. IM&T service desk is the first point of contact for obtaining NHS.net and Egress accounts.

10.4 Auto-forwarding of the Trust emails to external, non-LAS email accounts is prohibited.

10.5 All messages and files are automatically scanned for viruses before being introduced into the network, but this does not provide a complete guarantee of protection. All employees have an obligation to be cautious when opening emails and attachments to emails from unknown sources. If a user has any doubts about opening an email or attachment, they should contact the IM&T Service Desk.

10.6 Contracts can be entered into by e-mail in the same way as they are by letter or on the telephone. Users must, at all times, take care to ensure that they do not inadvertently enter into contracts which bind the Trust by email, and they should be aware that contracts must only be entered into in accordance with the normal procedures.

10.7 Users must not, under any circumstances, send messages or attachments whether within the Trust or outside the Trust which reasonably could be considered to be:

- Abusive including the use of foul language;
- Malicious;
- Discriminatory in any sense (e.g. in respect of protected characteristics as defined under equalities law);
- Defamatory about any other person or organisation;
- Bullying or intimidating in content;
- Containing sensitive or confidential LAS information without appropriate encryption protection being in place.

10.8 If a user receives any messages they consider inappropriate from outside the Trust, they must not forward them either within or outside of the Trust. If any email causes a user distress, they should seek support

from their manager, who should raise the issue with HR and IM&T Security Team.

10.9 LAS OWA must not be used to transfer files to or from LAS. It should be used only to read or send emails without attachments.

10.10 Staff must not under any circumstances make use of private email services (i.e Hotmail, Google mail) to transfer or exchange patient and staff personal data, confidential, or sensitive data.

11 Internet

Users are required to comply with the following requirements:

11.1 Internet access is supplied for official LAS business. Staff are authorised to access the internet for limited personal business but this should be reasonable and not adversely impact on that member of staff's job. Such access should ordinarily not take place in paid working time.

11.2 The Trust has put technical measures in place to prevent access to Internet web sites which contain explicit, illegal or other inappropriate materials. If, for the purposes of their role, a user needs to access a site which has been blocked because it may which contain such materials, a request for access to the site may be submitted through the IM&T Service Desk.

11.3 Unless expressly authorised to do so, staff are prohibited from sending, transmitting, or otherwise distributing the Trust's information or data to external third parties.

11.4 Production, accessing, downloading, dissemination or storing of non-business related solicitations (e.g. mass emails), destructive code (e.g. viruses), pornographic text or images, fraudulent or defamatory images or text or anything that may be construed as unlawful, harassing or offensive to others is prohibited. This list should not be regarded as exhaustive.

11.5 Users are responsible for complying with copyright law and applicable licenses that may apply to software, files, graphics, documents, messages and other material.

11.6 No software may be downloaded or executed from the internet by staff under any circumstances, unless authorised by the IM&T IT Security team.

11.7 File hosting sites, such as Dropbox, iCloud, Google Drive and FileServe must not be used for transferring or storing LAS data. These sites typically host the information outside the UK and therefore have the potential to result in Data Protection fines.

11.8 Video and audio streaming (e.g. online radio) is prohibited unless authorised by the IM&T IT Security team.

11.9 Users must not introduce unauthorised devices to make connection to external networks. This would include bypassing the Service's network to access the Internet by connecting to external wireless or telephone services.

11.10 Staff and contractors should carefully consider the appropriateness of comments they make via blogging sites, such as Twitter, where such use is permitted. Unauthorised comments on LAS activities is discouraged and instances where the Trust is brought into disrepute may constitute misconduct or gross misconduct and disciplinary action applied.

11.11 Staff should carefully consider the appropriateness of comments they make via social networking websites such as Facebook, My Space and LinkedIn. Unauthorised comments on LAS activities is discouraged and instances where the Trust is brought into disrepute may constitute misconduct or gross misconduct and disciplinary action applied. An LAS Social Networking Policy is in production and should be referred to by all staff.

12 Avoiding the Introduction of Malicious Software ("Malware") through Responsible Usage

Malware is the name given to a variety of malicious programs, such as computer viruses and Trojan horse applications. While it is IM&T's responsibility to ensure anti-virus software is installed and maintained, any user who has any doubt about their anti-virus software, or are unsure if it is working, must contact the Service Desk.

The following represents basic requirements on users to reduce LAS exposure to malware:

12.1 Emails are a common source of malware. If a user receives unsolicited email with attachments, they must not open them, but instead delete them or contact the IM&T Service Desk. Users must not forward the email to anyone, including the Service Desk;

12.2 Emails that contain warnings of viruses circulating on the Internet are a nuisance and almost always inaccurate. Do not forward virus warnings unless authorised;

12.3 Web links in e-mails are a common source of malware/unauthorised programs. Should a user wish to access the site, they must enter the relevant URL into the browser window as opposed to clicking on the link in the email;

12.4 Dialog boxes are used to confirm actions with the user, such as confirming the user wishes to install a program. Users must never blindly accept these and always cancel unexpected dialogue boxes;

12.5 Removable Media - malware can spread from system to system on removable media. Users can help by:

- Following any specified usage guidance for removable media and check it for viruses and other malicious code after inserting it into a PC/Laptop or other ICT device.
- Incident Reporting - if malware has entered LAS systems, the impact can be reduced if the correct authorities know about it early. Users can help, even if they have made a mistake, by letting IM&T know. Incidents can be contained before serious damage is done.
- Report to the Service Desk any unusual or suspicious activity or events such as suspected or actual compromise of LAS information, LAS information assets or LAS ICT infrastructure.

13 Maintaining Confidentiality of LAS Information

13.1 The Trust's IT and communications systems must not be used to make any unauthorised disclosure or copies of confidential information belonging to the Trust. The unauthorised disclosure or copying of information belonging to the Trust is likely to be treated as a disciplinary offence and could give rise to dismissal for gross misconduct.

13.2 The Trust's data must only be transported via LAS-authorised encrypted media.

13.3 Such confidential Information may include, without limitation details of:

- Business contacts, associates, lists of suppliers and details of contacts with them;
- Identities and personal information relating to patients and/or staff;
- Expenditure levels and buying and Trust-specific pricing policies;
- Proposals plans or specifications for the development of existing services and of new services;
- Details of the employees and officers of the Trust and of the remuneration and other benefits paid to them;
- Presentations, tenders, projects, joint ventures, mergers and developments contemplated, offered or undertaken by the Trust;

13.4 Employees are prohibited from revealing any LAS confidential or proprietary information, or any other company or patient-confidential material when engaged in social networking or blogging (as permitted) NHS confidentiality codes of conduct will continue to apply even when LAS staff change jobs or retire from service.

13.5 Notwithstanding the above, the Trust will comply with the Freedom of Information Act, 2000 and the Data Protection Act, 1998 and will deal with any such requests in accordance with this and other legislation.

14 Monitoring and Data Protection

14.1 In order to protect the interests of the Trust and to maintain the effectiveness, integrity and security of the Trust's network, the Trust has tools in place to monitor telephone, email communication and internet use by staff.

14.2 Monitoring is undertaken using the following automatic procedures:

- Checking of emails and attachments for viruses;
- Checking of emails for multimedia attachments and offensive words or images;
- Checking of disks, CDs and internet sites for viruses;
- Scanning for software being downloaded to, installed on, or deleted from the Trust's computers;
- Blocking or recording access to certain files and pages on the internet;
- Recording of telephone and mobile telephone call destination numbers;
- Recording details of unauthorised devices attached to LAS systems;
- Blocking access to premium rate telephone lines.
- Monitoring the network for malware activity via an intrusion detection system

14.3 The manual monitoring of the content of emails, internet use or telephone calls is not routinely carried out but may be carried out for some specific security related situations. For example (this is not an exhaustive list):

- Where the Trust has reasonable grounds to believe a staff member is breaching this or any other Trust policy;
- Where another party may have compromised a user's account to gain access to LAS systems;

- Where there is a suspected breach of contract;
- For the purpose of assisting in the investigation of illegal acts;
- To comply with the Trust's legal obligations, such as compliance with the Regulation of Investigatory Powers Act, 2000;
- For the purpose of defending or prosecuting any legal action brought against the Trust.

14.4 Users should not expect that their personal use of the Trust's IT and communication systems will remain private.

14.5 The holding, processing and disclosure of personal data is regulated by the provisions in Data Protection legislation. Personal information relating to a living individual who can be identified from that information should not be transferred unless proper checks have been made to ensure that this will not involve any breach of legislation.

Users must also comply with the Trust's Data Protection Policy (TP/012).

15 Security Responsibilities of Users

15.1 Employee access to the Trust's IT and communication systems is subject to satisfactory security checks being carried out at the reasonable discretion of the Trust.

15.2 Users provided with a portable computer, smartphone, tablet and/or any related or similar equipment, must ensure its security at all times. In particular, they must:

- Never leave computer equipment including discs, CDs and DVDs in an unattended vehicle, or unattended in public;
- Keep passwords confidential. The Trust IT systems have policies and arrangements in place that will force users to change them regularly;
- In order to prevent unauthorised users, lock the terminal if leaving a device unattended so that it cannot be used without entering a valid log-on ID.

15.3 If a LAS device is lost or stolen there is a serious risk of data loss. Any such incident must be reported at the first opportunity to the police, the IM&T Service Desk and the responsible user's line manager.

15.4 Users must not attempt to gain access to any part of the network to which they are not permitted access.

15.4.1 Users must take care when transferring data on USB memory devices. Other files may have been inadvertently been left on the disk.

Encrypted USB sticks, issued by IM&T must be used to transfer identifiable, confidential or sensitive data.

Staff are responsible for keeping their user account details confidential; this includes usernames and passwords for the network and applications.

Use of generic accounts is prohibited as it does not permit the collection of security audit trails.

Staff should not save patient identifiable, confidential or sensitive data locally; instead all these data should be hosted in secured and centrally managed systems (i.e. network drives which are secured, monitored and backed up by IM&T)

16 Equipment not provided by the Trust

16.1 Staff must not connect or attempt to connect any non-service issued device to the network, except the Guest Wireless Network, without express authority from the Information Security Department. Users should be aware that the Trust has in place automatic measures to prevent and audit this.

16.2 Users must not attempt to connect any of the following devices to the Trust's network:

- An unauthorised file or information storage device;
- A smartphone not issued by the Trust;
- An MP3 Player or similar device;
- A Laptop or any removable device not issued by the Trust;
- A gaming device;
- A camera or flash memory card not issued by the Trust.

Privately owned devices can be used to access remotely (via wireless, cellular or internet) some approved LAS applications (i.e. GRS, OWA) and to the LAS Guest wireless network.

Any business requirements to connect non-standard or unapproved devices to the LAS networks must be discussed with the IT Security team.

17 Personal Use

17.1 A limited amount of personal use of the Trust's systems is permitted subject to the following conditions:

- Work on the Trust's business must always take priority over personal usage of the Trust's systems;

- Any personal use must not delay or interfere with the proper performance of the duties of any member of staff;
- Where a user is in receipt of personal emails they should advise the sender that these may be monitored by their employers systems;
- Personal emails should not be permanently stored on LAS devices and must be deleted as soon as is practical to do so;
- Users must not store or download large amounts of information and files for their personal use including (but not limited to) music and video files and other similar formats. A small amount of personal files, not exceeding 20 megabits is considered appropriate.
- Personal data belonging to LAS users must be deleted from Trust's systems at the end of their employment.

17.2 If personal use exceeds an acceptable level in the reasonable opinion of the Trust, or users do not comply with these rules, their access to the system may be curtailed and they may be subject to disciplinary action.

IMPLEMENTATION PLAN				
Intended Audience	All staff and external			
Dissemination	The Pulse and the LAS Website			
Communications	Revised Policy and Procedure to be announced in the RIB and a link provided to the document.			
Training	Training will be provided to relevant staff via induction and other employee awareness programmes			
Monitoring:				
Aspect to be monitored	**Frequency of monitoring AND Tool used**	**Individual/ team responsible for carrying out monitoring AND Committee/ group where results are reported**	**Committee/ group responsible for monitoring outcomes/ recommendations**	**How learning will take place**
Recording security breaches and serious incidents	Annual information security reports to IGG	IS Manager Information Governance Group	Risk Compliance and Assurance Group	Policy review following feedback from RCAG