

Disposal of Digital Assets Policy

Policy information

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Approved by: Digital Data & Innovation Committee

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Summary of document:

The purpose of this policy is to outline the steps that need to be taken to ensure that all digital equipment is disposed of in the appropriate manner in terms of confidentiality and Waste Electrical and Electronic Equipment (WEEE) legislation and regulations.

Scope:

This policy covers the disposal of all digital equipment in particular the disposal of any computer related equipment computer media, audio tapes and removable media.

The policy applies to all materials which contain confidential information for example: paper records, photographs, computer media and audio tapes

To be read in conjunction with:

[837 - Information Security Policy](#) – opens in new tab

[275 - Secure Transfer of Personal Information](#) – opens in new tab

[494 - All Wales E-mail Policy](#) – opens in new tab

[281 - Mobile Working Policy](#) – opens in new tab

[282 - ICT Security Policy](#) – opens in new tab

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Executive Director job title: Director of Finance

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- 2 – revised policy 26.6.2018
- 3 – revised policy 28.2.2023
- 4 - revised policy 22.01.2026

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Information, Personal Data, Personal Information, Informatics, Transfer of Information, Mobile Working, Screensaver, Information Technology, Acceptable Use Equipment, Information Asset, ICT Asset, Digital

Glossary of terms

ICT – Information and Communication Technology
PC – Personal Computer
WEEE – Waste Electrical and Electronic Equipment
PAT – Portable Appliance Test
Health Board – Hywel Dda University Health Board

Contents



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1. Introduction.....	4
2. Scope	4
3. Aim	4
4. Objectives.....	4
5. Definitions.....	4
6. Disposal of Digital Equipment Procedure.....	6
7. Digital Inclusion.....	7
8. Media Destruction.....	7
9. Incidents	7
10. Responsibilities.....	7

Introduction

The Health Board has a duty of care to ensure that the disposal of digital equipment, especially those with disks or removable media containing information and data, is undertaken with due care and attention. If any files contain personal or other sensitive or confidential data, then special care must be taken to ensure that this information cannot be accessed by anyone. There have been high profile cases where this care has not been adequately exercised; the Data Protection Act/ General Data Protection Regulations 2018 or any subsequent legislation to the same effect requires that these issues are given serious consideration.

In addition, there are obligations that must be met for any person receiving the equipment in relation to its electrical safety that may represent a continuing liability or environmental implications in disposing of computer equipment.

Scope

This policy covers the disposal of digital equipment, in particular: -

- The disposal of any computer-related equipment. This includes servers, connected medical devices personal computers (desktop or laptop), mobile devices (tablets, smartphones), mobile phones, printers, scanners, and any other peripheral devices such as memory sticks.
- The policy applies to all materials which contain confidential information for example computer media and audio tapes.

This policy links to the Health Board's policies covering - Confidentiality, Data Protection, Records Management, and Information Security. Together, these policies form an integral part of the Health Boards approach to Information Governance and Cyber Security.

Aim

The aim of this policy is to outline the steps that need to be taken to ensure that all digital equipment is disposed of in the appropriate manner in terms of confidentiality and Waste Electrical and Electronic Equipment (WEEE) legislation and regulations.

Objectives

The aims of this policy will be achieved through: -

- Effective communication with Health Board employees so they are aware of the procedures to follow.
- Digital department procedures to cover the effective disposal of equipment.

Definitions

Hardware

By its own nature digital equipment is constantly evolving and this can therefore become a very broad category making it impossible to list every single item or group of items within this policy document; however physical assets can be summarised as follows: -

- Desktop Devices:
 - PC or Workstation
 - A Laptop, Tablet Computer or digital mobile device including Apple and Android devices
 - Telephones
- Data Centre Components:
 - Servers, Storage systems, Power Distribution Units
 - Backup Devices, Backup appliances, Magnetic Tapes
- Local or standalone Devices:
 - Printer, Scanner, Multi Function Device (MFD)
 - Security equipment (e.g. CCTV, Door Entry system)
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- Network-attached equipment:
 - Printers, Scanners, MFDs
 - Medical Devices
 - Network Switches, Routers, Firewalls
 - Security equipment (e.g. CCTV, Door Entry systems)
 - Access Control systems such as card swipe systems
- Mobile devices (Cellular / WiFi connections):
 - Smart Phone
 - Smart Tablet
 - DECT Phones and their infrastructure equipment
 - Cellular infrastructure equipment
 - WiFi infrastructure equipment

Software

Providing a complete list of applications used by Hywel Dda University Health Board is not feasible, and detailing all acceptable uses for each application would be an extensive process. However, the software can be summarised as follows. : -

- Desktop Software – all applications and related data loaded onto a Desktop or Laptop computer.
- Server Software – all applications and related data loaded onto a server.
- Hosted Solution – all applications and related data (owned by the Health Board) hosted off site either in the National Data Centres or in a third-party provided Data Centres.
- Software as a Service – all applications and related data hosted in public cloud services such as Microsoft Azure and Amazon Web Services.

Electronic Data

Electronic Data can be summarised as follows: -

- CDs / DVDs
- Backup Tapes
- Memory Sticks
- Videos

Disposal of Digital Equipment Procedure

The Digital Operations Department will assess whether equipment is redundant for its original use. This will be following discussion with the system owner and/ or departmental manager. The disposal of Digital equipment procedures will cover all Health Board Equipment.

Equipment Disposal

Upon request an assessment will be made on the equipment by digital operations staff. Where possible equipment will be redeployed throughout the Health Board or offered to other NHS Wales organisations via the WarpIT portal.

Regardless of the path the equipment has taken there are only three reasons for disposing of equipment, they are as follows: -

- Redundant (fully functioning / not functioning)
- Broken (reasons known / reasons unknown)
- End of Life / Support and hence a Cyber Security Risk

Generally, Digital equipment will reach its natural end of life when it is between five and seven years old; however there are likely to be some exceptional circumstances where equipment becomes redundant mid-term due to specific machines (PCs and Laptops) needing to run specialised software where the specification of the machines has been exceeded.

In all instances an assessment (triage) must be undertaken to determine the validity of disposal of the equipment and to ensure authorisation is granted for the removal of the equipment from the asset system.

Where equipment is determined to be redundant an assessment will be made to determine whether the equipment can be used for digital inclusion.

Redundant Equipment

This is equipment that is no longer fit for purpose and is incapable of running the standard software deployed at the time. Typically, this will be the equipment that is five years of age or older. Redundant equipment that is not working will be disposed.

Broken Equipment

This is equipment that is not working and is out of warranty. Broken equipment that cannot be repaired will be disposed. It is also possible that broken equipment that can be repaired will be disposed when the cost of repair is greater than, equal to or just less than the cost of replacement. It may also be where the cost of repair is financially inappropriate, such as equipment which is nearing five years old is therefore due to be replaced soon.

End of Life

This is equipment which may be functioning correctly but has reached its end of life and is no longer supported by the manufacturer. Such equipment may no longer receive security updates or pose a risk to the Digital Operations of the Health Board. In such circumstances the equipment may be disposed of and replaced as required from available funds.

Disposal Method

In all instances all Health Board owned equipment will be disposed of via the Digital Services approved scheme.

However, for redundant functioning equipment owned by the Health Board, it would be appropriate for this equipment to be reused in another suitable scenario or broken down as spares for other units that may yet have a small element of life within them. If no spares can be claimed from the unit, then it will be disposed of.

Under absolutely no circumstances can any computer equipment be directly sold (or given) to any individual or other organisation. Under no circumstances should any computer equipment be disposed of via undesignated skips, recycling centres or landfill.

All equipment disposals will be undertaken within current and future Waste Electrical Equipment (WEEE) legislation. However, Digital Services reserves the right to review this arrangement, with prior notification, as more equipment falls within the WEEE directive.

When re-deploying equipment, the Digital Operations Department will, if required, arrange for all equipment that does not have an up-to-date Portable Appliance Test (PAT) certificate to be tested prior to redeployment by the Estates Department.

Digital Inclusion

Where equipment is determined to be redundant an assessment will be made to determine whether the equipment can be used to support the Health Board's digital inclusion agenda. If so, the equipment will be securely wiped and provided for use by the digital inclusion team in our local communities to help improve digital accessibility and digital skills.

Media Destruction

Media, which is no longer required (or has passed its effective reuse period), should be dealt with as outlined below.

All media including CD-ROMs, DVDs, Hard Drives, USB memory keys and tapes will be dealt with by the Digital Services approved scheme and will be shredded and therefore destroyed using industry standard equipment.

Incidents

It is the responsibility of ward/ department/ unit managers to report incidents. Advice and guidance regarding confidential waste or record storage can be sought from the Head of Medical Records.

The Health Boards Risk Incident Reporting Procedures, DATIX, and security incidents must be followed, and the investigation/ action accurately documented.

Responsibilities

Proper definitions of roles and responsibilities are essential to assure compliance with this Policy. In summary these are:

Executive Directors

Executive Directors are responsible for the management of risk within their control and in particular are responsible for ensuring their staff are aware of the risks identified within this policy and take responsible action to mitigate them.

Executive Directors must: -

- Ensure procedures are in place within their sphere of responsibility to enable the identification and assessment of risks, including staff training and awareness to mitigate the risks.

Digital Services

Digital Services are responsible for: -

- Assessing whether the equipment could be suitably redeployed in another department or used for digital inclusion.
- Before disposal Digital Services will confirm with the user that no data is held locally which needs to be retained.
- In the event of such data being discovered then the data will be copied for safe storage and security onto network file storage.
- The equipment may be dismantled and used for spare part purposes. In this case the hard disk will be erased to a complete and unrecoverable state.
- If any equipment is un-repairable or has no other useful life it will be disposed of, and the hard disk will be physically destroyed.
- After disposal Digital Services will record disposal on the relevant asset register, including the reason and method of disposal and which technician undertook the task.
- Physical disposal of assets must adhere to WEEE Regulations and ensure that disposal is both secure and environmentally responsible.

Line Managers

Managers are responsible for ensuring that all their staff have read and understood this policy. They must ensure that staff work in compliance with this policy and other appropriate legislation and Health Board policies.

Inform the Digital Service Desk of any digital equipment which requires disposal.

All Staff

All staff - permanent, temporary, or contracted - must be aware of their individual responsibilities for the maintenance of confidentiality, data protection, and information security management and information quality and understand they are required to comply with this policy. Failure to comply with this policy may result in disciplinary action being taken.

Staff must: -

- Confirm to their line manager that they understand this policy and their responsibility for the protection and security of the Health Board information they access.

- Be responsible for ensuring that unauthorised individuals are not able to see any confidential Health Board information or access Health Board systems.
- Should staff become aware that a breach of confidential information has taken place the Health Boards Information Governance incident response process should be followed immediately.