Spot check procedure v3.0
This version (v3.0) approved by the IG Committee 2022.01.24

Background
In order to ensure staff understand and comply with procedures that ensure the security assurances outlined in the ScHARR Data Security and Protection Toolkit (DSPT) are met a number of checks are carried out. Maintenance of the asset register is crucial in ensuring and documenting that these checks have been carried out.

Our ScHARR Information Governance policy training states that the Section IG Lead must be informed of any projects using personal data from a third-party provider (e.g. NHS Digital) and ScHARR staff are reminded at intervals of this.

Purpose
This procedure outlines the steps involved in ensuring checks are carried out and maintaining the asset register, as well as who is responsible for this and when these steps occur.

Scope
Any project that uses the ScHARR DSPT as a security assurance must be listed on the asset register.

Procedure
New studies
The ScHARR IG Manager is made aware of a project using data from a third-party provider where the DSPT is required as a security assurance. Either the researcher contacts the ScHARR IG Manager directly, or the ScHARR IG Manager is informed via the Section IG Lead, a member of the Contracts Team in Research Services or because the project appears on the report from NHS digital.

The ScHARR IG Manager reviews any initial documentation provided and, as long as there are no inaccuracies regarding any of the data protection or security assurance information, provides the researcher with the DSPT information. The researcher is reminded that:

- they must provide information for the asset register when requested
- they must keep the ScHARR IG Manager updated of any changes
- they must ensure any data sharing agreement(s) are signed off by a member of the contracts team in research services (ri-contracts@sheffield.ac.uk).
- anyone who will access the data
  - must read the ScHARR IG Policy
  - must have up to date training (including UoS Cyber Essentials Assured Computing)
- must use data storage and computing resources that are compliant with UoS Cyber Essentials Assured Computing and/or the Data Safe Haven (DSH) where a requirement to use the service has been identified in the data management plan
- Must read the Process for projects using the DSPT as the security assurance
- Must read the Information Asset Owner policy
- if they use a mobile device for work purposes (e.g. accessing emails etc) they must confirm it is encrypted
  - (if involving NHS digital data) they must read the data sharing framework contract (DSFC) and read the Process for projects using the DSPT as the security assurance.

This may be a face to face meeting, if the researcher wishes, or communicated via email.

The ScHARR IG Manager adds the data source, title and project lead to the ‘In progress’ tab of the asset register.

Ongoing

Ad hoc checks

The asset register is reviewed regularly by the ScHARR IG Manager for gaps and researchers are reminded to provide the following

<table>
<thead>
<tr>
<th>Updates expected from researcher</th>
<th>Required action by ScHARR IG Manager (all folders are in ScHARR Information Governance &gt; Asset register / Data Sharing agreements)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Provides draft DSA</td>
<td>Review for compliance, ensure contracts team are involved in sign off. Request approved version once signed off. Request data flow and DMP if not also provided</td>
</tr>
<tr>
<td>Provides signed DSA</td>
<td>Save to ‘Copies of project DSAs’ folder and link to asset register, update date from and date to columns. Request data flow and DMP if not also provided. Check there are no conditions to approval, e.g. privacy notice approval and follow up if there are any.</td>
</tr>
<tr>
<td>Provides data flow and DMP</td>
<td>Review for compliance, save to ‘Data flows’ and ‘DMP’ folders and link to asset register. Remind researcher to let IG Manager know when data is received, request details of arrangements for data storage, what software is planned to be used and details of who (including user id) will have access</td>
</tr>
<tr>
<td>Planned data storage, Review for compliance. Update details of data location</td>
<td></td>
</tr>
<tr>
<td>software and data access information provided</td>
<td>(including VM path and name if applicable), software, desktop and people who have access. Add to / check staff with access to data to the tab in the asset register and ensure their training is up to date and they have confirmed they understand that their system use can be monitored and recorded</td>
</tr>
<tr>
<td>Data has been received</td>
<td>Ask for an update on who has access and check arrangements for data storage and access have not changed.</td>
</tr>
<tr>
<td>Notified of access changes</td>
<td>Update people who have access and update staff with access to data to the tab in the asset register; carry out the necessary checks</td>
</tr>
<tr>
<td>Destruction certificate provided</td>
<td>Save to ‘Destruction certificates’. Move record to destroyed tab of asset register and link to asset register.</td>
</tr>
</tbody>
</table>

Regular review of the asset register

Review DSA end dates on the asset register and follow up with researchers regarding any due to expire within the next month. Review any outstanding spot check issues and follow up with researchers.

NHS digital have agreed to provide a monthly report of all UoS DARS applications. The following actions are suggested:

Check that DARS listed as: DSA Active are in the asset register. Query any anomalies and check for any due to expire (send a reminder to researcher to ensure they have plans to either renew the application or destroy the data).

With customer to sign DSA are on the in progress tab (or active tab if renewals). Follow up on status with contracts team and researcher.

Process stage 2 or 3 (e.g. Initial Assessment, Action Plan Active, With DAO) are on the in progress tab (or active tab if renewals). Follow up on status with contracts team and researcher.

Application in Progress are on the in progress tab. Follow up with researcher to ensure they are aware of their responsibilities (see new studies procedure).

Annual checks

In addition to the above checks also review access to data locations with ScHARR-DS (for X drive folders), IT Services (for VMs), or the DSH team (for the DSH); ensure access logs match the asset register. Check with researchers that those with access still require access. Ensure all training is up to date.

Spot check log

In addition to keeping the asset register up to date, keep a log of questions / issues raised with who and on what date as a reminder of what issues are ongoing and their status.
<table>
<thead>
<tr>
<th>Version</th>
<th>Effective Date</th>
<th>Summary of changes</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.0</td>
<td>20-Feb-2020</td>
<td>n/a first version</td>
</tr>
<tr>
<td>2.0</td>
<td>25-May-2021</td>
<td>Addition of mobile device status check; DSPT as a security assurance process and IAO policy.</td>
</tr>
<tr>
<td>3.0</td>
<td>24-Jan-2022</td>
<td>Added References to the Data Safe Haven</td>
</tr>
</tbody>
</table>