

Registration Authority Policy

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1. RATIONALE

- 1.1. From April 2008, NHS Employment Check Standards became a requirement in the NHS as part of pre-employment checks. Similarly, robust identity checks were also enforced using the same identity management standards carried out by an NHS organisation's Registration Authority (RA) to verify an individual's identity before allowing access to NHS Care Records Service (NCRS) applications. Combining these two parallel activities into a single Integrated Identity Management (IIM) process has proven to deliver significant benefits through HR/RA Process Integration and the move to Position Based Access Control (PBAC), both supported by the following new software applications.
- 1.2. Integrated Identity Management significantly improves access control to NCRS applications containing person identifiable information through revised business processes and the introduction of new software applications.
- 1.3. Based on the significant benefits and improved governance that could be achieved, the Trust elected to implement the ESR-UIM Interface which was activated on the 1 April 2011, alongside UIM. This was replaced by the CIS service in March 2015 and both directly and externally employed staff, in the following areas can be managed:
 - New Starters
 - Managing Change
 - Leavers

2. POLICY STATEMENT

- 2.1. The purpose of this document is to outline the agreed processes required to support the management of access control through Care Identity Services (CIS).
- 2.2. The document will also provide guidance to ensure that relevant applications continue to be operated safely and efficiently through future developments.
- 2.3. The document is not intended to be an exhaustive review of all HR/RA processes procedures but rather will focus on necessary changes to the following key elements:
 - New starter setup (from acceptance of offer of employment)
 - Managing changes to person details, assignments and positions
 - Leaver process
 - Access Control

3. APPLICABILITY

This policy applies to all NHS Staff who require access to NHS Spine services through a smartcard, and any Trust staff who manage access to those services.

Failure to follow this policy by staff may result in action under either the Disciplinary or Capability policies. Other persons may be subject to other action by the Trust.

4. POLICY PROVISIONS

This policy will be reviewed annually as part of the IG toolkit requirements. The Lead RAM will ensure that the policy remains up to date.

5. ASSOCIATED PROCEDURES

Procedures for the management of card services and access to the NHS Spine are detailed in the [HSCIC Policies and Procedures](#). These are updated regularly by the HSCIC.

6. IMPLEMENTATION, MONITORING AND EVALUATION

The RA Manager is responsible for implementation, monitoring and evaluation of this policy as identified in the Trust's Policy on Procedural Documents.

The Information Governance Toolkit assessment will ensure that adequate audit and monitoring is in place and that standards are adhered to. This will be routinely reported to the Governance Assurance Committee.

7. DEFINITIONS

IIM – Integrated Identity Management is the combining of the parallel activities undertaken within Human Resources and the Registration Authority to create a single integrated process.

CIS – Care Identity Service, formerly known as the Identity Access Management, is the new replacement service for the current Registration Authority application

ESR – Electronic Staff Record is the integrated Recruitment, HR, Payroll and learning management system in place within YDH.

ESR-CIS Interface - ESR-CIS Interface can be used to link staff records in ESR to user records in NCRS in order to remove duplication and to drive access control based on the job/position that a person holds.

RA – Registration Authority is an official, or committee, within YDH with appropriate organisational authority who is responsible for ensuring that all aspects of registration services and operations are performed in accordance with national Registration Authority policy and procedures.

Staff – People who are directly employed by, or contracted to provide service to, or are part of an agreement with YDH.

NCRS – The National Care Records Service is an NHS organisation whose objective is to provide patient centred care by ensuring that information is made available wherever and whenever it is needed. This is achieved by the creation of electronic care records which are accessible across the NHS network.

ACP – Access Control Positions provide a simple and effective mechanism for providing users with the access they need in the course of their work. Position Based Access Control (PBAC) grants access to NCRS applications according to the position to which the staff are assigned.

SCR – Summary Care Record is an electronic record containing information about any medicines being taken, allergies or bad reactions to medicines previously taken. Healthcare staff will be able to access this information and prevent mistakes from being made when providing care in an emergency or when a GP practice is closed.

PDS – Personal Demographics Service are electronic records containing demographic information about patients and their NHS Number.

SUS – Secondary Uses Service uses information from patient records to provide anonymised business reports and statistics for research, planning and public health delivery.

Spine – The Spine is a set of national services used by the National Care Records Service which includes PDS, SCR and SUS.

eGIF – Electronic Government Interoperability Framework which defines the technical policies and specifications governing information flows across government and the public sector. They cover interconnectivity, data integration, e-services and content management.

HSCIC – Health and Social Care Information Centre is part of the UK Department of Health replacing the former NHS Information Authority and Connecting for Health.

8. ROLES AND RESPONSIBILITIES

The table below details the CIS roles for the management of identity services:

Role	Job Role / Activity Code
RA Manager	R5080
RA Agent Advanced	R5090 + B0274
RA Agent	R5090
RA Agent (ID Check only)	B0267

Additionally the following have individual responsibility:

8.1. The Chief Executive has overall accountability for all aspects of policy setting and implementation.

8.2. Managers

In order to comply with NHS Employment Check Standards and the YDH's recruitment procedures, managers who have responsibility for recruitment are responsible for:

- Reading this policy and ensuring that they understand its contents
- Implementing and monitoring the operation of this policy within their functional, areas
- Ensuring that staff follow and adhere to this policy at all times
- Ensuring that processes and procedures are in place to facilitate effective compliance with this policy.

8.3. Recruitment and HR Teams

Where a Smartcard is required the Recruitment Officer is responsible for receiving the completed appointment form for staff directly employed by YDH. They must record the outcome of the identity checks using ESR confirming that identity has been verified in accordance with the relevant standards after viewing the identification documents required. Where these are in order, an employee record for that individual will be created in ESR. A new employee who requires a smartcard completes the Staff Trakcare Readiness Assessment form on Y-Cloud which generates a request for a smartcard and the HR team prints and arranges for the Smartcard to be issued.

The Recruitment Officer is specifically responsible for:

- Implementing procedural documents for their area of work
- Updating ESR records for staff directly employed by YDH in accordance with the line manager's requirements which may include changing the ESR assigned position

The HR Team is specifically responsible for:

- Implementing procedural documents for their area of work
- Revoking Smartcard access for staff directly employed by YDH in accordance with the line manager's requirements
- Ensuring that the National RA processes are adhered to within YDH
- Escalating any process, hardware and application problems to the RA Manager
- Ensuring that any material which supports the issue/ revocation of a Smartcard and the Position associated with the card are retained in accordance with the Trust's Records Retention Schedule.
- Ensuring that activities relating to the Registration Authority Agent function are in compliance with the YDH's information governance policies and procedures.

8.4. The Registration Authority

The Registration Authority (RA) team are responsible for ensuring that all aspects of registration services and operations are performed in accordance with national policies and procedures. They are responsible for providing arrangements that will ensure tight control over the issue and maintenance of electronic Smartcards, whilst providing an efficient and responsive service that meets the needs of the users.

The Registration Authority is made up of the following personnel:

- Registration Authority Manager
- Registration Authority Agents
- Deputy RA Manager

The Registration Authority is responsible for:

- Ensuring that the National Registration processes are adhered to
- Ensuring that any local processes developed to support the National Registration processes are adhered to
- Ensuring that there is sufficient availability of resource to operate the registration processes in a timely and efficient manner to meet their organisational responsibilities
- Ensuring that the RA team members are adequately trained and familiar with the local and national RA processes
- Ensure that any positions and associated access profiles are reviewed regularly and accuracy is maintained
- Ensure any positions and associated access profiles in use by the RA comply with Information Governance requirements

8.5. The RA Manager

The RA Manager is responsible for providing a comprehensive RA service to the Trust. This includes establishing an RA team, developing robust processes around them and producing and developing an RA Policy for YDH. In summary:

- To appoint and manage a team of RA Agents and manage cover for those staff
- Ensuring that the National RA processes for Smartcard issue/revocation and profile modification are adhered to within YDH
- Ensure RA Agents are trained and familiar with the standards for eGIF identity checking, the setup and operation of the Registration Authority and this document
- Escalating any process, hardware and application problems to the notice of appropriate the HSCIC team.
- Providing support to RA Agents on process, hardware and application problems

- Review records of lost, stolen or broken Smartcards to identify any potential patterns
- Ensure the Registration Authority functions in compliance with the YDH's Information Governance policies and procedures

8.6. The Deputy RA Manager

The Deputy RA Manager is responsible for:

- Assigning, sponsoring and registering RA Agents, assisting the Registration Authority (RA) Manager in ensuring that there are sufficient resources to operate the registration processes in a timely and efficient manner to meet the YDH's RA requirement
- Ensuring that all RA agents are adequately trained and familiar with the local and national RA policies and processes
- Ensuring that staff members only have one NCRS active Smartcard associated to and issued to them
- Ensuring that there is a sufficient supply of Smartcards and Smartcard hardware for the RA
- Observing the same responsibilities as the RA Agent when performing their RA duties.

8.7. Registration Authority Agents

The RA Agent is responsible for confirming that identity has been verified in accordance with the relevant standards after viewing the identification documents required. Where these are in order, access and addition to the RA spine will be made; the RA Agent assigns the user the Position, takes a photograph and prints and issues the Smartcard.

The RA agent is specifically responsible for:

- Implementing the procedural documents at the local level
- Providing support to the registration authority
- Issuing smartcards to the relevant users who have been sponsored and who have proven identities in accordance with the national process
- Ensuring that the national RA processes are adhered to
- Escalating any process, hardware and application problems to the RA Manager
- Ensuring that activities relating to the registration authority agent function are in compliance with the YDH's information governance policies and procedures.

8.8. Staff Issued with a Smartcard

Staff are responsible for the correct usage of their Smartcard in line with their job role and associated business functions, ensuring that the card is never used by others and their passcodes are never compromised. If staff believe their passcode to be compromised they are responsible for changing them immediately. Advice can be sought via their RA Agent(s), RA Manager or the IT Services Service Desk.

All staff issued with a Smartcard to access NCRS applications are responsible for:

- Complying with the RA Policy and procedures
- Alerting their line manager of any non-compliance with the RA policy.

9. REFERENCE TO OTHER POLICIES

Information Governance Policy

[HSCIC Policy and Strategy](#)

ANNEX A – EQUALITY IMPACT ASSESSMENT TOOL

To be completed and attached to any procedural document when submitted to the appropriate committee for consideration and approval.

		Yes/No	Comments
1.	Does the policy/guidance affect one group less or more favourably than another on the basis of:		Yes, see detail below.
	• Age	No	
	• Disability	No	
	• Ethnic origins (including gypsies and travellers)	No	
	• Gender and transgender	No	
	• Nationality	No	
	• Pregnancy and maternity	No	
	• Race	No	
	• Religion or belief	No	
	• Sexual orientation including lesbian, gay and bisexual people	No	
2.	Is there any evidence that some groups are affected differently?	Yes	Staff who may not hold a passport need alternative forms of ID
3.	If you have identified potential discrimination, are any exceptions valid, legal and/or justifiable?	No	
4.	Is the impact of the policy/guidance likely to be negative?	No	
5.	If so can the impact be avoided?	N/A	
6.	What alternatives are there to achieving the policy/guidance without the impact?	N/A	
7.	Can we reduce the impact by taking different action?	N/A	HSCIC Mandatory Policy

If you have identified a potential discriminatory impact of this procedural document, please refer it to the Trust's lead for Equality & Diversity, together with any suggestions as to the action required to avoid / reduce this impact.

For advice in respect of answering the above questions, please contact the Trust's lead for Equality & Diversity.

Signed – Name:

Date: