Northumberland, Tyne and Wear MHS Foundation Trust

Document Title	IT Procurement Policy		
Reference Number	NTW(O)63		
Lead Officer	Stewart Marsh		
		Hea	d of IT
Author(s)	Sue Proud		
	Info	rmation Gov	vernance Manager
Ratified by	Finance Infrastructure and Business Development Group (FIBD)		
Date ratified	15 th March 2011		
Implementation Date	Operational Policies: March 2011		
Date by which policy to be embedded	March 2011		
Review Date	January 2012		
Version number	V02		
Change Control	Date Version Reason		Reason

This policy supersedes:

Number	Title
NTW(O)63 V01	IT Procurement Policy

IT Procurement Policy

Section	Contents	Page No.
1	Introduction	3
2	Purpose	3
3	Responsibilities	4
4	Consultation & Communication with stakeholders	4
5	Approval of Document	4
6	IT Procurement Management	5
7	Governance	7
8	Policy Administrative Process	8
9	Equality Impact assessment	8
10	Training	8
11	Embedding	9
12	Standards/Key Performance Indicators	9
13	Fair Blame	9
14	Associated documents	9
15	References	10
16	Glossary of Terms	10
Appendic	es – attached to policy	
А	Equality and Diversity Impact Assessment	
В	Training Checklist and Training Needs Analysis	
С	Audit Monitoring Tool	
D	Policy Notification Record Sheet	

1. Introduction

1.1 The Northumberland Tyne & Wear NHS Foundation Trust (NTW) has agreed standards in place for desktop software, operating systems, computer networks and computer hardware and peripherals. This standardisation is essential as it allows the Trust's IT Department to provide a quality service.

1.2 The Trust has agreed standards in place for:-

- PC
- Laptop
- Blackberry
- Peripherals printers, scanners
- Software
- Software maintenance and support contracts
- Telephones
- Camera, Camcorder and Audio device
- USB Memory Stick

1.3 The main benefit areas are:

- IT Support Staff are familiar with hardware and peripherals, thus speeding up fault finding;
- The IT Department is able to stock standard spares in order to reduce down time;
- Network installations are planned and coordinated centrally by experienced network engineers;
- IT staff with relevant skills are recruited.

1.4 This policy documents the standards and controls which must be in place to achieve these benefits and to ensure the purchase, delivery and installation of IT equipment is coordinated successfully.

2. Purpose

2.1 The purpose of this policy is to provide a framework for the procurement of IT hardware and software within the Trust, and to assist in the management and control of IT expenditure across all areas of NTW.

3. Responsibilities

- Responsibility for implementation and compliance to this Policy lies with the Chief Executive
- Operational Directors must ensure ownership for implementation throughout their respective Directorates
- It is the responsibility of the Head of IT to ensure that IT hardware or software is purchased in accordance with this policy only.
- All purchasers of computer hardware and software have a responsibility to ensure that this policy is adhered to.
- It is the responsibility of the Informatics Service Helpdesk in conjunction with the Supplies Department to ensure that all IT purchases are dealt with in accordance with this Policy and in a timely manner

4. Consultation and communication with stakeholders

4.1 This Policy has been developed in consultation with:

Senior Management Team Working Age Adult Directorate Forensic Directorate Older People's Services Directorate CYP and Specialist Services Directorate Learning Disability Services Directorate Clinical Governance and Nursing Directorate Finance, IM&T, Estates/Facilities and Performance Medical Staff Committee Staff-side Trust Pharmacy Workforce Allied Health Professionals – Strategic Forum Communications

5. Approval of document

5.1 After full consultation, this document has been approved and ratified by the Finance Infrastructure and Business Development Group (FIBD).

6. Purchase of IT Equipment:

6.1 Procurement:

6.1.1 The IT Department is the sole authority for submitting requisitions for IT equipment on behalf of any Ward or Department that has had approval for obtaining such equipment. The Head of IT retains the right to question any request for IT equipment, to ensure that purchases offer value for money etc.

6.1.2 All IT related hardware and software will be specified by the Head of IT. Hardware and software cannot be purchased without a completed Online User Request. This needs to be approved by the department's Cost Centre Manager.

6.1.3 The IT Department will ensure that all of the Trust's IM&T policies and procedures are followed when setting up software and hardware.

6.1.4 Installation of replacement equipment will be given priority over new equipment in order to maintain continuity in the existing service.

6.1.5 The following general principles will be applied to all IT purchases:

- The Standing Financial Instructions which govern all procurement of goods and services across NTW
- All purchases will be suitable for purpose
- All purchases will be of an acceptable quality
- All purchases will have technical approval and financial approval from both the budget holder and the Head of IT
- Request for replacement of equipment must be identified as faulty by the IT Team or fall outside the replacement criteria for the age of equipment.
- All purchases will be on the approved products list unless authorisation has been obtained from the Head of IT to purchase non-approved products
- All solutions purchased to comply with the Trust Information Security Policy
- All approved projects will be managed using PRINCE2 methodology

6.2 Procurement Policy:

6.2.1 Staff who wish to purchase IT equipment will:

- Consider value for money
- Identify maintenance requirements
- Identify training requirements

6.3 The Purchaser or Line Manager will:

• Ensure that the Online Order is completed, and approved by the budget holder

6.4 The budget holder will:

• Ensure that all relevant paperwork is complete and give authority to proceed after approval by the IT Department

6.5 The IT Department will:

- Ensure that all purchase requests are dealt with in a timely manner
- Ensure equipment is checked against delivery receipt and asset tagged
- Ensure that all It equipment is configured appropriately by a trained member of staff
- Used only in an approved environment
- Maintained in a safe and reliable way
- Replaced in accordance with statutory requirements, guidelines and changes in technology
- Ensure that all software licences are checked for quantity and held securely

 Decommissioned and disposed of in line with the Trust secure disposal guidelines

6.6 The Supplies Department will:

- Accept Procurement (Oracle) requisitions from the Informatics Service Helpdesk and deal with these in a timely manner
- Ensure That adequate information has been provided to complete the procurement
- Raise a Purchase Order for the equipment, and forward this to the supplier
- Will make reference to standardised list of products
- Existing catalogues and contracts to be used by supplies where appropriate
- IT will liaise with Supplies in order to determine source of supply for commonly used products.
- Supplies will use the Commercial Support Unit (formerly PRONE) for the supply of PCs and Laptops.

7. Governance

7.1 Monitoring Compliance

7.1.1 Responsibility for monitoring compliance locally lies with Line Managers, in conjunction with budget holders.

7.1.2 The Information Governance Team will monitor compliance through observation, spot checks and through incident management in line with the Trust Incident reporting process.

7.1.3 Compliance will routinely monitored through internal and external audit.

7.2 Incident reporting

7.2.1 All incidents involving information assets/ systems must be reported immediately to the Information Governance department and dealt with in accordance with the Trust incident reporting procedure (See Trust Incident Reporting Policy and Procedures).

7.2.2 Actual or Potential breaches will be reported to the Head of IT who may follow this up with the relevant Director, and in the case of a serious breach involving fraud or the seriousness of the value of the purchase, the Director of Finance.

8. Policy administrative process

8.1 The development, consultation and dissemination of this policy has been undertaken in accordance with the Policy for the Development and Management of Procedural Documents and in conjunction with the policy administration process.

8.2 It has been circulated within the Trust e-bulletin and is available on the Trust Intranet site and also from policy administration.

8.3 Archiving of this policy will be in accordance with the Policy for the Development and Management of Procedural Documents.

9. Equality impact assessment

9.1 In conjunction with the Trust's Equality and Diversity Officer this policy has undergone an Equality and Diversity Impact Assessment which has taken into account all human rights in relation to disability, ethnicity, age and gender. The Trust undertakes to improve the working experience of staff and to ensure everyone is treated in a fair and consistent manner.

10. Training

10.1 The Finance Infrastructure and Business Development Group (FIBD) has:

- given full consideration to any training needs that have been identified during the development of a policy
- ensured that a full Trustwide training needs analysis has been undertaken.
- identified who this will effect
- what level of training is required
- how often training should be undertaken
- any resource implication.

10.2 Where additional training is required it is the responsibility of both managers and staff to ensure that this is undertaken and that attendance is verified and recorded.

11. Embedding

11.1 Taking into consideration all the implications associated with this policy, it is considered that a target date of March 2011 is achievable for the contents to be embedded within the organisation.

11.2 This will be monitored by the Finance Infrastructure and Business Development Group (FIBD) during the review process. If at any stage there is an indication that the target date cannot be met, then the Group will consider the implementation of an action plan.

12. Standards / Key Performance Indicators

12.1 The standards in this Policy are based on the requirements of the National Information Governance Assurance program and controls set out in the Information Governance Toolkit.

12.2 The Policy upholds the Principles of the Data Protection Act 1998, and the Caldicott report (HSG 98(89), as well as guidance issued by the Information Commissioners Office.

13. Fair Blame

13.1 The Trust is committed to developing an open learning culture. It has endorsed the view that, wherever possible, disciplinary action will not be taken against members of staff who report near misses and adverse incidents, although there may be clearly defined occasions where disciplinary action will be undertaken.

14. Associated documents

Data Protection Policy NTW(O)36 Information Risk Policy NTW(O)55 Information Sharing Policy NTW(O)62 Issue and Use of Mobile Communication Devices NTW(O)58 Removable Data Encryption Policy NTW(O)30 Visual Imaging and Audio Policy NTW(O)45 Trust Incident Reporting Policy NTW(O)05 Risk Strategy

15. References

ISO/IEC 27002:2005

Standard Financial Instructions

16. Glossary of Terms:

ISO/IEC 27002:2005: International Standard for Information Security

Northumberland, Tyne and Wear MHS

NHS Foundation Trust

Equality and Diversity Impact Assessment Screening Tool

Names of Individuals involved in Review	Date of In Screeni		Review Date	Service Area / Directorate	
S Proud	October 2	2010	Jan 2012	Trustwide	
Policy or Service to be Asses	ssed		Is this a new or existing Policy or Service?	Existing	
		To regulate the procurement of IT equipment across the Trust			
Are there any associated objectives of the Policy or Service? If so what are they		cial a	nd budgetary re	egulation	
Does the policy unlawfully discriminate against equality target groups?	No				
Does the policy promote equality of opportunity for equality target groups?	N/A				
Does the policy or service promote good relations betw different groups within the community, based on mutua understanding and respect?					

Equality and Diversity Impact Assessment Screening Tool

Which equality target groups of the population do you think will be affected by this policy or function?

Equality Target Group	What positive and negative impacts do you think there may be for each equality target group(s)?
Black and Minority Ethnic People (including gypsy/travellers, refugees and asylum seekers) BME	N/A
Women and Men WM	N/A
People in Religious/Faith groups RF	N/A
Disabled People DP	N/A
Older People OP	N/A
Children C	N/A
Young People YP	N/A
Lesbian Gay Bisexual and Transgender People LGBT	N/A
People involved in the criminal justice system CJS	N/A
Staff S	N/A
Any other group(s) AOG	N/A

Equality and Diversity Impact Assessment Screening Tool

Screening Tool Checklist: Summary Sheet		
Positive Impacts N/A	Negative Impacts N/A	
Additional Information and Evidence	e Required N/A	
Recommendations N/A		
From the outcome of the Screening for race or other equality groups? No	, have negative impacts been identified	
If yes, has a Full Impact Assessmen not?	at been recommended? If not, why	
Manager's signature: S Proud Da	te: 21.9.2010	
	espect of answering the above questions ontact:	
	d Diversity Officer 0 394 848	



Communication and Training check list

It is the responsibility of Domain/Governance Committees to ensure a full review of any training implications has been undertaken prior to the ratification

What is the change in knowledge or skills required to achieve the differences that this policy has been designed to deliver for the organisation?	All staff purchasing IT equipment to be made aware of IT Procurement process
Are the communication/training needs required to deliver the changes necessary by law, by national/local standards? If yes, define the requirement(s).	Ensure that all staff have access to IT Procurement Policy and procedures
What does the organisation actually have to do.	
For which staff groups is the communication/training need required?	Trustwide
What levels of understanding are required e.g. awareness of policy, understanding of new responsibilities/skills?	Ensure that Policy and procedures are communicated to all staff and made available of the intranet
What means of delivery would be most appropriate e.g. team briefs, management cascade, e-bulletin etc?	Team brief, CEO Bulletin, Intranet, face to face training, E learning
	Head of IT
Who will be the person responsible for liaising with Communications and the Training and Development Departments?	

Northumberland, Tyne and Wear MHS

NHS Foundation Trust

Training Needs Analysis

Service Area	Staff / Professional Groups	Level of Training	Frequency of Training
Trustwide		General awareness of IT Procurement Policy and Procedures	Annually

Northumberland, Tyne and Wear **NHS**

AUDIT/MONITORING TOOL

STATEMENT

The Trust will work towards effective clinical governance and governance systems. To demonstrate effective care delivery and compliance regular audits must be carried out. Policy authors are encouraged to attach audit tools to all policies. Audits will need to question the systems in place as outlined in the policy. It is suggested that between five and eight measurable standard statements be listed, which can then be audited in practice and across the Trust.

	POLICY NAME		
STANDARD ST NTW(O)63	TATEMENT: IT Procurement Policy	Yes	No
Statement 1	All It Procurement authorised by Head of IT	Y	
Statement 2			
Statement 3			
Statement 4			
Statement 5			
Statement 6			
Statement 7			
Statement 8			



POLICY NOTIFICATION RECORD SHEET

Policy number	NTW(O)63
Policy title	IT Procurement Policy
Date issued	
Date of implementation	
Directorate/Service/Ward/Department	
Received by	
Date received	
Date placed in policy file	

I have read the above policy and understand its contents:

Name (print)	Signature	Designation	Service/Ward/Dept.	Date

This form is to be kept up to date at all times to act as a clear record that all relevant staff have received notification of the existence of the above policy, that they have read it and understood its contents. Form to be retained in the policy file in front of the policy specified.

Policies and policy index lists are available via Trust Intranet. Index lists are continually updated and current lists should be retained in the front of policy files.