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Remote Working Policy

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Version	Date	Control Reason
1.4	June 2018	Reviewed in line to Annual Review Date; Name of Responsible Individual updated to reflect current information.
1.4	February 2015	Reviewed in line with annual information governance submission.
1.3	June 2013	Change of name and title to Name/Department of originator/individual. 4.6, 5.1, 5.2, 5.5, 7.1 Title Changed from Service Manager to IM&T Manager.
1.2	November 2012	Titles amended, Director of IM&T changed to Director of service delivery and operational performance, title added Service Manager with responsibility for Information

		Governance	changed	from	IM&T	officer	with
		responsibility	for Informati	ion Gov	ernance.		
1.1	September 2012	This Policy has been updated to include employees as well as Associates when remote working.			es as		

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1.0 INTRODUCTION

- 1.1 Urgent Care 24 has a duty to ensure that appropriate arrangements are in place to manage remote working undertaken by employees and Associate GPs.
- 1.2 We recognise that remote working should be available to employees and Associate GPs to support the service where appropriate, but also recognises that this should be done in a safe and secure manner to reduce the risks to confidential information being shared or accessed inappropriately to the lowest possible level.

2.0 PURPOSE

2.1 This policy has been developed to manage remote working including the suitability for this type of working and to reduce the level of risk posed to the lowest possible level.

3.0 DEFINITIONS

3.1 For the purposes of this agreement the following definitions will apply:

Home-working is where an employee or Associate GP meets their contract of employment or Service Level Agreement obligations working from home on occasional or temporary basis. This may include the use of Urgent Care 24 provided laptop computers.

Mobile-working is a form of performing work, using information technology, where work, which could also be performed at the organisation's premises, is carried out away from those premises on a regular basis. This type of working can involve mobile phones, tablet personal computers, laptops and is not restricted to home working.

4.0 ROLES AND RESPONSIBILITIES

4.1 The Managing Director

4.1.1 The Managing Director will maintain ultimate accountability for the implementation of this working policy. However, specific responsibilities will be delegated to others within the organisation. The Managing Director will seek assurance of the effective implementation through the organisation's Governance Committees

4.2 Director of Operational Planning & Corporate Services

4.2.1 The Director of Planning & Corporate Services will ensure that adequate resources are available and appropriate people are identified within their Directorate to ensure effective implementation of this policy.

4.3 Directors

4.3.1 Directors will support and enable Line Managers to fulfill their responsibilities and ensure the effective implementation of this policy within their specialty.

4.4 Line Managers

Line Managers must ensure that -

- 4.4.1 Identified remote working employees and Associate GPs are provided with all appropriate information and documentation as required. Further information and copies of appropriate forms can be found within the appendices.
- 4.4.2 They review employees and Associate GPs applications to remote work appropriately and sign all relevant documentation as required. Where they feel an application for this type of working is not appropriate, this must be discussed with the individual and it must be documented within the employee or Associate GPs personnel file.
- 4.4.3 All Information Governance incidents are investigated appropriately and the information and learning is shared with the relevant individuals within the organisation.
- 4.4.4 Copies of all appropriate documentation relating to any remote working are kept in the employee or Associate GPs personnel file for reference.
- 4.4.5 When an employee leaves Urgent Care 24 or an Associate GP ceases undertaking sessions for the organisation, the necessary steps are taken to retrieve any mobile or home working access and that all appropriate exit measures are adhered to.

4.6 IM&T Manager with responsibility for Information Governance They will ensure that –

- 4.6.1 They provide information, support and advice on all remote working including mobile and home working arrangement requests in conjunction with the IM&T department to ensure that only appropriate requests are approved.
- 4.6.2 They provide incident investigation advice where requested.

4.7 Director of Service Delivery and Operational Performance

The Director Service Delivery and Operational Performance, through delegating specific responsibilities to others within the organisation will ensure that –

- 4.7.1 Adequate resources are available and appropriate people are identified within their department to ensure that all remote working applications are monitored and sanctioned in a timely manner.
- 4.7.2 All remote working arrangements that do not meet the set requirements are discussed appropriately and suitable arrangements are recommended to the individual to action all issues.
- 4.7.3 Where appropriate, software and upgrades to Urgent Care 24's personal computer equipment is provided to ensure the equipment meets all security requirements.
- 4.7.4 Appropriate training is provided to the individual on how to use the equipment given to them and that they are given time to ask any questions where necessary. The trainer will ensure that the appropriate agreement form is filled in and signed as set out in appendix four before the individual is provided with the necessary equipment to remote work.
- 4.7.5 The Asset Register is kept up to date with information on which employees or Associate GPs have security key tokens so that records can be updated and assets can be monitored.

4.8 Associate GP

They will ensure that;

- 4.8.1 They apply to remote work via the appropriate methods as set out in appendices and provide honest information within this documentation.
- 4.8.2 Whilst remote working, they abide by all appropriate Information Governance policies and procedures.
- 4.8.3 They attend all necessary Information Governance Training as required within agreed timescales.
- 4.8.4 Where required, they implement all further control measures requested by the organisation before their remote working arrangements are approved. Where these measures cannot be met, this information must be then provided to the Service Manager with responsibility for Information Governance.

4.8.5 All Information Governance incidents must be reported via the Urgent Care 24's Incident Policy.

5.0 WORKING FROM HOME

- 5.1 Any associate wishing to undertake triage sessions from home must make an appropriate application to do so via the documentation as set out in appendix one. This must be submitted to the appropriate Line Manager for approval and sent to the IM&T Manager with responsibility for Information Governance.
- 5.2 Any employees wishing to work remotely must make an appropriate application to do so via the documentation as set out in appendix two. This then must be submitted to the appropriate Line Manager for approval sent to the IM&T Manager with responsibility for Information Governance for processing
- 5.3 The appropriate Line Manager may, at this stage, reject the application to work remotely. If so, the reason for this rejection must be documented and provided to the employee or Associate GP.
- 5.4 If the initial application to work remotely is approved by the Line Manager a member of the IM&T department must complete the home working risk assessment, further information can be found at appendix three.
- 5.5 The application for any remote working will be reviewed by an appropriate member of the IM&T department. Solutions to any amber or red results from the assessment must be provided to the employee or Associate GP to implement or discuss further with their Line Manager or Head of Operations as appropriate. Once further consultation has taken place and solutions agreed regarding any red/amber results, the actions must be addressed and documented in the appropriate place on the risk assessment form. The application will be approved by the employee or Associate GP who must then sign the agreement form. Their request will then be processed by the IM&T Manager with responsibility for Information Governance. If the application comes back with all green results, this application has been successful and the user must sign the agreement form before the IM&T Manager with responsibility for Information Governance processes the application.
- 5.6 Whilst undertaking work remotely, employees or Associate GPs must ensure that they are aware of their responsibilities to store information safely, to protect it from loss, destruction or damage. This requires storage that is secure against theft and damage, and the protection of systems from computer fraud and virus attacks.

6.0 VPN

- 6.1 Home working requiring access to the organisation's electronic clinical systems must do so via a VPN connection and a security key token, specified to a nominated individual issued by the CCG.
- 6.2 VPN is a connection made between one network and another. VPN is used to connect to the Trust's network in order for an individual to home work. A security key token is part of the remote access system and provides a unique number every few seconds. This number is used as part of the process to home work securely.
- 6.2 If a successful application for remote working is made, employees or Associate GPs will be provided with the appropriate hardware, software and security key token to connect to the organisation's electronic systems from home.

7.0 STANDARDS/KEY PERFORMANCE INDICATORS

- 7.1 Information Governance trends and issues highlighted via the organisation's Incident Reporting process will be monitored via the IM&T Manager with responsibility for Information Governance.
- 7.2 Security key tokens assigned to individuals will be recorded via the organisation's Asset Register and a review of this will take place alongside leaver's forms and exit processes to ensure all equipment is accounted for.

8.0 RELATED POLICIES

This policy should be read in conjunction with:

• Mobile Device Policy (UC24POL64)



APPENDIX ONE

ASSOCIATE GP HOME WORKING INITIAL APPLICATION FORM

This form must be submitted to the Appropriate Line Manager to ascertain whether they agree in principle to you undertaking sessions from home. This must be completed and a decision made before you carry out a home working risk assessment.

NAME	
REASON WHY HOME WORKING IS REQUESTED	
LEVEL OF COMMITMENT TO UNDERTAKING OF SESSIONS FROM HOME	

Associate GP Signature:	Date:
Line Managers Authorisation YES / NO	
Reason for rejection of application:	
Line Managers Signature:	Date:



APPENDIX TWO

EMPLOYEE REMOTE WORKING INITIAL APPLICATION FORM

This form must be submitted to the Appropriate Line Manager to ascertain whether they agree in principle to you undertaking sessions from home. This must be completed and a decision made before you carry out a home working risk assessment.

NAME	
REASON WHY REMOTE WORKING IS REQUESTED	
HOW OFTEN WILL YOU BE REMOTE WORKING	

Employee Signature:	Date:
Line Managers Authorisation YES / NO	
Reason for rejection of application:	
Line Managers Signature:	_ Date:

APPENDIX THREE

HOME WORKING RISK ASSESSMENT FORM

Name of	
Employees/Associate	
Contact number:	
51 5	Definitive Clinical Assessment / Advice / Corporate / Mobile Communication
Date of assessment:	
	Regular <i>(e.g. 1</i> Occasional day per week)

Hazard checklist

Working environment of area v	vhere home-working	takes	place
Green - compliant A	mber – partially compli	iant	Red – non compliant
		Comp	liancy
Is there sufficient ventilation, can without risk to Associate or other	•		
Is there sufficient lighting for the	task?		
Is there sufficient heating? Ar portable heaters maintained order? (Gas appliances must be Safe (previously Corgi) qualified	in good working maintained by a Gas		
If portable heaters are used ar prevent toppling and away from c	•		
Is there sufficient space for all the used? (There should be at least 3			
Is flooring in good condition and f	ree from trip hazards?		
Is there sufficient safe & secu equipment and documents used?	0 1		
Is the work area subject to noise a to effect the Associate's concent			
Electrical safety			
Is the fixed electrical system in g signs of scorching or arcing on so			
Are there sufficient numbers c overloading?	f sockets to prevent	·	
If extension leads are used are switched type? (Cables and exte			

positioned so that they are not subject to excessive	
wear or damage and do not present a trip hazard)	
Is electrical equipment used for home working in good	
condition and free from any visual faults?	
Does the employees undertake visual checks of	
electrical equipment to identify any obvious faults such	
as worn or damaged leads or plugs?	
Are there arrangements in place for any equipment to	
be provided to be PAT tested by the organisation?	
Safe Posture	
Has the employees/Associate received	
training/information on how to set up their workstation	
to avoid poor posture?	
Does the chair used provide sufficient lumbar support?	
Can the chair be adjusted so that the employees can sit	
with their shoulders in a relaxed position and their	
elbows at a 90-degree angle, with the upper arms	
vertical and forearms horizontal whilst keying and using	
the mouse?	
Is the work surface of a sufficient size to accommodate	
all the equipment to be used?	
Is the sufficient space in front of the keyboard for the	
employees/Associate to rest their hands in between	
keying?	
Does the employees/Associate have to read/refer	
to/copy from documents placed flat on the desk? (This	
is likely to lead to awkward neck movements and should	
be avoided by using a document holder.)	
Is there sufficient space below the work surface for the	
employees/Associate's legs to enable them to stretch	
and change position?	
Can the employees/Associate's feet rest on the floor or	
do they need a footrest?	
Is the employees/Associate likely to use the telephone	
regularly whilst using the keyboard or mouse? (If yes, a	
headset should be provided).	
Has the employees/Associate experienced pain or	
discomfort when using the computer at home?	
Visual fatigue	
Is the screen positioned at the correct height and	
viewing distance? (The individual's eye-line should be	
just below the top of the screen and the screen should	
y	

be positioned directly in front of the user at approximately an arm's length away).	
Is the screen free from glare or reflections? (Ideally the screen should be at right angle to windows, windows should be provided by blinds or curtains to prevent glare from falling onto the screen.)	
Is the screen free from flicker & are images clear & stable? (IT support can advise how to adjust the settings to suit the needs of the user)	
Has the employees/Associate had a recent eye-sight test?	
Has the employees/Associate suffered from headaches or visual discomfort when working at the computer at home?	
Stress	
Is there sufficient segregation from disruptions e.g. children, pets, other family members?	
Are there arrangements for keeping in contact with the employees/Associate from base?	
Are there arrangements in place to regularly audit the employees/Associates performance, provide feedback and evidence learning?	
Is support / advice readily available to the employees/Associate to deal with either IT problems or other specific work queries?	
Does the employees/Associate have access to sufficient training, information & instruction to enable them to undertake their work safely?	
Emergency arrangements	
Does the employees/Associates accommodation have a smoke alarm?	
Has the employees/Associate identified what they will do in the event of a fire? (<i>They should plan their escape</i> <i>route and what they would do if the route was</i> <i>unavailable do to fire/smoke, e.g. having to tools to</i>	
<i>break double-glazed windows etc.)</i> Has the employees/Associate got access to a first-aid kit?	

Action taken by Line Manager to address any issues	
Name of Manager:	Date for review of assessment:

APPENDIX FOUR APPROVAL FOR REMOTE WORKING

The employee/Associate GP named below has received express approval to work remotely and has read, understood and agreed to the conditions within this remote working agreement and associated Standard Operating Procedures. They have the approval of the appropriate Line Manager and have completed the relevant form detailing this. They have also completed the necessary risk assessment and have addressed all further actions, if any, identified from this.

Equipment being used:

Description

Asset Number (s)

Declaration: I have read, understood and agree to abide by the conditions set out in the Remote Working Policy and associated Standard Operating Procedures. I agree that:

- I will keep all equipment secure including the laptop, security key token, etc at all times.
- I will use only an approved encrypted USB stick provided by Urgent Care 24.
- I will not write down any passwords and will keep the security key token separate from the laptop (i.e. not in the same bag).
- I will not carry out any electronic transfer of information between NHS systems and privately managed personal computer resources.
- I will report any changes to my home working environment to the relevant Line Managers or Head of Operations.

- I will return to Urgent Care 24 all equipment issued to me for the purpose of remote working should this no longer be required or on termination of this arrangement.
- I understand that failure to observe and maintain this home working arrangement may result in the home working facility being withdrawn.

Name of Associate	Nominated IT Lead
Signature	Signature
Date	Date
Head of Operations	IG Lead
Signature	Signature
Date	Date

Valid until

An approved remote working application should be kept by the Employee/Associate GP and the Human Resources Manager.

APPENDIX FIVE

DATA PROTECTION CONSIDERATIONS WHEN REMOTE WORKING

All Associate GPs and employees should adhere to Urgent Care 24 policy when using records/information for remote working purposes. In addition, consideration should be given to the following:

Manual records (paper records)

- Associate GP/employee should not take patient records home, and where this cannot be avoided, procedures for safeguarding the information should be made i.e. locked securely in a briefcase, kept under your supervision at all times or locked in a secure cupboard with only your access, until they are returned to work
- Confidential/Sensitive information should not be left where it might be looked at by unauthorised persons i.e. family and friends and should not be left in insecure areas
- Records must not be left in the car. During transportation these should be locked in the boot of the car and removed immediately on arrival at home and kept secure as above.
- Records must be returned to the organisation, as soon as possible

Electronic records

- Always log-out of any computer system or application when you have finished working or leaving your work station for a period of time
- Ensure passwords are kept safely and not accessible to friends and family
- Use a password protected screen saver to prevent casual viewing of information
- Do not store patient information on a USB stick.
- Any Laptop or Mobile device has approved encryption employed.