Doncaster and Bassetlaw Hospitals **NHS**
NHS Foundation Trust

Registration Authority Policy
for the
Management and Issue of Smartcards

This procedural document supersedes: CORP/ICT 19 v.2 - Registration Authority Policy for the Management and Issue of Smartcards

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Name and Title of author/reviewer	Roy G Underwood, Information Governance Manager
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Approved by (Committee/Group)	Information Governance Group & RA Agents
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Next review date	May 2019
Target Audience	Trust-wide

Amendment Form

Please record brief details of the changes made.

If the procedural document has been reviewed without change, this information will still need to be recorded although the version number will remain the same.

Version	Date Issued	Brief Summary of Changes	Author
Version 3	2 June 2016	▪ Tri-annual review ▪ Amended to accommodate the new Care ID System (CIS) rationale	Roy Underwood
Version 2	November 2011	▪ Tri-annual review ▪ Integrated & User Identity Management (IIIM & UIM) ▪ Approval by the Information Governance Team	Roy Underwood

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**Registration Authority Policy
for the Management and Issue of Smartcards**

1.   INTRODUCTION

1.1   Rationale

Authorised end-users will access many NHS applications using electronic Smartcards. A national system for registering end-users of applications is well established, comprising a hierarchy of Registration Authorities that culminates in the devolution of responsibility for authorising and registering individual staff as end-users to their employing authority. Accordingly the Trust is required to set-up a Registration Authority of its own to undertake this function.

1.2   RA Governance

Details of the policy framework for registering users for NHS national (Spine) services, the requirements for organisations to establish RAs for the governance of registration, and the responsibilities of RAs were published in the DH document Registration Authorities: Governance Arrangements for NHS Organisations - Gateway Reference 6244 (PDF, 37.6kB). This answers the question, "Why do we have to have a Registration Authority".

Information governance (IG) is an integral part of HSCIC service delivery and it is embedded within all its programmes. It is important that organisations protect patient confidentiality and rigorous registration and access control can help support a consistent and high quality audit framework. All NHS organisations are required to have a RA, as part of their overall IG arrangements. Therefore, RA should be seen as embedded in IG, not separate from it.

A RA is the governance framework within which organisations register individuals as users of the NHS national services, in order to maintain the confidentiality and security of patient and service user information at all times. Having a common and rigorous approach to how users are registered and are given access to national services is an integral part of protecting the confidentiality and security of every patient's and services user's personal health and care details.

Registration is the process by which users of Smartcard-enabled IT applications are authorised (enabled to have particular levels of access to particular patient and service user data) and authenticated (proved who they are beyond reasonable doubt for each access session).

1.3   Scope

The Trust Registration Authority Policy will apply to all processes, procedures and activities carried out by the Registration Authority and staff members who are authorised by the Registration Authority to access National & Local Smartcard associated applications.

1.4   Principles

The following principles apply:

*   The Trust is required to ensure that all National Policy requirements of Registration Authorities are met and maintained.
*   The Registration Authority is a vital aspect of information governance for the Trust since its primary responsibility is to maintain confidentiality of service user personal data.
*   The only way the Trust can use National & Local Smartcard associated applications is through staff who are duly registered through the registration authority.

The Trust will base its policy on:

*   HSCIC Registration Authority Guidance: http://systems.hscic.gov.uk/rasmartcards

2.   REGISTRATION AUTHORITY POLICY

A Registration Authority (RA) has been established by the Trust with the following remit, where it will:

*   Ensure that the National Registration Authority processes[1] are adhered to in full, including undertaking regular audits of processes and procedures.
*   Ensure that any local processes developed to support the National Registration processes are adhered to in full and are integrated with other local workforce registration policies.
*   Ensure that resources are available to operate the registration processes in a timely and efficient manner to meet the Trust's organisational requirements.
*   Ensure that the RA team members are adequately trained and familiar with the local and national RA processes.
*   Ensure that an indexed and secure audit trail is maintained of applicants' registration information and profile changes[2].
*   Ensure that all completed application forms and associated documents are kept secure in an area to which the RA and human resources teams have access. (NB: RA records need to be retained for 25 years.)
*   Ensure RA members are familiar with and understand "Registration Policy and Practices for Level 3 Authentications - NPFIT-NCR-DES-0294.02"[1].
*   Notify the national Registration Authority of the creation and revocation of RA managers[3].
*   Ensure that there are sufficient Smartcards and Smartcard issuing and maintenance equipment to meet the requirements of the Trust.
*   Define criteria for selecting and deselecting Sponsors.

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[1] HSCIC is encouraging Trusts to engage with the National Integrated identity Management (IIM) Strategy which utilises the Care ID System (CIS) application to interface ESR with the Spine User Directory (SUD)
[2] All RA Documentation is either held securely in the Main RA Office accommodation at the DRI, or with local RA Agents in their CSU or Corporate location.
[3] RA Managers must be sponsored by the Trust CEO or the Caldicott Guardian.

Appoint Sponsors in line with defined criteria:

- Define, agree and establish appropriate working relationships with partner organisations.
- Communicate operational service level issues to appropriate RA staff and the user community, notified by HSCIC.
- Define and identify local Job Roles, Areas of Work and Business Functions in line with national definitions and notify these to relevant authorities within the Cluster
- Monitor the performance of RA systems and processes, making improvements where required.

3.   IMPLEMENTATION AND COMPLIANCE

3.1   Key Registration Authority Roles – see also Appendix 1 for ToR's

The key roles and responsibilities within the Registration Authority are as follows:

People involved in the registration process

Role Responsibilities

RA Manager - The RA Manager is responsible to the Trust Board, the CEO and the Caldicott Guardian for ensuring that the required Registration Authority processes and procedures are in place and adhered to. The role will be undertaken by the Head of Information Governance.
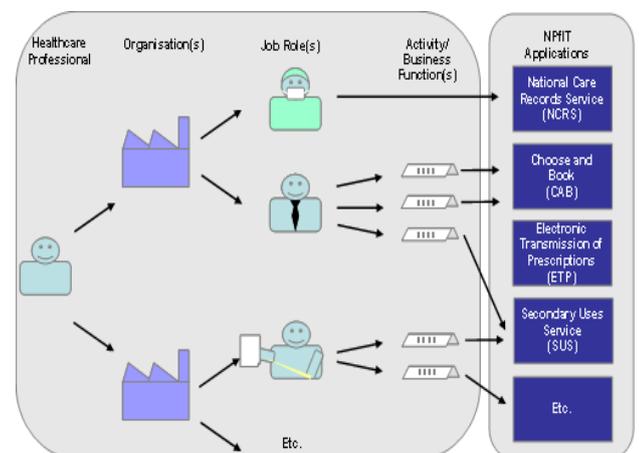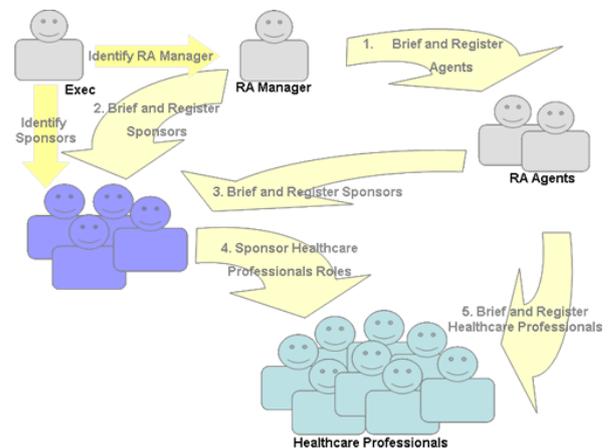

RA CIS Agent(s) - RA Agents are primarily responsible for registering users and issuing Smartcards. The RA Manager may also act as an RA Agent.

User Registration Sponsors - A Sponsor will typically be a senior manager to whom the user reports directly or indirectly. Sponsors have three key responsibilities:

Role Responsibilities (referred to as Sponsors hereafter)

1. Determine which National or Local Smartcard associated applications and therefore which Position Based Access (PBAC) role a member of staff is to be given (Sponsored) as a basis for their registration as an end-user.

2. A Sponsor will vouch for a user's identity.

3. An RA Sponsor or an Agent may unlock a user's Smartcard if that user forgets their pass-code.

With the implementation of CIS, staff with the RA Sponsor activity will have to work in parallel with their RA Agents. Many of the CIS processes require actions by two unique individuals (a Sponsor and an Agent), however some staff enjoy both Roles.

Sponsors will authorise their Agents and vice versa electronically to aid this cumbersome administrative process, provided they are properly authorised by their CSU or Corporate Directorate Management.

Application end-users

The key responsibilities for application end-users are as follows:

1. Keep their pass-codes secret and not share them with anyone, including colleagues.
2. Always have their Smartcard available when required and to take reasonable steps to protect it from misuse.
3. Not to share login sessions with other users. In practice this will require logging in and out at the start and end of each session.

Full details of the end-user's responsibilities are listed in the conditions on the initial RA01 registration forms and end-users must sign up to Terms & Conditions (electronically) when prompted to do so by the Care ID System.

3.2   Registration Authority Reporting Group

The Registration Authority will report directly to the Information Governance Group, as an integral element of the Information Governance Framework, which is chaired by the Trust Caldicott Guardian and within Terms of Reference approved by the Trust. (See APPENDIX 1).

3.3   Corporate Oversight

The Caldicott Guardian, on behalf of the Chief Executive, will take steps to ensure that all registered staff adhere to this Policy. A failure to adhere to this Policy may result in disciplinary action.

3.4   Training

The Registration Authority will work with the IT Training Department to ensure that all RA Team members and registered users are provided with appropriate training. Training is in the main through the HSCIC's on-line eLearning product.

Further post-training on-line support is available through the Trust Intranet at:
http://intranet/Corporate-Directorates/Medical-Director/RA_Documents_and_Help.aspx

3.5   RA Support

In the first instance through local RA Agents. If they cannot solve the problem, then calls should be logged with the IT Service Desk at it.servicedesk@dbh.nhs.uk or Ext 644190.

4. REFERENCE DOCUMENTS

1. Registration Authorities Operational and Process Guidance
   http://nww.hscic.gov.uk/rasmartcards/docs/rapolicyv1sep14.pdf

2. Registration Authorities Operational and Process Guidance
   http://systems.hscic.gov.uk/rasmartcards/cis/raprocessguidance/raopguid.pdf

   a. RA01 Short Form & Conditions
   b. RA01 New User Registration Form
   c. RA02 Form – User Profile and Profile modification
   d. RA03 Form – Request to cancel Smartcard or revoke certificates; and re-issue Smartcard
   e. RA04 Form – Interim Fallback Smartcard Solution
   f. RA05 Form – Change of Details

The CSI has an inbuilt audit trail not requiring the use of paper forms, however the Trust has agreed that the RA01 forms may continue to be used and held for local admin and audit purposes. Where RA Agents opt to do this, then those documents should be held for a period of 18 months.

5. DISTRIBUTION

This Policy will be available through the Trust APD[4] Management Process, including the Trust's Intranet.

Note: HSCIC Guidance Documentation marked as 'NHS Confidential' will not be routinely available. Any FOI requests for this document should be referred to the HSCIC through the usual command chain.

6. MONITORING

As described in the RA Strategy document: CORP/ICT 18.

7. REVIEW

This Policy will be reviewed tri-annually or when required by changes in national policy.

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[4] APD – Approved Procedural Documents

8.   TRAINING & SUPPORT

Training & Support is facilitated 'on-line' through the RA Webpages which can be found on the Trust Intranet.

9.   ASSOCIATED TRUST PROCEDUREAL DOCUMENTS

CORP/ICT 18: Trust Registration Authority Strategy

10.   EQUALITY IMPACT ASSESSMENT

An Equality Impact Assessment (EIA) has been conducted on this procedural document in line with the principles of the Equality Analysis Policy (CORP/EMP 27) and the Fair Treatment For All Policy (CORP/EMP 4).

The purpose of the EIA is to minimise and if possible remove any disproportionate impact on employees on the grounds of race, sex, disability, age, sexual orientation or religious belief. No detriment was identified. (See Appendix 2)

APPENDIX 1

REGISTRATION AUTHORITY MANAGEMENT TEAM – TERMS OF REFERENCE

REGISTRATION AUTHORITY MANAGEMENT TEAM – TERMS OF REFERENCE

The Trust is required to set up a Registration Authority (RA) to register and authorise users of the computer applications that were either derived from the historical National Programme for IT (NPfIT), or which have been purchased directly by the Trust. The requirements, management structure and detailed roles and responsibilities are described in the Trust's Registration Authority Policy.

The policy requires the RA to be managed on a day-to-day basis by the RA Management Team with a remit outlined in the RA Strategy & this Policy.

The RA Strategy, the RA Policy and trust Intranet pages reflect the 'split' responsibilities for:

- RA Smartcard Management across the Care Groups and Corporate Departments under the RA Manager

- RA/IT Technical Infrastructure under the Head of IT Services

REMIT

The requirements of a local Registration Authority are defined in the HSCIC documents identified in Section 4. Registration Authority Management will be under the direct control of the Trust Information Governance Group (IGG), based on national policy and guidance will be as follows:

• Ensure that the National Registration Authority processes are adhered to in full, including undertaking regular audits of processes and procedures.

• Ensure that any local processes developed to support the National Registration processes are adhered to in full and are integrated with other local workforce registration policies.

• Ensure that resources are available to operate the registration processes in a timely and efficient manner to meet the Trust's organisational requirements.

• Ensure that the RA team members are adequately trained and familiar with the local and national RA processes.

• Ensure that an indexed and secure audit trail is maintained of applicants' registration information and profile changes.

- Ensure that all CIS completed application forms and associated documents are kept secure in an area to which the RA Management Team have access. (NB: RA records generated under Calendra and UIM need to be retained for 25 years.) Where Care Group or departmental RA Sponsors and Agents choose to use the catalogue of RA forms, then those forms need to be held for a minimum of 18 months.

- Ensure RA members are familiar with and understand the Registration Policy and Practices for eGIF Level 3 Authentication.

- Notify the national Registration Authority of the creation and revocation of RA managers.

- Ensure that there are sufficient Smartcards and Smartcard Printers and maintenance equipment to meet the requirements of the Trust.

Define criteria for selecting and deselecting Sponsors

- Appoint Sponsors in line with defined criteria:

- Define, agree and establish appropriate working relationships with partner organisations.

- Communicate operational service level issues to appropriate RA staff and the user community, notified by HSCIC.

- Sponsors/HSCIC Project Leads will define and identify local RBAC Job Roles & Activities, Areas of Work and Business Functions in conjunction with the Trust RA Manager, and in line with national definitions.

- Monitor the performance of RA systems and processes, making improvements where required.

MEETINGS

The RA Management Team will report, as necessary, to the Caldicott Guardian through the Information Governance Group agenda.

Administrative support to the management group will be provided through the RA Manager.

APPENDIX 2 – EQUALITY IMPACT ASSESSMENT - PART 1 INITIAL SCREENING

Service/Function/Policy/Project/ Strategy	Care Group/Executive Directorate and Department	Assessor (s)	New or Existing Service or Policy?	Date of Assessment
RA Policy	Medical Director	Roy Underwood	Existing Policy	12/05/2016

1) Who is responsible for this policy? Name of Care Group/Directorate: Medical Directors Office
2) Describe the purpose of the service / function / policy / project/ strategy? All RA Smartcard users
3) Are there any associated objectives? HSCIC & National eGIF Systems Access Controls
4) What factors contribute or detract from achieving intended outcomes? None compliance
5) Does the policy have an impact in terms of age, race, disability, gender, gender reassignment, sexual orientation, marriage/civil partnership, maternity/pregnancy and religion/belief? No
•   **If yes, please describe current or planned activities to address the impact** [e.g. Monitoring, consultation]
6) Is there any scope for new measures which would promote equality? [any actions to be taken
7) Are any of the following groups adversely affected by the policy?

Protected Characteristics	Affected?	Impact
a) Age	No	
b) Disability	No	
c) Gender	No	
d) Gender Reassignment	No	
e) Marriage/Civil Partnership	No	
f) Maternity/Pregnancy	No	
g) Race	No	
h) Religion/Belief	No	
i) Sexual Orientation	No	

8) Provide the Equality Rating of the service / function /policy / project / strategy – tick (✓) outcome box

Outcome 1 ✓	Outcome 2	Outcome 3	Outcome 4

*If you have rated the policy as having an outcome of 2, 3 or 4, it is necessary to carry out a detailed assessment and complete a **Detailed Equality Analysis form in Appendix 4**
Date for next review: May 2019
Checked by: Roy Underwood   **Date: May 2016**